# Township of Uxbridge



**Special Event Permit Application** 

# By-law No. 2014-020 – Regulating and Governing the Holding of Special Events

#### \* Application Instructions

- Please complete all applicable sections.
- All required documents and fees must be submitted for the application to be processed.
- A checklist is provided on the next page to assist you.

• Applicant Information	
Special Event Permit Holder (Legal Name):	
<b>Event Operating Name (if different):</b>	
Name of Applicant:	
(If different from Permit Holder)	
Municipal Address of Event:	
Phone Number:Email Address:	
Mailing Address:	



Does the proposed event comply with Zoning By-law No. 1981-019  ☐ Yes ☐ No	), as amended?	
• Event Details		
Brief Description of Event: (Include type of event, estimated attendance, date(s), and activities)		
• Acknowledgement		
By signing below, I certify that the information provided is complete a comply with all provisions of Township of Uxbridge By-law No. 2014 conditions of approval.		
Signature of Applicant: Date:	Date:	
<b>✓</b> Application Checklist		
The following supporting documents must be attached to this applicat (Please check the boxes to confirm inclusion)	ion:	
Required Document	Attached	
Criminal Reference Check (Permit Holder)	□ Yes □ No	
Original Insurance Certificate	□ Yes □ No	
Property Owner's Written Approval (if applicable)	□ Yes □ No	
Detailed Site Plan (including parking, washrooms, water source, garbage, etc.)	□ Yes □ No	
Health Department Approval (Durham Region Medical Officer of Health)	□ Yes □ No	

#### **Required Document**



control)	ces – crowd & traffic	□ Yes □ No
Fire Department Approval (Fire Chief – fire prot	tection plan)	□ Yes □ No
First Aid Confirmation (e.g., St. John Ambulanc	e)	□ Yes □ No
Building Department Approval (permits, washro OBC)	om facilities – per	□ Yes □ No
Signage Review (By-law and Building Departme	ents)	$\square$ Yes $\square$ No $\square$ N/A
AGCO Special Occasion Permit		$\square$ Yes $\square$ No $\square$ N/A
Durham Food Safety Inspection Reports (if food	vendors are present)	□ Yes □ No
Amusement Device List & Inspection Certificates (under Technical Standards and Safety Act, 2000)		□ Yes □ No □ N/A
• Final Department Approvals (Interna	al Use Only)	
• Final Department Approvals (International Control of these must be signed prior to permit issuance)	al Use Only)	
•	· ·	ature

#### •

### **Submission Instructions**

Submit the completed application and fee to: Clerk's Department

Township of Uxbridge
51 Toronto Street South, Box 190
Uxbridge, ON L9P 1T1
Clerks@uxbridge.ca



! Note: No permit will be issued until all fees are paid, all approvals obtained, and any outstanding Township business taxes are cleared.

#### Fee Schedule

Description	Fee
Special Event Permit	\$500.00
Permit Replacement Fee	\$25.00
Permit Amendment Fee	\$50.00
Hearing Fee (if required)	\$125.00
Security Deposit (minimum)	\$2,500.00

# **6** Accessibility

Township documents are available in alternate formats upon request.

Submit the Accessibility Request for Alternate Formats Form or contact the Accessibility Coordinator at:

**८** 905-852-9181 ext. 209 | **№** Clerks@uxbridge.ca

## Privacy Notice

Personal information on this form is collected under the authority of the *Municipal Act, 2001* and *Freedom of Information and Protection of Privacy Act*, R.S.O. 1990, c.F.31, s. 39(2). It will be used to administer and enforce the Township's Special Event Permit Program. Questions may be directed to the Clerk's Department at the address listed above.



GL Code for Processing: 1-13-132-0164-9317
Description: By-Law Special Event Application