

# \_\_\_\_\_  
Received: \_\_\_\_\_  
Approved: \_\_\_\_\_  
Disapproved: \_\_\_\_\_

**CITY OF BREVARD  
APPLICATION FOR SPECIAL EVENT/ PARADE  
TEMPORARY USE AND  
SIDEWALK, STREET AND PARKING SPACE  
CLOSURE**

**(Applications must be received 45 working days before the proposed event to be considered)**

In accordance with applicable provisions of the Brevard City Code, the applicant described herein is **GRANTED/ DENIED a Parade/ Event/ Closure Permit** (and **Special Permit** where indicated) for the date, time, place and purpose as indicated. By evidence of the signature of the applicant on this permit, said holder agrees to comply with all applicable City rules, regulations and conditions of the permit, and to forever bind himself and its successors and heirs, to indemnify and hold harmless the City of Brevard in all respects against any and all claims arising out of or related to the issuance of this Permit (and Special Permit where indicated).

**APPLICANT/ PERMIT HOLDER:** \_\_\_\_\_  
(Name of Sponsoring Individual/ Organization)

By: \_\_\_\_\_ Date: \_\_\_\_\_  
(Authorized Individual- Signature Required)

Address: \_\_\_\_\_ Telephone No: \_\_\_\_\_  
\_\_\_\_\_

This is a (check one):

- Special Event on Public Property (Festival, parade, use of public parks, and similar) - \$200 review fee, plus \$500 reimbursable bond [see page two for bonding details].
- Special Event on Private Property - \$0
- Public Street/ Sidewalk/ Parking Space Closure - \$50
- Temporary Uses, All Other - \$50

Estimated Attendance: \_\_\_\_\_

**Please describe Purpose of Parade/ Event or Closure needed:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**[NOTE: Applicant shall provide a map illustrating the geographic scope of the event. Map will include all streets, sidewalks and parking spaces affected by the Special Event. Map will be as detailed as possible and subject to review as an integral part of the application. COMPLETE Digital submissions in Adobe .pdf format are encouraged.]**

**Will the event require sidewalk/streets to be closed?** \_\_\_\_ Yes \_\_\_\_ No

**Place of Event:** \_\_\_\_\_  
\_\_\_\_\_

**Date & Time Event:** \_\_\_\_\_

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**Route of Parade/ Event** (use additional sheets as necessary): \_\_\_\_\_

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**Proof of Liability Insurance Required?** \_\_\_\_\_ Yes \_\_\_\_\_ No

[If the proposed Event is to be held on City property or public Streets, a General Liability Policy in the amount of \$2,000,000.00 (aggregate) shall be required with the City of Brevard named as an additional insured on the policy. A copy of the policy shall be attached to this application]

**Damage to City Property / Exigent Circumstances Bonding— Bond Requirement / Purpose:**

The purpose of the bond is to provide an instant surety in the event there is damage (whether accidental or intentional) to any City Property; or to address any condition that manifests, due to an overt act or an act of omission by any permitted participant of the Special Event that requires additional City personnel to remedy that condition. This “Damage / Exigent Circumstances Bond” is generally a requirement for all Special Events, but may be waived at the discretion of the approving authority where no risk of damage or exigent circumstances occurring is evident or for certain events that are sponsored or endorsed by the governing body. Bonding concerning animal-related events/exhibitions shall not be waived.

**Bond specifics / Invoking the Bond:** The Planning Director or other approving authority may invoke the bond upon receipt of information, provided in writing, by the appropriate City Department head or designee, justifying such an action.

**Bond Deposited in the amount of \$**\_\_\_\_\_ **as specified by the Planning Director, has been received by Cash** \_\_\_\_\_ **or Check**\_\_\_\_\_

**Special Permit for Animals Required?** \_\_\_\_\_ Yes \_\_\_\_\_ No

If Yes, Bond Deposited in the amount of \$50.00 (5 or less animals), \$100 (5 or more animals) received by Cash\_\_\_\_\_ or Check\_\_\_\_\_

**PARADE/ EVENT/ CLOSURE APPROVED BY:** \_\_\_\_\_  
(Review Officer)

Date: \_\_\_\_\_

**FOR INTERNAL OFFICE USE ONLY**

**Event Holder Consultation / coordination meeting (required within two of submittal, if feasible)**

**Date:** \_\_\_\_\_

**Forwarded to TRC (if required) - Date:** \_\_\_\_\_ **NCDOT Permit requested** \_\_\_\_\_

**Forwarded to City Council (if required) - Date:** \_\_\_\_\_ **NCDOT Approval/Denial date** \_\_\_\_\_

**Inter-Agency Event Notification – Date:** \_\_\_\_\_

**REVIEWED and RECOMMENDED for:** APPROVAL: \_\_\_\_\_ DISAPPROVAL: \_\_\_\_\_

Police Department: \_\_\_\_\_ Date: \_\_\_\_\_

Fire Department: \_\_\_\_\_ Date: \_\_\_\_\_

Public Services Director: \_\_\_\_\_ Date: \_\_\_\_\_

*(If required review)*

**Temporary closures and traffic control to be provided by Brevard Police Department and Brevard Fire Department with additional agencies as needed listed below.**

\_\_\_\_\_  
Police Department: \_\_\_\_\_ Date: \_\_\_\_\_

**Submit Written Concerns and Comments Below:**

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

**Permit Disapproved (Reason):**

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

**DEPARTMENTS NOTIFIED:**

Police: 883-2112

Public Services: 884-2171

Finance: 885-5606

Fire: 883-3333

**Bond returned to applicant by:** \_\_\_\_\_ **On (Date):** \_\_\_\_\_

**Bond invoked by City** [attached written finding as to circumstances]

\_\_\_\_\_  
(Authorized by)

