

TUSCALOOSA SPECIAL EVENTS ON PRIVATE PROPERTY PERMIT APPLICATION

Please complete all of the following required fields:

Location Address:		Event Location City/State:	1	ZIP Code:
Location Address:				
		<u></u>		_
		Applicant		
Name:				
Business Name:		City License Number:		<u> </u>
		Event Details		
Set up date:	Time:	Location:		Phone:
Removal date:	Time:	City/State:	//	Zip Code:
Is this a recurring event?	If yes, desc	ribe days and hours of operation:		
Event date begins:	Time:	Event date ends:		Time:
Expected attendance, inc	luding peak attendance	e at any given time:		
Will alcohol be served?	If so, please	explain (will require an alcohol lice	ense):	
Will there be outdoor am	plified sound?	If so, what hours will this occ	:ur?	
Will restrooms be provide	ed? If so	o, please describe:		
Will security be provided?	? If so	o, please describe:		
Please describe plans for	traffic control (ingress	and egress):		
Will there be a temporary	structure, stages, or t	ents? If so, please des	cribe the numbe	r of structures, size of the
structure, electrical hook-	-ups, and structure ma	terials). A site plan will be require	ed depicting loca	tion of trash receptacles,
structures, and parking:				

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Any additional comments or spec	ial instructions for the City:	
Copy of Tuscaloosa City B		a special events permit, where applicable:
Copy of Tuscaloosa City T	emporary Structure Permit	
_ Letter or permission from	the owner of property or property/business ma et up area/design and parking areas	nager being used
 This event must meet the Please submit all additiona A traffic control plan may Please allow 5 business da 	Please understand the following be accommodated on the subject property and not requirements of any other department or agency all applications with this special event application be required if large number of people will be attacked to process application. More time will be necessed or approved until application is deemed to	(business license, alcohol license, etc.). ending. ssary if an alcohol license is required.
	<u>Certification of Applicant</u>	
finding by the zoning official tha	ditioned upon the correctness of the information any relevant item of information is substantial me listed within the removal date field. I certify t	n I have supplied above and may be revoked upo ly incorrect. I further understand that this perm hat all of the above information is true and correc
☐ I HAVE REVIEWED, CO	OMPLETED, & AGREE TO ALL SUBMITTIAL REQU	REMENTS ON THIS APPLICATION
Print Name:	Signature:	Date:

PLEASE SUBMIT AN ELECTRONIC COPY OF THIS DOCUMENT AND ALL NECESSARY SUPPORTING MATERIALS TO:

Office of Urban Development:

1

2201 University Boulevard, Annex III

Email:

Planning Division

Tuscaloosa, AL 35401

planinfo@tuscaloosa.com

Comments from Departments:

PLANNING:	 	
FIRE DEPT:		
BUILDING:		
REVENUE:		
POLICE:		
OCE (if applicable):		
OCA (if applicable):	 	