VTSV SPECIAL EVENT PERMIT APPLICATION

Name of Spe	cial E	vent	-						
Event Sponso	or		-						
Contact Name		-							
Phone numbe	refer 2)								
Mailing Address									
Event Locatio	n		-						
Date(s) & Time(s)		From		a	am/pm	DATE			
		То		a	am/pm	DATE _			
Applicant Signature				*****	*****	***	Date		
Administrati									
Copy of Ordinance 10-35 given to applicant								(date/initials)	
□ Compl	Completed application received							(date/initials)	
□ \$10 ap	\$10 application fee received							(date/initials)	
Applica	ation i	reviewed	and ap	proved I	oy:				
□ Directo	Director of Public Safety						(0		
VTSV Administrator/Staff					(date/initials)				
□ Permit	Permit Approved					Permit NOT approved			
□ Additio	Additional conditions attached.					No additional conditions required			

Event Permit Administrator

Date

Village of Taos Ski Valley SPECIAL EVENT PERMIT APPLICATION

General Purpose and Description of the Event

(Describe activities. Include entertainment description and hours.)

Crowd Size (participants &/or spectators) _____

Location of Event

(Attach the following:)

- ____ Diagram of the premises showing the location of activities and emergency access
- ____ Written consent of private property owner(s)

Signage

- ____ No signage will be used
- ____ Approved sign permit application attached

Liability Insurance

- Copy of comprehensive public liability insurance attached (public liability of not less than \$1,000,000 with VTSV named insured)
- ____ Copy of waiver issued by VTSV Administrator attached

Alcoholic Beverages

Note:	Liquor sales require a Picnic License Food, water, and nonalcoholic beverages must be available						
	Alcoholic beverages will not be available						

- Private event alcohol available to guests only (no sales)
- Private event alcohol available to guests only (supplied by business) Copy of Picnic License attached
- ____ Alcoholic beverages will be available for purchase to public Copy of Picnic License attached

Public Safety and Welfare

(Attach the following:)

• Emergency Medical Services

Names and phone numbers of qualified persons (volunteer or contracted) who have agreed to cover this event.

• Security

Names and phone numbers of on-site security personnel who have agreed to cover the event.

- Sanitary Facilities Description, Location, and Maintenance
- Waste Receptacles Description, Location and Maintenance

• **Clean Up** - (Deposit may be required) List of personnel assigned to clean up