



# BOROUGH OF PERKASIE

620 West Chestnut Street P.O. Box 96  
Perkasie, PA 18944

215-257-5065  
Fax 215-257-7673

## EVENT PERMIT APPLICATION 2018

Request required at least **45** days prior to event.

**EVENT TYPE** \_\_\_\_\_

(Parade, Block Party, Festival,  
5K Run, Reunion, Fundraiser, etc. )

**APPLICANT or SPONSOR:** \_\_\_\_\_

(Name & Address)

**EMAIL** \_\_\_\_\_@\_\_\_\_\_.

**ESTIMATED NUMBER OF PERSONS ATTENDING WILL BE:** \_\_\_\_\_

**TELEPHONE:** (Please provide the best number to call to reach you on the day of the event.)

Primary Contact \_\_\_\_\_

Secondary Contact \_\_\_\_\_

**DATE(S) OF EVENT:** \_\_\_\_\_

**TIME (To - From):** \_\_\_\_\_

**LOCATION:** \_\_\_\_\_

**ROADS TO BE CLOSED**

**OR LIMITED PARK ACCESS**

**DESIRED:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EVENT ROUTE:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please check appropriate answers

Yes No

**NOTE:**

**POLICE / FIRE POLICE REQUESTED:**  
**PARKING RESTRICTIONS:**  
**BARRICADES REQUIRED:**  
**ELECTRIC SERVICE REQUIRED:**  
**TRASH COLLECTION REQUIRED:**


*Applicant may be responsible for traffic control charges or other fees associated with event requirements.*

**SPECIAL REQUIREMENTS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CERTIFICATE OF INSURANCE: All permits require a Certificate of Insurance, naming Perkasio Borough as Certificate Holder, evidencing \$1,000,000 in Comprehensive General Liability Insurance. This is due no later than 4 weeks prior to the event. The Borough reserves the right to cancel an event if the proper paper work is not submitted.**

Applicant certifies that the above information is true and correct, and they are familiar with the rules and regulations of Perkasio Borough as set forth in the Code of Ordinances, Section 115.

Date of Application: \_\_\_\_\_ By: \_\_\_\_\_  
Title: \_\_\_\_\_

APPROVED: This \_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_, subject to the following conditions:  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Mayor / Borough Manager

**Distribution:** Circle appropriate department

Police Department  
Fire Department  
EMS

Public Works Department  
Electric Department  
Fire Police

Parks & Recreation  
Bucks County Communications  
Bucks County Board of Health