



Special Event Permit Application

**Development Services
Department**
90 E. Civic Center Dr.
Gilbert, AZ 85296
(480) 503-6700-Phone
(480) 497-4923-Fax
www.gilbertaz.gov

A Community of Excellence

Permit Fee **Term**
\$200.00 Event

PAYMENT IS BY CASH OR CHECK ONLY

Responsible Party:

Name: _____ Phone: _____

Address: _____
(Street) (City) (State) (Zip Code)

Cell Phone: _____

Fax: _____ E-Mail Address: _____

Promoter/Organization:

Business Name: _____

Business Address: _____
(Street) (City) (State) (Zip Code)

Contact Person: _____ Phone: _____ Fax: _____ E-Mail: _____

Arizona Tax ID #: _____

Event Information:

Event Name: _____

Event Location: _____ Event Dates & Times: _____

Setup Date/Time: _____ Takedown Date/Time: _____

Number of Vendors: Food: _____ Show: _____ Games: _____ Rides: _____ Animals: _____

Anticipated Attendance: _____

Planned Activities:

Describe all activities that will take place at the event: _____

Event Type:

- | | | | | | |
|--|---|---|-----------------------------------|------------------------------------|-------------------------------------|
| <input type="checkbox"/> Arts/Crafts | <input type="checkbox"/> Circus | <input type="checkbox"/> Concert | <input type="checkbox"/> Festival | <input type="checkbox"/> Food Fair | <input type="checkbox"/> Show |
| <input type="checkbox"/> Political Rally | <input type="checkbox"/> Religious Ceremony | <input type="checkbox"/> Religious Procession | <input type="checkbox"/> Parade | <input type="checkbox"/> Run/Walk | <input type="checkbox"/> Exhibition |
| <input type="checkbox"/> Sports Tournament | <input type="checkbox"/> Auction | <input type="checkbox"/> Carnival | <input type="checkbox"/> Display | | |
| <input type="checkbox"/> Other _____ | | | | | |

The following must be submitted with this application:

☞ Please complete attached Equipment Companies List (if applicable)

☞ Please complete attached Vendors List (if applicable)

☞ 8 1/2" x 11" detailed site plan that shows:

- Location of all permanent and temporary structures, including tents or vendor booths
- Parking areas
- Public restrooms
- Trash facilities
- Staging areas
- Pedestrian circulation
- Traffic circulation
- Sign placement

*** Site plans for large scale events shall also show fireworks detonation areas, spectator areas, and rides. ***

☞ Transient Merchant License Application for every vendor.

☞ Lighting plan if event is held after dusk.

☞ Dust control plan if site surface is unpaved. View requirements for [dust control plan here](#).

☞ Description of any recording equipment, sound amplification equipment, banners, or signs to be used to attract public attention to the event.

☞ Security plan.

☞ Traffic and pedestrian circulation and control plan

☞ Certificate of Insurance: If you are the Promoter or Vendor of an event held on town Property, please attach an original copy of a Certificate of Insurance. Commercial General Liability Insurance in the amount of \$1 million each occurrence combined single limit for bodily injury and property damage liabilities and \$2 million aggregate is required. The **Town of Gilbert shall be named as additional insured** under the Certificate of Insurance. Address information should read: Town of Gilbert, 90 E. Civic Center Drive, Gilbert, AZ 85296. The insurance certificate needs to be received **at least seven (7) business days prior to the event.**

Gilbert Town Services:

The Town of Gilbert may provide certain services upon request and availability. Fees will be assessed for all services provided according to adopted fee schedules.

☞ Barricades	480-503-6400	☞ Off-Duty Police	480-635-7194
☞ Traffic Control	480-635-7194	☞ Fire Department EMS	480-503-6300
☞ Refuse Containers/Collection	480-503-6400	☞ Fire Prevention	480-503-6350

Requirements:

☞ Special Events conducted within the Town of Gilbert must submit a Special Event Permit Application a minimum of 30 days prior to the event if any Town services are requested.

☞ Promoters interested in holding an event in a Town of Gilbert park should call 480-503-6200.

☞ Events located on public roadways may require approval of the Town Council and Traffic Engineer. Contact the Traffic Engineer at 480-503-6739.

☞ If the event is being held on private property, a letter of permission is required from the property owner.

☞ All retail vendors (Transient Merchants) without a current Gilbert Business License must apply and pay a \$15.00 fee per special event.

☞ Large events may be subject to a pre-meeting with Town of Gilbert staff.

☞ Events that include alcohol are subject to additional requirements and must apply for a Special Event Liquor License. Licenses are subject to approval of the Town Council and issuance of a license by the Town and State of Arizona.

☞ All events must be ADA compliant.

