

SPECIAL EVENT PERMIT APPLICATION

For C	Office Use Only
Fee Submitted:	
Date of Receipt:	
Permit #:	
Roll #:	

I / We hereby make application under the current Brazeau County Special Events Bylaw for a Special Event Permit. The plans and information submitted herewith are for this application.

plar									
1.	Pre	application checklist – please use the table below as a pre-a	pplication	on check	dist.				
	a.	Have you reviewed the attached 'Special Events Bylaw' (Byla	w 1005-	-18)?			Yes		No
	b.	Have you drawn up a plan of the event based on the require	ments o	f the By	law?		Yes		No
	c.	Have you had a pre-application meeting with County Staff re	garding	the eve	nt?		Yes		No
	If y	ou have answered 'No' to any of the above questions, please c	ontact t	he Plan	ning an	d De	velopm	ent	
		partment as soon as possible to discuss your application. ***Neived 60 days prior to the proposed date of the event***	lote: As	per the	Bylaw	all a	pplicati	ions mu	st be
2.	Арр	plication Requirements							
	a.	Completed application form		Yes		No			
	b.	Certificate of title (for the lands where the event is being held)		Yes		No			
	о. С.	Site plan of event		Yes		No			
3.		ntact and personal information – if there is more than one app	licant th	e inforn	nation	can b	e provid	ded on a	a separate
3.		ntact and personal information – if there is more than one app ge. See subsections 7.1 and 7.2 of Special Events Bylaw. Name and Mailing Address of the landowner(s) P/C	Ema Phon Ce Fa	il: e:	nation	can b	e provid	ded on a	a separate
3.	pag a.	Name and Mailing Address of the landowner(s) P/C	Ema Phon Ce	il: e:	nation	can b	e provid	ded on a	a separate
3.	pag	Name and Mailing Address of the landowner(s)	Ema Phon Ce	il: e: Il: x:	nation	can b	e provid	ded on a	a separate
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3.	pag a. b.	Name and Mailing Address of the landowner(s) P/C Name and mailing address of the applicant(s)	Ema Phon Ce Fa Ema Phon Ce Fa	il: e: il: e:	nation	can b	e provid	ded on a	a separate
3.	pag a. b.	P/C Please indicate the age of the applicant(s)?	Ema Phon Ce Fa Ema Phon Ce Fa	il: e: il: e:	nation	can b	e provid	ded on a	a separate
3.	b.	P/C Please indicate the age of the applicant(s)? Please indicate the rural address of the applicant(s) residence.	Ema Phon Ce Fa Ema Phon Ce Fa	il: e: il: il: e: il:	nation	can b	e provid	ded on a	a separate
3.	b.	P/C Please indicate the age of the applicant(s)? Please indicate the rural address of the applicant(s) residence.	Ema Phon Ce Fa Phon Ce Fa e?	il: e: il: e: ili: ili:	nation	can b	e provid	ded on a	a separate
3.	b.	P/C Please indicate the age of the applicant(s)? Please indicate the rural address of the applicant(s) residence.	Ema Phon Ce Fa Phon Ce Fa e?	il: e: il: il: e: il: e:	nation	can b	e provid	ded on a	a separate

