

**CITY OF ST. JOHNS
APPLICATION FOR SPECIAL EVENT PERMIT**

- Police and Fire Protection requested
- Health and sanitation facilities
- Medical facilities and services including emergency vehicles and equipment
- Vehicle access and parking facilities
- Facilities for clean up and waste disposal
- Noise control and abatement

I do attest and affirm that the above and attached information is true and accurate to the best of my knowledge and that I am authorized to apply for a Special Event permit on behalf of the above named Organization.

I/we agree to assume the defense of, and indemnify and save harmless, the City of St. Johns, its City Commissioners, Boards, Officers, Employees and Agents from all suits, actions, damages or claims to which the City of St. Johns may be subjected, of any kind or nature whatsoever, resulting from, caused by, arising out of, or as a consequence of, the issuance of the Special Event permit.

I/we agree to be responsible for the removal of all equipment, paraphernalia, waste, trash, and other personal property belonging to or resulting from the event.

I/we agree to reimburse the City of St. Johns any costs or expenses incurred by the City in conjunction with the event including, but not limited to, any extraordinary public safety services, trash or waste removal, equipment removal or damages caused by or resulting from the event.

Signature

Date

OFFICE USE ONLY

- Application Complete
- Approved
- Denied

Date received: _____

Application/Permit # _____

Reasons: _____