☞ Written notification to each neighborhood/business is required for all events with street closures. Notice must be delivered at least five (5) days prior to street closure.

To the best of my knowledge and belief, all information contained in this application is complete, true and correct. I understand all of the requirements listed in this application.

Signature

Date



A Community of Excellence

Business License Application

\$35 FOR MOST BUSINESSES

Development Services Department
90 E. Civic Center Dr.
Gilbert, AZ 85296
(480) 503-6700-Phone
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www.gilbertaz.gov

LIQUOR LICENSE APPLICANTS MUST FIRST APPLY AT THE ARIZONA DEPT OF LIQUOR

PLEASE USE BLACK INK ONLY

1. BUSINESS OWNER/APPLICANT INFORMATION

Business Owner Name _____ Title _____

Address _____
City State Zip

Phone _____ Fax _____ E-mail _____

Circle Type of Ownership*: Public Non-profit Family Private LLC Corp Partnership

Individual, sole proprietorship or husband and wife businesses must complete a **Licensing Eligibility Form, provide picture ID and submit with this application*

2. BUSINESS INFORMATION

Business Trade Name _____ AZ Sales Tax # _____

Location _____ Suite # _____
(where business takes place)

Mailing Address _____
(if different from above)

Phone _____ Fax _____ E-mail _____

Website _____ Date to begin in Gilbert _____

Exact Nature of Business* _____

**A Use permit is required for some businesses including: pawn shops, adult businesses, tattoo/piercing studios, non-chartered financial institutions and smoking lounges.*

*All Businesses With A Physical Location In Gilbert Must Submit A Supplemental **Wastewater Questionnaire***

Is your business located in Gilbert and home based? Yes No If yes, please also complete a **Home-Based Business Questionnaire** supplement and submit with this application.

3. Is your business located in Gilbert but not home based? Yes No If yes, you must obtain a **Certificate of Occupancy** prior to starting business in Gilbert and complete the following information:

Owned or Leased* Total Sq Ft _____ Lease Exp _____ # of F/T Employees _____ # of P/T Employees _____

Contractors _____ # of shifts per day _____ # of operating days per week _____ Gross Annual Payroll _____

Business Sector (Please circle one) Advanced Manufacturing - Aeronautics & Defense - Agriculture - Building & Construction - Communication - Consumer Goods & Services - Convention/Tourism - Energy & Utilities - Finance - Forestry - Government - Healthcare - Industrial - Insurance - Minerals - Pharmaceuticals - Producer - Real Estate - Retail Related - Technology/Information - Telecommunications - Transportation

4. *If leasing, please provide Landlord Information:

Name _____ Phone _____

Address _____

5. TRANSIENT MERCHANTS

LICENSE FEE \$200/YR OR \$15/EVENT

Please list goods to be sold or collected: _____

If a vehicle is to be used: Make _____ Model _____ License Plate _____

Transient Merchants, include with this application:

- a. *Copy of your driver's license*
- b. *Copy of vehicle liability insurance: bodily injury, \$100K per person, bodily injury, \$300K per accident; property damage, \$25K per accident*
- c. *Letter of property owner's permission*
- d. *If selling food: copy of County Permit*
- e. *Have you used any other names in the last 5 years than you listed under "applicant"? If so, list here:*

- f. *Have you been convicted of any felony, misdemeanor or violated any ordinance? Yes No*
If yes, list the nature of the offense & punishment:

6. PAWNBROKER, JUNK/SECONDHAND DEALER

Secondhand dealers: indicate here if dealing in precious items: Yes No

Precious items include gold, silver, platinum or jewelry containing gold, silver, platinum, stones, gems or pearls.

LICENSE FEE: PAWNBROKER \$200/YR & \$5,000 REPORTING FEE/YR JUNK/SECONDHAND DEALER - \$200/YR & \$500 REPORTING FEE/YR

7. ADULT BUSINESS, ESCORT, MASSAGE THERAPY ESTABLISHMENT

PLEASE ALSO SUBMIT WITH THIS APPLICATION THE FOLLOWING FOR APPLICANT, OPERATORS AND/OR EMPLOYEES:

- a. *Names you have used in the last 5 years other than what is listed under "applicant".*

- b. *Copy of driver's license*
- c. *Copy of a government photo ID*
- d. *Two portrait photos taken within the last 6 months*
- e. *Copy of AZ massage license for all therapists*
- f. *Two copies of the floor plan for the establishment*

(Attach additional pages if necessary)

LICENSE FEE: ADULT, ESCORT AND MASSAGE THERAPY ESTABLISHMENT - \$200/YR

8. Temporary Banners and Permanent Signs require a permit

[Apply for a Burglar Alarm Permit](#)

LICENSING FEES PAYABLE BY CASH OR CHECK ONLY

9. THE INFORMATION PROVIDED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Signature _____ Date _____

Printed Name _____



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LICENSING ELIGIBILITY

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According to the Legal Arizona Workers Act (A.R.S. 41-1080), specific documentation is required to issue a business registration if your business ownership type is identified as an **Individual, Sole Proprietorship, or Husband and Wife** business. Before your registration can be approved, you must provide a copy of one of the following documents indicating your presence in the United States is authorized under federal law (if applying as Husband and Wife both individuals must provide documentation).

