



Special Event Permit Application

The City of Worcester is proud to support and host a variety of Special Events that contribute to the spirit and vitality of our city. Please refer to the Special Events Planning Guidebook, to aid in the completion of your application. Each part of the application has a corresponding section in the guidebook. Please fully complete all application information; incomplete applications will be returned. For inquiries, contact SpecialEvents@WorcesterMA.gov.

Please note the following information:

- **Special Event Permit Applications should be submitted at least 90 days prior to the requested date of event.**
- If event is hosted in City Park, complete the **Permit Application for an Event in a Park:** www.worcesterma.gov/parks/plan-an-event.
- If event qualifies as an Expressive Event of a Time Sensitive Nature, complete the **Expressive Event Permit Application:** www.worcesterma.gov/parks/plan-an-event.
- To display a cultural flag at City Hall, complete the **Request to Display a Cultural Flag:** www.worcesterma.gov/human-rights/cultural-flags.
- After staff review of application, all additional permit fees must be submitted to obtain approval of application. Fee schedule for all permits may be found in the Special Events Guidebook (page 28).
- Additional event permits must be approved 14 days prior to event, except in extenuating circumstances.

SPONSORING ORGANIZATION

Select Type of Organization:

Commercial (for profit)

Individual

Nonprofit with 501(c)(3) exemption

Other

Organization: _____ Event Coordinator: _____

Address: _____

City, State, Zip Code: _____

Business Phone: _____ Cellphone: _____

Email Address: _____ Website: _____

Contact Person(s) On-site: _____ Cell Phone : _____

Note: This person must be in attendance for the duration of the event and be immediately available to City Officials at all times.

Please list any professional event organizer or event service provider hired by your organization, authorized to work on your behalf, to produce this event.

Professional Event Organizer Name: _____

Address: _____

City, State, Zip Code: _____

Business Phone: _____ Cellphone: _____

Email Address: _____ Website: _____

EVENT SUMMARY

Event Title: _____

Event Date(s): _____ Event hours from: _____ am/pm to: _____ am/pm

(if applicable) Event day 2: _____ Event hours from: _____ am/pm to: _____ am/pm

(if applicable) Event day 3: _____ Event hours from: _____ am/pm to: _____ am/pm

Set-up/Assembly/Construction:

Date: ____/____/____ Start Time: _____ am/pm

Breakdown:

Date: ____/____/____ Completion Time: _____ am/pm

Location(s): _____

Specify property type: Public Park Street Block Multiple Streets Private
 Other: _____

Number of Participants/ Spectators: _____ Number of Personnel/Staff: _____

Total Anticipated Attendance: _____

Note: The number of attendees at your proposed event will determine what type of Proof of Liability Insurance you will need. Attendance numbers will also be utilized to determine if Police and/or Fire Detail are required. See page 6 in the Special Event Guidebook.

Type of Event (Please check all that apply):

- | | | |
|--------------------------------------|----------------------------------------------|----------------------------------------------------------------|
| <input type="checkbox"/> Block Party | <input type="checkbox"/> Farmers Market/Fair | <input type="checkbox"/> Parades /Procession |
| <input type="checkbox"/> Carnival | <input type="checkbox"/> Festival | <input type="checkbox"/> Rental of Public Building or Facility |
| <input type="checkbox"/> Circus | <input type="checkbox"/> Fine Arts Exhibit | <input type="checkbox"/> Run/Walk |
| <input type="checkbox"/> Concert | <input type="checkbox"/> Picnic | <input type="checkbox"/> Other – Please describe below: |

Please describe the scope of your setup/assembly work/breakdown (specific details). Use additional pages if necessary.

EVENT PLAN - TEMPORARY STRUCTURES

Will your event have any of the following (please check all that apply)?

- Fencing
- Signs, banners, decorations
- Special Lighting
- Staging
- Tents larger than 20'x20'

EVENT PLAN - VENDORS AND CONCESSIONS

Are you requiring admission fees / donations to enter your event?

Yes / if yes, cost of admission: _____ No

What kind of barriers will be used to close off the area?

Will there be vending? Beverage Food Goods Services Total # Vendors: _____

Will food be sold, served, sampled or given away? Yes No

Note: A [Temporary Food Permit](#) may be required. Contract Inspectional Services 508-799-1198x33030.

Will there be food trucks/trailers? Yes, if YES, estimated number: _____ No

Note: Inspectional Services and the Fire Prevention Office will require a list of vendors for review.

