



SPECIAL EVENT PERMIT APPLICATION

The Township of Muskoka Lakes has consolidated the special event procedure so that the process is streamlined. Please complete the following application and submit it to James Cox, Economic Development Officer.

It is important to read the Special Event Guide prior to completing an application. It is required that all appropriate fields be completed with detailed information. If your event does not require a section please use N/A in the field.

If you have questions and or comments about the Application process, please contact James Cox at 705-765-3156 ext. 279 or email jcox@muskokalakes.ca

CONTACT INFORMATION

Organization:	
Contact Person:	
Address:	
Phone (office):	
Phone (cell):	
Website:	
Email:	
Describe your organization:	☐ Registered Charity ☐ Incorporated Non-Profit ☐ Incorporated Business ☐ Unincorporated Group (with non-profit goals) ☐ Other:

ALTERNATE CONTACT INFORMATION

Please provide two additional contacts, one who can speak on the event's behalf if you are not available as well as an Emergency onsite contact person.



Alternate Event Contact

Person:			
Phone (office):			
Phone (cell):			
Email:			
GENERAL DETAILS Please provide details on y	our even	nt.	
Event Name:			
Event Date(s):			
What type of event is this f	or?	☐ Parade ☐ Run/race/cycle/walk-a-thon ☐ Festival ☐ Triathlon ☐ Conference ☐ Dance/Party/Wedding ☐ Other:	
Is this a single event or an	nual	☐ Single Event (one-off) ☐ Annual Event	
Please provide a brief desc of your event. What are yo at your event? What is you about? What do you hope achieve?	u doing r event		
Is this event private or ope public?	n to the	☐ Private ☐ Public	
Will you be charging admis your event?	sion to	□ No □ Yes. Please explain cost:	

EVENT TIMING



Please use the chart below to outline your Event Timing and Dates. If you need more room than what is provided, copy and paste the form fields in Microsoft Word, as needed.

Event Date(s) & Time:		
Event Set-up Date(s) & Tim	ie:	
Tear Down Date(s) & Time:		
EVENT ATTENDANCE Please estimate all that app	oly:	
Total Attendance Expected	(per day):	
Peak Time Attendance (per		
Estimated Peak Time (per o	day):	
Volunteers "Marshalls":		
Private Security		
Performers (per day):		
Vendors (per day):		
EVENT HISTORY		
Has this event been conducted in Muskoka Lakes?		☐ Yes ☐ No
If not previously in Muskoka Lakes, has		□ Yes
this event been conducted elsewhere?		□ No
		If yes, provide venue locations:
Is the proposed event expected to be the		
same as previous year(s)?		□ No
TOWNSHIP LOCATION RI	EQUESTS	
Please list any Township		
facilities you intend on using.		
Please list any Township		
Parks or green space		
you intend on using.		
Please list any Private		
Property you intend on		
using. (provide address) What other locations will		
you be using, if any?		



ROAD, PARK & PARKING LOT CLOSURES

Please read the following carefully. It is important to include all Township Roads, District Roads and Provincial Highways that are going to be affected due to your event. All District and Provincial roads need approval from the applicable legislation.

Will you be using Municipal Roads?	□ No
	☐ Yes.
Will you be using any Municipal Parking Lots	□ No
for event operations?	☐ Yes.
Will you be using District Roads?	□ No
	☐ Yes.
Have you contacted the District to apply for a	□ No.
Road Closure Approval?	☐ Yes.
Will you be using a Provincial Highway?	□ No
	☐ Yes.
Have you contacted the Province to apply for	□ No.
a Road Closure Approval?	☐ Yes.
Will you be using any Waterways for your	□ No
event?	☐ Yes.
Will Barricades be required for your road	□ No
closures?	☐ Yes. If yes, you agree that as
	the applicant you are responsible
	for the pick-up, set-up and return
	of barricades.
Will picnic tables be required form the	□ No
Township?	☐ Yes. If yes, you agree that as
	the applicant you are responsible
	for the pick-up, set-up and return
	of picnic tables.

MUNCIPAL ROAD CLOSURES

Please fill out the following Road Closure information. If you need to provide additional closure information than is indicated in the space below, please copy and paste the form fields as required.

Municipal	Name of Street:	From:	То:
Road			
	Date of Closure:	Time Closed:	Time Open:
	Reason for Closure: Describe how you wish to use the road:		
	Type of Closure:		
	☐ Full Road Closure ☐	Partial Road Closure D	Rolling Road Closure



MUNICIPAL PARKING LOT CLOSURES

Please fill out the following Parking Lot Closure information. If you need to provide additional closure information than is indicated in the space below, please copy and paste the form fields as required.

