



Town of Pendleton  
310 Greenville Street 646-9409 Phone  
Pendleton, SC 29670 646-5425 Fax  
[www.townofpendleton.org](http://www.townofpendleton.org)

### **EVENT APPLICATION**

This application must be completed and submitted no less than **thirty days** prior to the start of the event. Any misrepresentation in this application or deviation from the final agreed upon route and/or method of operation described herein may result in the immediate revocation of the permit. All questions must be fully answered. If a question does not apply, please write does not apply in that space. Please type or print the information clearly. You may attach additional sheets as necessary.

The information requested by this form will be used to determine your eligibility for the permit requested. Completed forms may be released upon the request of any citizen as provided by the Freedom of Information Act. Completion of the form is voluntary. However, failure to do so will prevent processing of your application. Incomplete applications will be returned.

Permit # \_\_\_\_\_ Date: \_\_\_\_\_ Non- Refundable Processing Fee: \$25.00  
Rental Fee \$ \_\_\_\_\_ Deposit \$ \_\_\_\_\_

#### **SECTION I Contact Information:**

Person in charge of information submitted in application: \_\_\_\_\_  
Organization represented: \_\_\_\_\_  
Email address: \_\_\_\_\_  
Phone (Home): \_\_\_\_\_ (Work): \_\_\_\_\_ (Mobile): \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_

#### **SECTION II Event Description:**

Name of event: \_\_\_\_\_  
Date(s) of event: \_\_\_\_\_  
Time (s) of event: \_\_\_\_\_  
Specific location of event: \_\_\_\_\_  
Will your event use amplified sound? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, please state for what purpose: \_\_\_\_\_  
Do you plan to serve food and beverage at the event? Yes \_\_\_\_\_ No \_\_\_\_\_

**SECTION II Event Description cont.:**

Describe food items that will be sold or distributed: \_\_\_\_\_

Will there be any cooking with grease? Yes \_\_\_\_\_ No \_\_\_\_\_

Will you be serving or selling alcohol? Yes \_\_\_\_\_ No \_\_\_\_\_

Expected number of participants: \_\_\_\_\_ Expected number of spectators: \_\_\_\_\_

Rain policy for event: \_\_\_\_\_

**SECTION III Event Set Up:**

Will tents be used for the event? Yes \_\_\_\_\_ No \_\_\_\_\_ How many: \_\_\_\_\_

Will any signs or banners be erected? Yes \_\_\_\_\_ No \_\_\_\_\_

Temporary signs are not allowed in town parks with the exception of within the structure you are renting.

Describe any power needs and location of power source: \_\_\_\_\_

Describe type and size of event (location, how much area to be used, stages, entertainment, etc.) Please use the back of the permit or separate sheet to draw a simple sketch showing streets to be closed, placement of tents, etc.

Date & time the event will begin: \_\_\_\_\_ Date & time the event will end: \_\_\_\_\_

Date & time set up will begin: \_\_\_\_\_ Date & time clean up/take down will end: \_\_\_\_\_

Will generators be used? Yes\_\_\_\_ No\_\_\_\_ List number, size and location: \_\_\_\_\_

Have arrangements been made for restroom facilities? Yes\_\_\_\_ No \_\_\_\_\_ Locations: \_\_\_\_\_

Describe sanitation provisions (trash cans, event clean up, etc.) \_\_\_\_\_

Who is providing the above provisions? \_\_\_\_\_

**SECTION IV Town Services:**

Do you need the Town of Pendleton to provide the following services?

**(Reimbursement to the Town will be required for these services)**

Roll Carts: Yes\_\_\_\_\_ No\_\_\_\_\_ If yes, how many \_\_\_\_\_ Location(s) \_\_\_\_\_

Date & Time Roll Carts to be emptied \_\_\_\_\_

Date & Time Roll Carts to be picked up \_\_\_\_\_

Road Closure will begin: (date/time)\_\_\_\_\_Roads opened at:(date/time)\_\_\_\_\_

Barricades: Yes\_\_\_\_\_ No\_\_\_\_\_ If yes, how many \_\_\_\_\_ Location(s) \_\_\_\_\_

Who will be responsible for placing the barricade(s)? \_\_\_\_\_

Will Town personnel be responsible for Street & Public Property Clean-up? Yes\_\_\_\_\_ No\_\_\_\_\_

**SECTION V Revenue and Proceeds:**

Describe any revenue to be generated from admission fees, solicitation from spectators, concessions or any other source: \_\_\_\_\_

Is your organization a charity or non-profit organization: Yes\_\_\_\_\_ No\_\_\_\_\_

What is the name of your charitable or non-profit organization? \_\_\_\_\_

Will the proceeds benefit any organization? Yes\_\_\_\_\_ No\_\_\_\_\_

Name of Organization: \_\_\_\_\_

List location (cities) and dates of prior event held over the past five years: \_\_\_\_\_

**SECTION VI Hospitality Tax:**

The Pendleton Town Council has established a two (2%) Hospitality Fee on the purchase of prepared food and beverages (for immediate consumption or carry out) and on establishments licensed for on-premises consumption of alcoholic beverages, beer or wine. This fee does not apply to organizations that are exempt from collecting sales tax. A Hospitality remittance form is enclosed to assist you in collecting, reporting and remitting this fee.

