



BOROUGH OF HUMMELSTOWN

Founded in 1762

Incorporated August 26, 1874

261 QUARRY ROAD
 HUMMELSTOWN, PA 17036
 www.hummelstown.net

PHONE: (717) 566-2555
 FAX: (717) 566-3324

Special Event Permit Application

To be completed by Applicant

Applicant Name:		Date:	
Applicant Address:			
Applicant Phone:		Applicant Email:	
Name of Sponsoring Organization/Group:			
Is Sponsoring Organization/Group an IRS 501(c)(3) nonprofit entity?			
Sponsoring Organization/Group Address:			
Sponsoring Organization/Group Phone:		Sponsoring Organization/Group Email:	
Applicant's Relationship to Sponsoring Organization/Group:			
Name of Event:			
Purpose/Nature of Event:		Expected Attendance (100 person minimum)	
Date of Event:	Rain Date (if applicable):	Start Time (including set up):	End Time (including pack up):
Will alcoholic beverages be served at the event YES NO		If so, what kind of alcoholic beverages? (e.g. beer, wine, liquor, other)	
Name of Alcoholic Beverage Vendor (if applicable). (If more than one vendor, please attach separate documentation):			
Business Address of Alcoholic Beverage Vendor:			
Name of Alcoholic Beverage Vendor Contact Person:			
Alcoholic Beverage Vendor Phone:		Alcoholic Beverage Vendor Email:	

Complete this section if applicant is an IRS 501(c)(3) Nonprofit Organization

Will this be a ticketed event? (Specify whether tickets will be sold at the event and/or in advance of the event?)

Ticket Price:	Percentage of Proceeds Donated to Beneficiary Charity:
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Beneficiary Charity Name (please attach proof of Beneficiary Charity's nonprofit status):

Beneficiary Charity Address:

Beneficiary Charity Phone:	Beneficiary Charity Email:
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Beneficiary Charity Contact Person:	Beneficiary Charity Email:
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Official Use by Borough Staff Only

Date Item Received	Required for Consideration of Application	
	A \$250.00 fee is included with application submittal - payable to the Borough of Hummelstown.	
	Certificate of Insurance naming the Borough of Hummelstown as additionally insured in the amount of \$1,000,000 submitted with applications.	
	Proof of licensure and/or permit by the Pennsylvania liquor Control Board authorizing the sale and consumption of alcoholic beverages at Schaffner Park submitted with application.	
	Proof of nonprofit status Applicant and Beneficiary Charity , if applicable, submitted with application.	
	Proof of certification or Server/Seller training from a Pennsylvania alcohol service program (e.g. RAMP) for all individuals serving/selling alcoholic beverages and individuals checking IDs at the Special Event submitted with application.	
	Vendor information and proof of health/Mercantile licenses for all vendors participating in the Special Event submitted with application.	
	Required narrative description of Special Event, including map, and responses to Special Event inquiries, as applicable, submitted with application.	
Date Application received:	Date of regulate Meeting/Application Considered:	Date Approved/Rejected:
Police Personnel Required:	Fire/EMS Personnel Required:	