Special Event License Application

City of Roseville
2660 Civic Center Drive, Roseville MN 55113
651-792-7001

Name of Event _____

Event location _____

Contact person _____

Mailing Address _____City_____Zip_____

Email_____

Phone number including area code _____

Date(s) of Event _____ (Not to exceed three days)

Specific time: from _____ to _____ Estimated Attendance _____

The City requires an emergency plan that details procedures for responding to an emergency be submitted to the Roseville Fire Chief. The City may require the applicant employ at their own expense security personnel necessary to protect maximum number of persons in attendance and to preserve order in and around event site as determined by the City. No license shall be issued unless the City Police and Fire Departments have approved the security plan. Events where more than 1,000 people will congregate, the applicant shall provide trained crowd managers.

Security Plan Required? Yes □ No□

Description of Event:

_____

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_____

Notification: The applicant shall provide a 10-day notice via postal mail to property owners within 500 feet. The City will provide the applicant the mailing list once the application is approved.

Will traffic be affected?	Yes □	No□	If yes, traffic plan and map are required
Will you be selling food?	Yes □	No□	Contact Ramsey County for Food License
Will you be selling alcohol?	Yes □	No□	Temporary Liquor License and Liquor Liability Certificate of Insurance required

Will you have amplified audio? Yes ☐ No☐

The amplified music and/or speaking can only be for a period of four hours or less between the hours of 12:00 and 10:00 p.m., sound cannot exceed 80 decibels as measured 50 feet from the property line. Speakers are to be positioned in the least obtrusive manner to the surrounding area.

Onsite contact person

*Name:*_____

Phone Number _____

Fees: There is a $75 administrative fee. Use of city services and personnel may increase the fee. A cash deposit may be required prior to the special event based on the anticipated and potential cost to the City.

Please sign and date acknowledging receipt of the Special Events Policy

Signature _____ Date _____

Return completed application form, payment, and insurance certificate 30 days in advance of your event to:

City of Roseville/City Manager's Office
2660 Civic Center Drive
Roseville, MN 55113
pat.trudgeon@cityofroseville.com

For Office Use Only:

Public Works

Received on _____ Received by _____

Approved by_____ Date _____

Notes:

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Police

Received on _____ Received by _____

Approved by_____ Date _____

Notes:

Community Development

Received on _____ Received by _____

Approved by_____ Date _____

Notes:

Fire

Received on _____ Received by _____

Approved by_____ Date _____

Notes:

Parks

Received on _____ Received by _____

Approved by_____ Date _____

Notes:

Administration

Received on _____ Received by _____

Approved by_____ Date _____

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Issue Date_____
License # _____
Notes _____
Fees _____
Deposit _____
Amount paid _____