Check the box next to the document type you are presenting:

<input type="checkbox"/>	An Arizona driver license issued after 1996 or an Arizona non-operating identification license.
<input type="checkbox"/>	A driver license issued by a state that verifies lawful presence in the United States. (Driver licenses CANNOT be accepted if issued by: HI, ME, MD, MI, NM, UT, or WA).
<input type="checkbox"/>	A birth certificate or delayed birth certificate issued in any state, territory or possession of the United States.
<input type="checkbox"/>	A United States certificate of birth abroad.
<input type="checkbox"/>	A United States passport.
<input type="checkbox"/>	A foreign passport with a United States visa.
<input type="checkbox"/>	An I-94 form with a photograph.
<input type="checkbox"/>	A United States citizenship and immigration services employment authorization document or refugee travel document.
<input type="checkbox"/>	A United States certificate of naturalization.
<input type="checkbox"/>	A United States certificate of citizenship.
<input type="checkbox"/>	A tribal certificate of Indian blood.
<input type="checkbox"/>	A tribal or Bureau of Indian affairs affidavit of birth.

This provision does not apply to an individual, if **all** of the following apply:

- 1) The individual is a citizen of a foreign country, or, if at the time of application, the individual resides in a foreign country.
- 2) The benefits that are related to the license do not require the individual to be present in United States in order to receive those benefits.

You may mail a copy of the required document or bring the original into our office and we will make a copy for you.

Signature of Applicant(s)

Printed Name(s)

Date



Arizona Department of Revenue Transaction Privilege Tax Application (Short Form)

License Compliance Unit: 1600 W. Monroe, Ste. 620 Phoenix, AZ 85007

**To Register, File and
Pay online, go to
www.aztaxes.gov**

The simplified application is used for transient vendors. Each section below must be completed, to receive the License. For licensing questions on transaction privilege or withholding taxes, call (602) 716-6440 or (602) 716-6438. Please return the completed application with appropriate fees to: License Compliance Unit, Arizona Department of Revenue, 1600 W. Monroe, Ste. 620 Phoenix, AZ 85007

Incomplete applications will not be processed. All required information is designated with asterisk *

Business Information			
Do you have Arizona employees? (Check One) Yes <input type="checkbox"/> No <input type="checkbox"/>		Type of ownership * (Check One) <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <i>(State and Date of Incorporation)</i>	
Legal business name *		Social Security Number or FEIN *	
Business (or DBA) name *		Business Start Date *	
Business phone <i>(Include area code)</i> *	E-mail address	Location and Date of events / swap meets	
Mailing address <i>(street, route, or PO Box)</i> *		City	State Zip Code
Primary Location of Business <i>(Physical address) No license will be issued without this information *</i>		City	State Zip Code
Is your business located on an Indian Reservation? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please tell us which one _____			
Description of Business *			

Owners / Partnerships / Corporation Officers Identification					
Social security number *	Name *	Title*	% Owned *	Complete residence address *	Area code & phone number *

Please check the months in which you intend to do business in Arizona

Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec

Taxpayer's Signature *	Date _____
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License Fees

Make Checks Payable to the Arizona Department of Revenue

Do Not Send Cash

City codes for cities where you will be doing business
(See reverse side for list of cities for which taxes are collected)

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ADOR 10759 (7/11)

Print Reset form

State fees \$12 X No. Loc. _____	
Total city fees _____	
Total fees due _____	

Instructions

This Short Form Application is Intended for Use by Vendors at Transient Selling Events Such as Fairs, Special Events, Shows and Swap Meets

