

# **HATFIELD TOWNSHIP**

## **INDOOR EXHIBIT, TRADE SHOW AND PUBLIC EVENT APPLICATION PROCEDURES**

*An Indoor Public Event Operational Permit is required for any exhibit, trade show or an indoor public assembly special event.*

**PART I** – Location of Property – Complete address including city, state and zip code must be provided on all applications.

**PARTS II thru IX** – Complete every section.

**PART X** - Fee

**PART XI** – Sign and date application. If property resident is not the owner of the property, a notarized statement indicating the owner's approval of the proposed display must be submitted with the application.

### **ADDITIONAL INFORMATION**

**FEES** – Permit fees must be submitted with the permit application.

**REVIEW** – The application plans will be reviewed by the Fire Marshal's Office for compliance with the codes of Hatfield Township and the Pennsylvania Uniform Construction Code.

**PERMIT GRANTED** – **If approved, the permit will be processed and issued within thirty (30) business days. The event may not start until a permit has been approved and granted.**

### **Requirements for the Submission of Special Event Plans for Review**

**The permit application package shall be received by Hatfield Township at least 45 days prior to the event and shall include as applicable:**

1. A fully completed Indoor Public Event Permit Application.
2. The following plans and documents:
  - 3 copies of site plans and building plans which detail the location of the event facilities, tents, structures, vehicles, bathrooms, routes of travel, etc. (all plans shall be 11" X 17" minimum size).
  - Proof of Workman's Compensation Insurance.
  - Certificate of Liability Insurance listing Hatfield Township as the insured in the amount of \$1,000,000.00.
  - 1 copy of the Montgomery County Health Department approval for food service.
  - 1 copy of a complete list of any on-site hazardous materials with quantities and a MSDS for each.
  - Proof of event approval from the property owner.
  - An emergency contact person and phone number that can be used during the event.
  - Provide a list and location of all firefighting and first aid equipment available at the event.
  - Details for utility services such as potable water, sanitary waste, power and lighting.
  - Details for the trash receptacles, clean-up of trash, waste materials and debris for the event.
  - Details for traffic control and parking prior, during and after the event.

**Failure to provide all of the above information will result in a delay in the approval of the permit application**

# HATFIELD TOWNSHIP

## Outdoor Special Event Permit Application

### I - LOCATION OF PROPERTY

Address: \_\_\_\_\_ Suite #: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ ZIP: \_\_\_\_\_

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### II - OWNERSHIP

Private  Public  Tenant Tenant Name: \_\_\_\_\_

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### III - IDENTIFICATION – To be completed by all applicants

APPLICANT Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

PROPERTY OWNER Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

EVENT SPONSOR Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

EVENT OPERATOR Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**IV - EVENT DATES AND TIMES**

Date(s): \_\_\_\_\_

Time(s): \_\_\_\_\_

**V - TYPE OF EVENT**

Exhibit             Carnival             Fair             Meeting             Competition

Trade Show         Concert             Sporting Event     Entertainment     Race

Other: \_\_\_\_\_

Open to the Public         Private, Invitation Only Event

Free                     Donation Requested            Admission Fee: \_\_\_\_\_

Anticipated Number of Spectators: \_\_\_\_\_ Participants: \_\_\_\_\_

Alcoholic Beverages will be:         Present         Sold         N/A

Food or Beverages will be:         Sold         Distributed         Served         N/A

Number of Food/Beverage Venders: \_\_\_\_\_

Merchandise will be:             Sold         Distributed

Number of Merchandise Venders: \_\_\_\_\_

Amplified Sound, Such As:         Voice         Recorded Music         Live Band         DJ

Amusement Rides or Devices         Carnival Rides         Moonwalk or Similar

Other: \_\_\_\_\_

Animals: (List and Describe)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**VI - DESCRIPTION OF EVENT**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**VII – PURPOSE OF EVENT**

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**VIII – DESCRIPTION OF PROPOSED EQUIPMENT, AMUSEMENT DEVICES, VEHICLES, STAGING, BLEACHERS, SHELTERS, TENTS, FOOD AND MERCANTILE STANDS, ETC.**

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**IX - EXPERIENCE AND REFERENCES** (List three (3) events of similar size and scope that the operator has actively participated in during the last three (3) years)

Name of Event/Display: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Name of Event/Display: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Name of Event/Display: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**X – FEE (from Resolution 14-26)**

Indoor Conferences, Conventions, Exhibits and Trade Shows/Car Shows  
(Events with vendor booths, tables or displays)

- 1 – 5,000 Square Feet \$40.00
- 5,001 – 50,000 Square Feet \$80.00
- 50,001 Square Feet or Greater \$120.00

Each day or portion thereof beyond one day \$40.00

**XI - SIGNATURE**

*Deposit of check representing the fee for this application does not constitute approval of or granting of same by Hatfield Township. I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his agent and we agree to conform to all applicable laws of Hatfield Township.*

**SIGNATURE OF APPLICANT**

**DATE**