TOWN OF BRISTOL Special Event and Street Use/Closure Permit

Office Use Only					
Permit #:	Date Received:	Town Highway:			
Check all that apply:	[] Special Event	[] Street Usage	[] Street Closure		
A permit is required for the use of public streets, sidewalks, or other Town-owned spaces.					
APPLICANT INFORM	ATION				
Applicant Name:		Phone:			
Mailing address:					
Organization (if applicabl	le):				
EVENT DETAILS					
Event Name:		Event Date(s):			
Event Description:					
Event Start Time:		End Time:			
Rain Date (if applicable):					
LOCATION & STREET USE					
Event Location (address,	streets, public space):				
Will any public streat(s) :	and to be alaged?				
Will any public street(s) need to be closed?: [] Yes [] No If yes, list streets and requested closure times:					
Sidewalk use requested: [JYes []No				
TRAFFIC CONTROL					
Will police detail or traffic control be needed? [] Yes [] No					
Will signage, cones, or barricades be used? [] Yes [] No					
Describe safety measures	or traffic control plans: _				

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Will portable toilets be provided?: [] Yes [] No

Describe trash and recycling plan:

EMERGENCY SERVICES

Will medical or fire services be on-site or notified?: [] Yes [] No

If yes, please explain:

OTHER DETAILS

Live or amplified music? [] Yes [] No
If yes, times:
Food trucks or vendors? [] Yes [] No
If yes, how many?

ATTACHMENTS REQUIRED

Your application must include the following:

- [] Site map showing layout of event, closures, facilities, and access routes
- [] Certificate of Liability Insurance naming the Town of Bristol as additional insured
- [] Notification plan for nearby residents/businesses (if applicable)

PERMIT CONDITIONS

- Applications must be submitted at least 30 days prior to the event.

- Selectboard approval is required for all street usage, closures, or events on public property.

- The applicant is responsible for cleanup, safety, and compliance with all local ordinances and regulations

I certify that the information provided is accurate. I agree to comply with all Town of Bristol policies and assume responsibility for the event as outlined above.

Applicant's signature

Date

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Action by Selectboard:				
[] Approved	[] Denied	Date:		
Conditions of approval:				
Authorized Signature:		Date:		
Title:				