Will items or services be sold at the event? Yes, if YES, please describe: _____ No

Note: The sale of manufactured/mass-produced goods will require a [Hawkers and Peddlers Permit](#) approved by the Worcester Police Department and the Commonwealth of Massachusetts (508) 799-8606.

Will the event involve the sale or use of alcoholic beverages? Yes No

Location: _____

Note: The sale or use of alcoholic beverages will require a [Liquor License](#) completed at least 30 days prior to event date and approved by the License Commission. Attendance of a License Commission meeting required.

Please contact the Worcester Fire Department (508) 799-1822 for permits for the following:

Will the event include open flames, heaters, cooking/propane, pyrotechnics/fireworks/flame effects, fire performers or cannon firing? Yes No

If yes, please describe: _____

EVENT PLAN - ENTERTAINMENT AND ACTIVITIES

Entertainment:

Are there any musical entertainment features related to your event? Yes No

What type of live Entertainment will be featured at your event?

- ◆ Bands
- ◆ Dance
- ◆ DJS
- ◆ Jugglers
- ◆ Other: _____

Please describe: _____

Note: The inclusion of live entertainment may require an [Entertainment License](#) to be approved by the License Commission. Attendance of a License Commission meeting may be required..

Number of Stages: _____ **Number of Bands:** _____

Sound Amplification: Start Time: _____ am/pm - Finish Time: _____ am/pm

Sound Checks prior to event: Start Time: _____ am/pm - Finish Time: _____ am/pm

Please describe the sound equipment that will be used for your event:

Name of Sound/Production Company: _____

Note: A Sound Permit issued by the Police Department may be required. Contact Police Department 508-799-8606.

Any Body Art and/or Temporary Tattoos? Yes No

Any Petting Zoos, Exhibition of Animals, Hayrides? Yes No

Note: If yes, you must request a Permit to Exhibit, Raise, or Keep Animals or Birds from the Worcester Police Department. Please contact the Worcester Police Department 508- 799-8606.

Please state whether as part of the entertainment any person will be permitted to appear on the premises or depicted in any motion picture or television screen, in any manner or attire so as to expose to public view any portion of the pubic area, anus, or genitals, or any stimulation thereof, of whether any female person will be permitted to appear on the premises in any manner or attire as to expose to the public view any portion of the breast below the top of the areola, or any simulation thereof. Yes No

Electrical Services:

Will your event require Generators? Yes No

If yes, please provide name of vendor: _____

Will your event require electricity from a City-owned facility? Yes No

If yes, please explain: _____

Note: Fees will apply. Contact Department of Public Facilities at 508-799-8588.

EVENT OPERATION - SANITATION AND WASTE MANAGEMENT

Sanitation:

If your event will have portable toilets, please complete the following section.

Name of Portable and/or Permanent Toilet Facilities Company: _____

Delivery Date: ____/____/____ Time: _____ am/pm

Pick-up Date: ____/____/____ Time: _____ am/pm

Number of Portable Toilets: _____ Number of ADA Accessible Toilets: _____

Permanent Toilet Facilities: _____

Will your event require public restrooms at a City-owned facility:

If yes, please explain: _____

Note: Fees will apply. Contact Department of Public Facilities at 508-799-8588.

Describe your plan for cleanup and removal of waste and garbage during and after the event:

Clean-up Date: ____/____/____ Time: _____ am/pm

NOTE: You must properly dispose of waste and garbage throughout the term of your event and immediately upon conclusion of the event the area must be returned to a clean condition. City cleaning and street sweeping services may incur additional costs.

EVENT OPERATION - SAFETY AND SECURITY

Medical Services:

_____ Ambulance(s) Provided By: _____

Company's Public Utilities License #: _____

Emergency Medical Technician(s) Provided By: _____

Security:

This area requires approval of the Worcester Police Department.

Security must be provided by applicant in coordination with the Worcester Police Department. Please contact the Off-Duty Assignment Division at (508) 799-8685. If your event takes place in a public park, the Parks Department must also approve your plan for security.

Have you contacted the Worcester Police Department to handle security arrangements for this event?

Yes No

If yes, please list, Police Detail Contact Name: _____

Please describe the approved procedures set forth by the Worcester Police Department for both Crowd Control and Security:

EVENT OPERATION – PARKING AND STREET CLOSINGS

Street Closures:

This area requires approval of the DPW&P Engineering Department and the Police Department.

Will your event use, close or block any of the following?