Please provide a list, including, name of business, contact information, in which this section applies, at least 1 day before event occurs. Failure to do so will result in revoking of permit.

**SECTION VII SAFETY & SECURITY:**

What types of arrangements have been made for medical assistance if needed? \_\_\_\_\_

Number of Officers needed for crowd and traffic control? \_\_\_\_\_

Dates & Times for security to be on site: \_\_\_\_\_

Have you contracted for mechanical rides, space walks, or other attractions? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, with what company? \_\_\_\_\_

List details, if any: \_\_\_\_\_

**SECTION VIII Liability Insurance:**

Does your event carry liability insurance listing the Town as co-insured? Yes \_\_\_\_\_ No \_\_\_\_\_

Name and address of liability insurance provider: \_\_\_\_\_

**(Certificate of Insurance must be submitted prior to the event.)**

**SECTION VIII Signature and Approvals:**

Hold Harmless Clause

Applicant/Organization hereby shall assume all risks incident to or in connection with the permitted activity and shall be solely responsible for damage or injury, of whatever kind or nature, to person or property, directly or indirectly arising out of or in connection with the permitted activity or the conduct of applicant's operation. Applicant hereby expressly agrees to defend and save the Town of Pendleton harmless from any penalties for violations of law, directly or indirectly arising from its activity and from any and all claims, suits, losses, damages or injuries directly or indirectly arising out of or in connection with the permitted activity or conduct of its operation or resulting from the negligence or intentional acts or omissions or its officers, agents and employees.

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

Title: \_\_\_\_\_

**Return Application to:  
Town of Pendleton  
Administrator  
310 Greenville Street  
Pendleton, SC 29670**

**Reviewed by:** (If Applicable)

**Comments:**

Administration:      Date: \_\_\_\_\_

\_\_\_\_\_

Fire Marshal:      Date: \_\_\_\_\_

\_\_\_\_\_

Planning & Codes:      Date: \_\_\_\_\_

\_\_\_\_\_

Public Works:      Date: \_\_\_\_\_

\_\_\_\_\_

Police:      Date: \_\_\_\_\_

\_\_\_\_\_

APPROVED: \_\_\_\_\_ DENIED: \_\_\_\_\_

\_\_\_\_\_  
Town Administrator or Designee      Date

## HOSPITALITY REMITTANCE REPORTING FORM

Name and Address of Business: \_\_\_\_\_ Filing Period: Month \_\_\_\_\_  
Year \_\_\_\_\_

\_\_\_\_\_  
# \_\_\_\_\_ F.E.I. or S.S.

\_\_\_\_\_  
Name \_\_\_\_\_ Contact

\_\_\_\_\_  
Phone \_\_\_\_\_ Contact

### COMPUTATION OF HOSPITALITY AMOUNT DUE

1. Hospitality Fee/Tax \$ \_\_\_\_\_ x .02 \$ \_\_\_\_\_
2. Plus Penalty on Delinquencies\*\* \$ \_\_\_\_\_ x \_\_\_\_\_ x .05 + \_\_\_\_\_  

Line 1 # of months late
3. **TOTAL AMOUNT DUE** = \$ \_\_\_\_\_

**This return covers the period through the last day of the month and becomes delinquent after the 15<sup>th</sup> day of the following month.**

In those months that the 15<sup>th</sup> day of the month falls on a weekend or Town holiday, the deadline will be on the next business day for the Town of Pendleton.

\*\*PENALTY on delinquencies – a penalty of 5% (.05) for each month or portion thereof after the due date until paid.

**I certify that all of the information stated above is true and accurate to the best of my knowledge and belief. I understand that the Town of Pendleton assesses penalties for making false or fraudulent statements on this reporting form.**

**Filed By:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Permit #

Date permit approved

Return to: Town of Pendleton, Clerk/Treasurer, 310 Greenville St. Pendleton, SC 29670.

**FEE COST FOR EVENT**

**Event Name:** \_\_\_\_\_

**Responsible Person:** \_\_\_\_\_

**Fees:**

*(TO BE COMPLETED BY TOWN STAFF ONLY)*

Event Fee:.....\$\_\_\_\_\_

0-12 persons= \$15.00 13-24 persons= \$25.00 25-48 persons= \$50.00  
49-100 persons= \$100.00 100+persons= To be determined

Electricity:.....\$\_\_\_\_\_

Security:.....\$\_\_\_\_\_

Restrooms: (unlock/lock after hours).....\$\_\_\_\_\_  
*Restrooms are open daily from 8am to 5pm, 7 days a week.*

Clean Up:.....\$\_\_\_\_\_

Traffic Control – Road Closure/Barricades:.....\$\_\_\_\_\_

Extra Roll Cart(s):.....\$\_\_\_\_\_

Other Event Fees:.....\$\_\_\_\_\_

Description of Other Event Fees:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I have read and agree to the above additional fees.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date