



# MUNICIPALITY OF BETHEL PARK

Municipal Building • 5100 West Library Avenue • Bethel Park, PA 15102 • 412-831-6800 • FAX 412-831-8675 • [www.bethelparkpa.gov](http://www.bethelparkpa.gov)

Permit # \_\_\_\_\_

## OUTDOOR EVENT & MERCHANT PERMIT APPLICATION (Fee \$50)

### Applicant/Owner:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Site Address:

Address: \_\_\_\_\_

### Company Information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Federal Tax ID: \_\_\_\_\_ PA Tax ID: \_\_\_\_\_

### Event Information:

Description of Event: \_\_\_\_\_

\_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

### Please check all that apply and provide an aerial view of the site marking the location of any of the following:

Tent/Additional Structures – Dimensions \_\_\_\_ x \_\_\_\_ / *Subject to additional inspections*  Rides  Portable Facilities  Road Closures

Number of Parking Spaces to be Utilized \_\_\_\_\_  Food Trucks/ *Please provide a copy of a **current** ACHD permit issued to vendor*

Will there be music?  Yes  No

Will police assistance be required?  Yes  No/If Yes, an additional permit will be required.

• Please provide a list of locations of any signs advertising this event.

• Please provide proof of permission from the property owner.

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

### For Department Use Only:

Aerial View Submitted:  Yes  No

Neighbor Approval Spreadsheet Provided:  Yes  No

Food Trucks:  Yes  No If Yes, ACHD Permit provided:  Yes  No

Copy to Public Works:  Yes

Copy to Dispatch:  Yes

Conditions: \_\_\_\_\_

Zoning/Building Inspector's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Police Department Signature: \_\_\_\_\_ Date: \_\_\_\_\_