City Streets City Sidewalks City Parking Lots and/or Street Meters City Rights of Way

List any street(s), sidewalks, parking lots, or rights of way requiring closure for this event.

Street Name	Date	Time of Closing	Time of Re-Opening

If re-routing traffic, please work with DPW&P Engineering and Worcester Police Department and attach alternate traffic route to this application.

Does this event involve a moving route of any kind along streets, sidewalks or highways? Yes No

If YES, attach a detailed site map showing all streets impacted by the event.

Have you contacted the Worcester Police Department for a Parade Permit? Yes No

If YES, attach a copy of your Parade Permit

Parking Plan/ Shuttle Plan/ Mitigation of Impact:

Are you requesting access to municipal garage(s) or parking lot(s)? Yes No

Municipal Lot / Garage Location(s): _____

Note: Fees will apply. Contact the Department of Transportation and Mobility 508-929-1300.

Are you requesting use of municipal parking spaces / street metered space? Yes No

Note: Fees will apply. Contact the Department of Transportation and Mobility 508-929-1300.

Please provide a detailed description of your parking and shuttle plans, including Handicapped Parking:

Please describe your plans to notify all residents, businesses and churches impacted by the event:

Location(s)/Staging Area(s) on private property:

Please list all event locations on private property.

NOTE: Events located on private property in a manner that varies from its current land use, requires a Special Event Permit.

EVENT OPERATION – ADA COMPLIANCE

This checklist is intended to serve as a planning guide and may not be inclusive of all City, State and Federal access requirements. You may attach more detailed information if necessary.

ADA COMPLIANCE:

Yes No

- Will there be a Clear Path of Travel throughout your event venue?
- Have you developed a Disabled Parking and/or Transportation Plan (including the use of public transportation or shuttle services for your event)?
- Will a minimum of 10% of portable restrooms at your event be accessible?
- Will all food, beverages and vending areas be accessible?
- Will all signage be provided in highly contrasting colors and placed so pedestrian flow will not obstruct its visibility?
- If an information center is provided at your event, will customer services representatives be available to assist disabled individuals?
- Do you have an evacuation plan accounting for those with service animals, mobility impairments, vision or hearing loss?
- Do you have an alert/notification plan in the event of an emergency accessible to all?
- Do you have passenger loading zones with access aisles at least 5’ wide and 20’ long, adjacent and parallel to the vehicle pull up space?
- If offering valet parking, have you provided a passenger loading zone on an accessible route to the entrance?
- Do you have plan to brief your staff or volunteers on Service Animal Etiquette?
- Do you have plan for designating a relief area for the Service Animals?

If you answered ‘No’ to an ADA compliance checkbox question above, please describe alternate event accommodation arrangements:

MARKETING AND COMMUNITY OUTREACH

To market and promote your event, we recommend posting your event information on Discover Central Massachusetts (www.discovercentralma.org/see-do/events).

Discover Central Massachusetts is the regional tourism bureau that represents 36 cities and towns in Central Massachusetts. After signing up for an account, select the “Manage My Events” option to add your event details. Once completed, your event will be reviewed and approved to be posted on the Discover Central Massachusetts events calendar, Downtown Worcester Calendar and/or Worcester Cultural Coalition Calendar.

For additional opportunities to promote your event, please reach out to Discover Central Massachusetts on www.discovercentralma.org or (508) 753-1550.

DIAGRAM COMPONENTS

Please attach a diagram or event map showing the overall layout and set-up locations for the following items listed below:

- Admissions Gate(s)
- Booths, Exhibits, Displays or Enclosures
- Canopies or Tent Locations
 - Number of Canopies or Tents
 - Size(s) of Canopies or Tents
- Fencing, Barriers and/or Barricades
- First Aid Facilities and Ambulance Locations
- Food Concession and/or Food Preparation Area(s)
- Gas Tanks (i.e., helium, propane, etc.)
- Generator Locations and/or Source of Electricity
- Platforms, Stages, Grandstands or Related Structures
- Portable Toilets, Restroom Facilities
- Trash Containers and Dumpsters
 - Number of Trash Cans
 - Dumpsters w/covers
- Vehicles and/or Trailers
- Other Related Event Components not covered above

Please return application and all attachments to:
City of Worcester – Cultural Development Division
Worcester City Hall, 455 Main Street, Room 409
Worcester MA, 01608
(508) 799-1400 ext. 31415
SpecialEvents@Worcester.gov