

# FORSYTH TOWNSHIP

## OUTDOOR ASSEMBLY LICENSE APPLICATION

*An Application for an Outdoor Assembly License shall be submitted through the Clerk's Office to the Forsyth Township Board. The application must be made 60 days prior to the date of event, accompanied by a \$50.00 filing fee.*

*You must be 18 years of age or older to apply for an Outdoor Assembly Permit.*

Application process must include the following:

1. Application.
2. Map of the overall site.
3. Each application shall be accompanied by a detailed explanation (including drawings, diagrams, and contracts, where applicable) to address the following:

\_\_\_\_\_ **Security Personnel** (Provide proof or explain how you are providing security.)  
(Number of Security Personnel provided: \_\_\_\_\_)

\_\_\_\_\_ **Water Supply Facilities**  
(Potable water in accordance with all applicable statutes, rules and regulations)

\_\_\_\_\_ **Restroom Facilities**  
(In accordance with all applicable state and local statutes, rules and regulations)

\_\_\_\_\_ **Food Service and Beverage Service**  
(In accordance with Health Dept and Liquor Licensing and Regulatory Requirements)

\_\_\_\_\_ **Medical Facilities and Services Including Emergency Vehicles and Equipment**  
(As applicable by Ordinance)

\_\_\_\_\_ **Liquid Waste Disposal**  
(As established with Marquette County Health Dept., state and local laws. A copy of agreement required licensed sewer waste servicer.)

\_\_\_\_\_ **Solid Waste Disposal**  
(As established with Marquette County Health Dept., state and local laws. A copy of agreement required licensed sewer waste servicer.)

- \_\_\_\_\_ **Access and Traffic Control**  
(Ingress and egress for orderly flow of traffic)
  
- \_\_\_\_\_ **Parking**  
(1 space for every 4 attendants entirely off all public rights of way)
  
- \_\_\_\_\_ **Lighting**  
(Lighting of all occupied areas sufficient to ensure the safety and comfort of all attendants. A Lighting plan is required)
  
- \_\_\_\_\_ **Insurance**  
(\$100,000 Liability/\$25,000 Property Damage)
  
- \_\_\_\_\_ **Fire Protection/Compliance**  
(Must contact Forsyth Fire Dept/EMS and provide proof)
  
- \_\_\_\_\_ **Noise**  
(Follow Noise Ordinance)
  
- \_\_\_\_\_ **Camping and Trailer Facilities**  
(If overnight camping, must provide license)
  
- \_\_\_\_\_ **Fencing**  
(Unless waived by the Township, a fence or other barrier completely enclosing the site, of sufficient height and strength to preclude Persons in excess of the maximum of permissible attendants from gaining access to the Assembly. Any such fence shall have a sufficient number and properly located access points to allow for safe ingress and egress. The Township Fire Chief shall be consulted regarding access for emergency vehicles)
  
- \_\_\_\_\_ **Miscellaneous**  
(Description: \_\_\_\_\_ )

**4.** Filing Fee (\$50.00). *Checks should be payable to "Forsyth Township".*

The applicant should attend the Forsyth Township Board Meeting to answer any questions that may arise. Applicant will be notified of meeting date.

DATE OF APPLICATION: \_\_\_\_\_

NAME OF APPLICANT: \_\_\_\_\_ AGE: \_\_\_\_\_

- a. If applicant is acting on behalf of a partnership, corporation, or other association, state the name and address of the entity and provide information for all partners, officers and directors or members and attach to this application.
- b. Where an applicant is a corporation, a copy of the articles of incorporation shall be filed with this application.
- c. The names and addresses of all shareholders having financial interest greater than \$500.00 in the corporation shall be attached to this application.

NAME OF EVENT: \_\_\_\_\_

SPONSOR OF EVENT (if applicable): \_\_\_\_\_

APPLICANT ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

CONTACT PHONE #: \_\_\_\_\_ ALTERNATE PHONE #: \_\_\_\_\_

CONTACT EMAIL: \_\_\_\_\_

START DATE OF EVENT: \_\_\_\_\_

EACH DAY - START TIME: \_\_\_\_\_ END TIME: \_\_\_\_\_

END DATE OF EVENT: \_\_\_\_\_

LOCATION OF EVENT: \_\_\_\_\_

PROPERTY OWNER: \_\_\_\_\_

(Copy of current paid tax bill, deed or other proof of ownership, which includes a legal description of the property, property tax number and proof of taxes paid of said property.)

***Please also note that an affidavit indicating consent of the property owner must be submitted with application, if applicant is not property owner.***

CONTACT PHONE #: \_\_\_\_\_ ALTERNATE PHONE #: \_\_\_\_\_

PROPERTY OWNER EMAIL: \_\_\_\_\_

ADDRESS OF PROPERTY OWNER: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EXPECTED ATTENDANCE PER DAY OF EVENT: \_\_\_\_\_

METHOD OF ACCOUNTING FOR ATTENDANTS: \_\_\_\_\_

PURPOSE AND DESCRIPTION OF EVENT: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**An Outdoor Assembly MAY NOT be held without a license.**

*The Forsyth Township Board has 45 days (from date of filing of this fully completed application) to act upon this application (either authorize or deny the issuance of a license.)*

I hereby certify that all information and data attached and made part of this application are true and accurate to the best of my knowledge and belief. I understand that there are requirements that must be met in order to comply with the Outdoor Assembly Ordinance. I agree to conform to all applicable laws and ordinances of this jurisdiction.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For Township Use Only

Check # \_\_\_\_\_  Cash  Credit Card

Authorized Initials and Date

Application Complete	
Receipt: # _____	
Insurance Provided	
License Issued	
License Denied	