paste the	e form fields as required.			
Parking Lot	Name of Street where parking lot is located:			
Lot	Date of Closure:	Time Closed:	Time Open:	
	Date of Closure.	Time Closed.	типе Ореп.	
	Reason for Closure: Des	scribe how you wish to us	e the parking lot:	
	iteason for Closure. Des	scribe flow you wish to us	se the parking lot.	
DISTRICT ROAD CLOSURES Please fill out the following District Road Closure information. If you need to provide additional information than is indicated in the space below, please copy and paste the form fields as required.				
District	Name of Street:	From:	To:	
Road				
	Date of Closure:	Time Closed:	Time Open:	
	Reason for Closure: Describe how you wish to use the road:			
	Type of Closure:			
	☐ Full Road Closure ☐	Partial Road Closure D	Rolling Road Closure	
PROVINCIAL HIGHWAY CLOSURES Please fill out the following Highway Closure information. If you need to provide additional information than is indicated in the space below, please copy and paste the form fields as required.				
Highway	Name of Highway:	From:	То:	
	Date of Closure:	Time Closed:	Time Open:	
	Reason for Closure: De	escribe how you wish to u	se the highway:	
	Type of Closure:			
	☐ Full Closure ☐ Partial Closure ☐ Rolling Closure			



WATERWAY USAGE

Please fill out the following usage/closure information. If you need to provide additional closure information than is indicated in the space below, please copy and paste the form fields as required.

Waterway	Name of Lake or River:	Area Used: Indicate the location or general area.

EVENT SITE MAP

An Event Site Map provides a visual of your event. Please include as much information as you can on your site map such as; where the vendors, washrooms, accessible washroom locations, designated accessible parking, performances stages and other event programs/components will be set-up.

Site plans typically include the following:

- Road closures
- Location of permanent buildings/structures
- Location of all tents and/or stages
- Utility locates (event organizers may have to coordinate utility locates prior to submitting a site plan to demonstrate no interference with wires or pipes located in the vicinity of any proposed structures)
- Location of first aid station
- Location of food service and barbeques
- Location of any tables
- Location of games and activities
- Proposed route and layout of race, walk-a-thon or road closure
- Access routes for emergency vehicles
- Location of any barricades used to block off parking, roadways or sections
- Location of licensed area
- Location of portable toilets and hand wash stations
- Location of any temporary fencing
- · Location of garbage/recycling stations
- Location of midway rides/dunk tanks/inflatables
- · Location of any other activities or structures that relate to the event

EVENT COMPONENTS

There are various permits and approvals that must be obtained in order to incorporate specific elements into your event. Based on the information you have provided on the Special Event Application, the S.E.T will advise you on any additional paperwork that must be filled in to secure the applicable permits and approvals required for your event to safely take place on Township property.



Will your event have amplified r (live music, speakers, guest spe	noise? Describe how sound will be a eaker):	mplified	□ Yes □ No
at your event you will need to adhere you are legally permitted to serve alco Alcohol and Gaming Commission of C	where alcohol will be served. If you wish to a to both provincial and municipal guidelines shol. Provincially, all alcohol licensing is hand Intario (AGCO) <u>www.agco.on.ca</u> . On the AG al Occasion Permits and Temporary Liquor	to ensure that dled by the GCO website	□ Yes □ No
Will you be using a Tent or Tem	nporary Structure?		☐ Yes ☐ No
Will there be Vendors at your events by checking this box on your S.E.T ap	vent? oplication you will alert us to your request.		☐ Yes ☐ No
the Alcohol and Gaming Comm activates to take place. There a to include lottery at your event. alert us to your request. Additionapproved. Will you be conducting any Raff		lowing these be obtained fo application you that been Yes No	r you
Will there be a silent auction (no gaming License required)? ☐ Yes ☐ No			
Please indicate any other fundraising activities:			
WASTE MANAGEMENT Event organizers are responsible for ensuring appropriate measures are in place to contain waste and to clean up litter on Township property. Fees may apply for some Township waste management services including cleanup costs.			
Will you be contracting a waste management company to remove the garbage and/or recyclables?	 ☐ Yes - By checking yes, you will be responsible for waste management. ☐ No - we will be responsible for waste management ourselves 	•	
What waste containers will you use (containers, garbage bags, dumpsters) and how many? Will containers be required?	If you require containers from the To agree that as the applicant you are for the pick-up, waste removal and containers.	responsible	

INSURANCE



Do you require purchasing liability insurance	Yes.
through the Township insurance program?	If Yes, S.E.T will work the Risk Management Coordinator to
	determine your Insurance rate.
	Additional fees will apply and will be
	included as an extra fee on your
	rental contract.
	□ No
Will you be providing your own Certificate of	□Yes
Insurance listing the Corporation of Township of	☐ No, if no please explain how your
Muskoka Lakes as additionally insured?	insurance will be addressed.

CHECKLIST

- SET Application and Fee
- o Insurance Certificate
- Event Site Plan Map
- Emergency Safety Plan
- Vendor List Form (If Required)
- o Tent Permit Application (If Required)
- Fireworks Event Application (If Required)
- Parks Permit Application (If Required)

FINAL AUTHORIZATION

It is vital that as the event organizer that you read and understand both S.E.T Guideline and the Event application form. We also need to ensure that the information you are providing is accurate to the best of your ability in order to properly facilitate and support your event.

If there are any changes to your Event application, it is imperative that you notify of these changes at least 30 days in advance. The Township of Muskoka Lakes reserves the right to revoke any approvals or permissions based on changes that render the event unsafe.

I have read and understood Special Event Permit Guide	☐ Yes ☐ No
I acknowledge that all the information contained in this application is, to the best of my ability, is accurate.	☐ Yes ☐ No
Please enter Your Name:	