24 N. Black Horse Pike
Runnemede, NJ 08078
Phone: (856) 939-5161
www.runnemedenj.org

Special Event Form For Community Gatherings

MUST BE SUBMITTED TO THE BOROUGH ADMINISTRATOR'S OFFICE NO LESS THAN 30 DAYS PRIOR TO EVENT

Type of Event/Activity:_____

Host Organization's Name and Address: _____

Host Organization Contact: Name_____

Phone Number:(H) _____ (C) _____

Location of Event/Activity: _____

Date of Event/Activity: Start _____ End: _____

Time of Event/Activity: Start _____ End: _____

Estimated Number of Participants: _____(events of 100 participants or more)

SPECIAL EVENT DETAILS:

Event Name: _____

Description of Event: _____

Number of Staff Vehicles Anticipated:_____

Parking and Transportation Plan:_____

Waste Management (Trash disposal plan): _____

Temporary structures, please provide sizes (tents, canopies, etc.): _____

EMERGENCY PERSONNEL NEEDED

Will Police personnel be needed: ☐ Yes ☐No

If yes, please include arrangement details: _____

Will EMS be needed: ☐Yes ☐No

If yes, please include arrangement details: _____

Will Fire personnel be needed: ☐ Yes ☐ No

If yes, please include arrangement details: _____

BOROUGH REVIEW:

Special Event Permit: ☐ will be required ☐ will not be required

Basis of Determination: _____

_____

Approving Officer: _____ Title: _____

Signature: _____ Date: _____

ACTION PLAN/ DESCRIPTION OF EVENT (REQUIRED):

ADDITIONAL REQUIREMENTS/ PERMITS:

The Borough may impose reasonable conditions on any Special Event Permit, including but not limited to police staffing, traffic control, safety measures, insurance, indemnification, sanitation, and escrow for municipal costs.

Fire Safety Permit _____

Food Handling Approval: _____

Certificate of Insurance (when applicable): _____

ADDITIONAL CONSIDERATIONS: _____

_____

_____

APPLICANT SIGNATURE: _____ DATE: _____

BOROUGH USE ONLY

Notification and Authorizations:

Police Chief: _____ Approval: _____ Disapproval: _____

Fire Chief: _____ Approval: _____ Disapproval: _____

EMS Chief: _____ Approval: _____ Disapproval: _____

DPW Superintendent: _____ Approval: _____ Disapproval: _____

OEM Coordinator: _____ Approval: _____ Disapproval: _____

Public Events Director: _____ Approval: _____ Disapproval: _____

BOROUGH ADMINISTRATOR'S SIGNATURE: _____ DATE_____