\_\_\_\_\_  
(Date)

**North Carolina Department of Transportation**  
**Special Event Request Form**  
Revised 8/5/14, Effective 7/31/15

This request form is required for non-governmental entities for all special events requiring a road, lane, and/or shoulder closure, or repurposing a State Highway System facility for something other than its intended use, except where a county or municipality is regulating the use of the highways in accordance with [General Statute §20-169](#). This form must be submitted with a formal request to the appropriate Division Engineer(s) at least sixty (60) days prior to the scheduled beginning of the event. See a listing of the Highway Divisions and their contact information at the following URL:

<https://apps.dot.state.nc.us/dot/directory/authenticated/UnitPage.aspx?id=630>

**Section A: Event Information**

Name of Event: \_\_\_\_\_

Type of Event: \_\_\_\_\_

County/Counties: \_\_\_\_\_

City/Cities: \_\_\_\_\_

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

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

Primary Sponsoring Organization: \_\_\_\_\_

Anticipated number of participants (estimate): \_\_\_\_\_

Anticipated number of spectators (estimate): \_\_\_\_\_

Approximate distance in miles: \_\_\_\_\_

Requested Action(s):       Road Closure       Lane Closure       Shoulder Closure  
(Check all that apply)       Repurposing a State Highway System facility for something other than its intended use

**Section B: Contact Information**

Director/Organizer Name: \_\_\_\_\_ Email: \_\_\_\_\_

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

Telephone 1: \_\_\_\_\_ Telephone 2: \_\_\_\_\_ Fax: \_\_\_\_\_

Responsible Local Government: \_\_\_\_\_

Local Government Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_

Responsible Law Enforcement Agency: \_\_\_\_\_

Law Enforcement Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Section C: Support Material (check list)**

The following support documentation must be attached to this request before it will be considered (as applicable following discussions with the local Highway Division(s))...

- 1. Detailed location(s) of event including maps indicating proposed route(s) used by the event. Any changes to the proposed routes shall be submitted as soon as the change is made.
- 2. Detailed description of the event and how it will affect the route(s) used by the event.
- 3. Written acknowledgement and approval by all local governments whose jurisdiction the event is being held in.
- 4. Written acknowledgement and approval by local law enforcement and/or the State Highway Patrol.
- 5. Type, description, and location of any proposed temporary lane closures/interference, road closures/interference, traffic control and signing with appropriate maps, sketches, detour routes, and written acknowledgement from the agency providing the temporary closures/interference, traffic control, and/or signing accepting responsibility for such.
- 6. Description of notification to residents along the route as a safety and informational service.
- 7. Waiver modification or insurance (select one)
  - a. Addition of the State of North Carolina and the North Carolina Department of Transportation into participant release waivers (see Appendix A). A copy of a blank waiver shall be provided.
  - OR –
  - b. Certificate of liability insurance as follows:
    - General Liability, Each Occurrence: minimum amount of \$1,000,000
    - Description field: name and type of the event (as indicated in Section A, above)
    - Description field: the State of North Carolina and the North Carolina Department of Transportation named as additional insured parties (this is at the discretion of the individual insurance company)
    - Note – Additional liability insurance may be requested at the discretion of the Department

**Section D: Terms and Conditions**

The following applies to all approved events...

- 1. Requestor shall be responsible for proper closure of the lanes/roads according to the [Manual on Uniform Traffic Control Devices \(MUTCD\)](#).
- 2. Requestor shall be responsible for providing all necessary traffic control using the appropriate law enforcement agency/agencies or individuals trained in traffic control as set forth in [General Statute §20-114.1](#).
- 3. Requestor shall be responsible for notification of all emergency services and other responders of any impending closures and/or interference.
- 4. Event shall be supported by, or endorsed by, the local governing body/bodies.
- 5. If the event is a bicycle race, requestor shall be responsible for following rules and statutes specific to bicycle racing as provided for in [General Statute §20-171.2](#).
- 6. Requestor shall ensure that all debris, litter, decorations, and other items associated with the event are removed following the event.

**Section E: Signatures**

Requestor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Appendix A**

**Example of Including the State of North Carolina and the North Carolina Department of Transportation in Release Waivers**

\*\*\* Only required if not submitting a certificate of liability insurance \*\*\*

[EVENT NAME]  
**AGREEMENT TO PARTICIPATE RELEASE WAIVER**

In consideration of being allowed to participate in any way in [Organization Name] related events and activities; the undersigned acknowledges, appreciates and agrees that:

1. The risk of injury from the activities involved in [Event Name] is significant, including the potential for permanent paralysis and death; and,
2. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the releasees or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my participation, I will remove myself from participation and bring such to the attention of the nearest [Organization Name] representative; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release and hold harmless [Organization Name], their officers, officials, agents and/or employees, volunteers, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event.
5. **I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release and hold harmless the State of North Carolina, the North Carolina Department of Transportation, [County Name] County, [Municipality Name, if applicable], their officers, officials, agents and/or employees, volunteers.**
6. I grant to [Organization Name] my permission to use without charge any and all photographs, video reproductions or other like kinds of image productions taken during the event.
7. I understand that [Event Name] and its staff are not responsible for the loss, theft, or any damages to personal property which includes, but is not limited to bicycles, vehicles, tents, trailers, luggage, etc.
8. I understand that I can be removed from the ride at any time for any reason with no refund.

I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date