4.	Par	ticulars of	the prop	erty where the	event will be held	i								
	a.	All/part	of the							V	/5M			
				¼ Section	Section	То	wnship		Range					
	b.	All/part	of											
				Lot	Block		Plan							
	c.	Rural Ad	dress:											
	d.	Area of I	Parcel:											
				Acres	Hectares									
	e.				d under the currer nlet Residential)	nt Land								
	f.	Use Bylaw? (e.g. Agricultural, Hamlet Residential) f. Describe the existing use(s) of the property (e.g. bare												
		land, res	idential, l	naying/grazing):										
	g.	Are ther	e any buil	dings on the pro	operty?		Yes		No					
		If 'yes', v	will they b	e used for any p	part of the event?									
	h	Is the pr	oposed d	evelopment witl	hin 1.6 km (1 mile) of a pro	vincial hi	ghway?)		Yes		No	
		If 'yes', t	he highw	ay is:										
	i.	Is the lar	nd situate	d within 100 m	(328 ft.) of a sour	gas facilit	:y?		Jnknown		Yes		No	
	j.	Is the pr	oposed d	evelopment site	within 100 m (32	8 ft.) of a	gas or o	il well?			Yes		No	
5.	Pro	posed eve	ent details	s										
	a.	A site pla	an is requ	ired. Please ens	sure that you com	plete sect	tion 8 of	this app	olication.					
	b.	Event na	ıme:											
	c.	Hours of	operatio	n:										
	d.	Start dat	te includir	ng set up:		En	ıd date ir	ncluding	g take dowr	า:				
	e.													
	f. What is the maximum number of participants permitted on the grounds or													
		premise	at any on	e time?					·					
	g.	What provisions are being made if the number of participants is greater than expected?												
	h.	Please provide a written statement of the kind, character or type of concert or special event being applied for:												
		***Please note if the information required for the above section(s) cannot fit in the space provided, please												
		***Pleas	se note if	the information	required for the a hen submitting yo,	above sec	tion(s) c	annot fi *	t in the spa	ace pro	ovided,	please	5	
		provide	it on a sep	Jarate page(s) w	men submitting yo	зиг аррпс	ation.							
	i.				vn of your event a									
		read these sections of the Bylaw carefully. The checklist below will help you to ensure that you have addresse the appropriate requirements. The information is to be provided on a separate sheet(s) and must be approve										essed		
		before t	he permit	will be issued.	Locations of the i	tems belo	ow, mus	t be sho	wn on the	Site P	lan (se	ction 8	3).	
		□ Po	olicing, se	curity and prote	ction (subsection	9.1 of Byl	law 1005	5-18)						
		□ Aı	mbulance	and first aid ser	vices/facilities (su	bsection	9.2 of By	/law 100	05-18)					
		□ Pa	arking are	as (subsection 9	.3 of Bylaw 1005-	18)								
			_	-	(subsection 9.4 of	-	005-18)							
		□ Ro	oad use (s	ubsection 9.5 of	f Bylaw 1005-18)									
			•		tion 9.6 of Bylaw :	1005-18)								
			ommunica	ations (subsectio	on 9.7 of Bylaw 10	05-18)								
				•	9.8 of Bylaw 1005	-								
			•		on 9.9 of Bylaw 10									
		□ w	ater and	sanitation facilit	ies (subsection 9.	10 of Byla	w 1005-	18, plea	ase note th	ere ar	e vario	us sect	ions)	

	Solid Waste (subsection 9.11	of Bylaw 1005-18)
	•	•
	Overnight accommodation, i	llumination of the premises (subsection 9.13 of Bylaw 1005-18)
	Public liability insurance (sub	section 9.14 of Bylaw 1005-18)
	Animal control if required (su	ubsection 7.7 of Bylaw 1005-18)
		(subsection 9.15 of Bylaw 1005-18), any miscellaneous requirements may lent. These would be determined through meetings with staff.
•	of entry authorization – to be sign	ned by the registered owner(s) of the lands.
I/We,	print name	give my/our consent for Right of Entry to my/our lands which
are sub	pject of this application for the pu	rpose of a site inspection.
	Date	Signature
	Date	Signature
Landov	wner(s) signatures	
I/We,		hereby certify that I/we am/are the registered owner(s)
	print name	
	lands and that the information giv	
	edge, a true statement of the fact	ven on this form and site plan is full and complete and is, to the best of my s relating to this application.
	_	·
	edge, a true statement of the fact	s relating to this application.
Applica	edge, a true statement of the facts Date	Signature Signature
Applica	Date Date Date Date Date Date Date	Signature Signature
• •	Date	Signature Signature e registered landowner)
I/We,	Date Date Date print name on behalf of the registered owner	Signature Signature e registered landowner)
I/We,	Date Date Date print name on behalf of the registered owner	Signature Signature e registered landowner) hereby certify that I/we am/are the agent authorized (s) and that the information given on this form and site plan is full and
I/We,	Date Date Date print name on behalf of the registered owner ete and is, to the best of my/our k	Signature Signature e registered landowner) hereby certify that I/we am/are the agent authorized (s) and that the information given on this form and site plan is full and knowledge, a true statement of the facts relating to this application.

****The information on this form is being collected under the authority of section 33(c) of the *Freedom of Information* and *Protection of Privacy Act* and will be used solely for the purpose of this application. If you have questions about this collection or require further information please contact Planning and Development, Brazeau County, Box 77, Drayton Valley, Alberta, T7A 1R1, telephone 780.542.7777 or email planning@brazeau.ab.ca ****

8. Site plan. The site plan may be provided on this page or attached as a separate page. Please review the checklist in section 6 above to ensure that all required information is shown.

SCHEDULE A

This section is for office use only:	
Date Approved:	Approved By:

