# **EVENT PLAN APPLICATION**

Chapter 170, Section B, Town of Troy Event Plan Requirements

File #:	
Office Use Only	

# **REQUEST**

APPLICA	NT INFORMATION
Applicant Name:	Site Owner (if not applicant):
Mailing Address:	Mailing Address:
Daytime Phone: ()	Daytime Phone: ()
E-mail:	E-mail:
Date of Event:	Hours of Event:
Anticipated Attendance:	
Site Address:	
	FEES
Application Fee:  Supplemental Application Fees: \$x_  Total Fees:  - All application fees must be submitted with - Additional fees paid as directed by the Tov - Applications are due 90 days before the even	\$ n application and are non-refundable. vn Clerk.
·	Date
Applicant Signature:	
Owner (of grounds) Signature:	
OFF	FICE USE ONLY
Date Accepted:/ Date R	eceived:
Date A	ccepted as Complete:
Fee Received: \$ Receipt	t #:

**Town of Troy** 

654 Glover Road, Hudson, WI 54016

Phone:(715) 425-2665 http://townoftroy.org FAX: (715) 425-2551

## **EVENT PLAN QUESTIONNAIRE**

All event plans are to be consistent with the Town Ordinance related to Event Plans in Chapter 170, Section B.5. Your application will be reviewed by staff and presented to the Zoning Administrator for consistency with the ordinance. A copy of the ordinance is available for review by contacting the Town of Troy office or on the Town website at: <a href="http://www.townoftroy.org">http://www.townoftroy.org</a>.

To assist in determining how your event relates to the ordinance, please answer the following questions on an attached sheet.

- 1) Describe the proposed event including any public safety issues, amplified sound, access issues, and parking.
- 2) Provide a site plan showing the location of the event, public access, parking, temporary barricades, fencing, trash, recycling, portable toilets, potable water, and access/exterior signs.
- 3) Name and owners, operators, and sponsors of all food booths and food trucks, with verification of health requirements.
- 4) Will wine or fermented malt beverages be sold or provided during the event? If yes, additional licenses may apply.
- 5) Names and addresses of all owners and residents located within 300 feet of the property line. Include notices sent to these adjoining owners/residents.
- 6) Contact information for the security agency of the event.

### CHECKLIST FOR EVENT PLAN APPLICATION

Or	riginal plus 6 copies of application packet to include:
	Narrative addressing Event Plan Questionnaire
	Site plan
	Proof of insurance (include Town as insured)
	Wine or malt beverage license
	Notification made to property owners within 300 ft. with names and addresses
	Copies of food vendor licenses to serve and operate within the State
An	plication fee (non-refundable) payable to: Town of Troy

Please Note: Application materials should not include covers, binders or envelopes. Application packets should be collated and either stapled or paper clipped in the upper left-hand corner

#### **GENERAL EVENT APPLICATION PROCEDURE**

**Application Submittal and Review:** The application must include all items identified on the checklist. After a preliminary review, additional information may be requested. Once it has been determined that all necessary information has been obtained, the application will undergo a staff review and be forwarded to the Zoning Administrator.

**Approval:** Upon review by the Zoning Administrator, a recommendation is approved with conditions, denied, or forwarded to the Plan Commission and Town Board for action. The approval process may take up to 90 days to complete.

This is a summary of the Event Plan. The specific requirements and procedures are identified in Chapter 170, Section B of the Town of Troy Event Plan Ordinance.