- Do you have employees?** Check yes if you employ individuals in the state of Arizona. If you do not have employees or only have immediate family members who assist you during a special event or at a swap meet, check no.
- Type of ownership** Check as applicable. Corporations and partnerships must provide the federal employer identification number.
- Legal business name or owner name** Enter the individual's and spouse's name if **Individual** was selected for ownership type.
Enter all partner's names if **Partnership** was selected for ownership type. Additional owners may be listed on a separate sheet and attached.
Enter the organization name owning or controlling the business if **Corporation** was selected for ownership type.
- Business (or DBA) name** Enter the name of the business/DBA (doing business as) name, if the same as legal business name, enter same. Commonly, the business name is the name by which the public knows your business/company/shop. If you wish correspondence to be sent to a name other than the owner, enter the name of the department or accountancy firm as "In Care Of" to ensure delivery by the postal service.
- Location and Date of event/ swap meet** Enter the address and date of the special event or swap meet. If you do not know the actual address of the event, enter the city/town name in which the event will be held. The location is very important in determining whether an additional city/town license must be obtained for those licensed by the state. Use the City or Town Licensed By The State chart below to determine if you must be licensed through the state for the location in which your event occurs. For cities not listed, please contact the city directly. Also add the city fee amount to the license fee which appears in the lower right corner of the front page.
- Mailing address** Enter mailing address where all correspondence is to be sent. You may elect to use your home address, corporate headquarters, or accounting firm's address.
- Primary location of business** Enter the street address for the primary location of the business. If you conduct most of your business at various special events or swap meets throughout the state, you may wish to enter your resident location. Even if your mailing address is a PO Box, you must provide a physical location. For example if you live in a rural community, your physical location may be the intersection of two roads, interstates, or milepost marker.
- Description of business** Describe the major activity and principal product you manufacture or commodity sold or service performed. Your description of your business is very important because it determines your sales tax rate and provides a basis for state economic forecasting.
- Owners identification** Enter as many as applicable, attach a separate sheet if additional space is needed. The authority for mandatory requirement for social security numbers of owners is provided in ARS § 42-1105.
- Signature** The application must be signed by either the individual owner or, for partnerships or corporation, two partners or two corporate officers.

Fees The state fee is \$12 no matter how many special events you attend. However, a separate city license fee is required for each city unless you are currently licensed for the city in which an event will be held. List the cities in which you will be doing business on the front of the application form and total to determine the amount due.

City or Town Licensed by the State

CITY/TOWN	C O D E	F E E	CITY/TOWN	C O D E	F E E	CITY/TOWN	C O D E	F E E
BENSON	BS	5.00	HAYDEN	HY	5.00	SHOW LOW	SL	2.00
BISBEE	BB	1.00	HOLBROOK	HR	1.00	SIERRA VISTA	SR	1.00
BUCKEYE	BE	2.00	HUACHUCA CITY	HC	2.00	SNOWFLAKE	SN	2.00
CAMP VERDE	CE	2.00	JEROME	JO	2.00	SOUTH TUCSON	ST	2.00
CAREFREE	CA	10.00	KEARNY	KN	2.00	SPRINGVILLE	SV	5.00
CASA GRANDE	CG	2.00	KINGMAN	KM	2.00	ST. JOHNS	SJ	2.00
CAVE CREEK	CK	20.00	LAKE HAVASU	LH	5.00	STAR VALLEY	SY	2.00
CHINO VALLEY	CV	2.00	LITCHFIELD PARK	LP	2.00	SUPERIOR	SI	2.00
CLARKDALE	CL	2.00	MAMMOTH	MH	2.00	SURPRISE	SP	10.00
CLIFTON	CF	2.00	MARANA	MA	5.00	TAYLOR	TL	2.00
COLORADO CITY	CC	2.00	MARICOPA	MP	2.00	THATCHER	TC	2.00
COOLIDGE	CL	2.00	MIAMI	MM	2.00	TOLLESON	TN	2.00
COTTONWOOD	CW	2.00	ORO VALLEY	OR	12.00	TOMBSTONE	TS	1.00
DEWEY/HUMBOLDT	DH	2.00	PAGE	PG	2.00	TUSAYAN	TY	2.00
DUNCAN	DC	2.00	PARADISE VALLEY	PV	2.00	WELLTON	WT	2.00
EAGAR	EG	10.00	PARKER	PK	2.00	WICKENBURG	WB	2.00
EL MIRAGE	EM	15.00	PATAGONIA	PA	25.00	WILLIAMS	WL	2.00
ELOY	EL	10.00	PAYSON	PS	2.00	WINKELMAN	WM	2.00
FLORENCE	FL	2.00	PIMA	PM	2.00	WINSLOW	WS	10.00
FOUNTAIN HILLS	FH	2.00	PINETOPLAKESIDE	PP	2.00	YOUNGTOWN	YT	10.00
FREDONIA	FD	10.00	PRESCOTT VALLEY	PL	2.00	YUMA	YM	2.00
GILA BEND	GI	2.00	QUARTZSITE	QZ	2.00			
GILBERT	GB	2.00	QUEEN CREEK	QC	2.00			
GLOBE	GL	2.00	SAFFORD	SF	2.00			
GOODYEAR	GY	5.00	SAHUARITA	SA	5.00			
GUADALUPE	GU	2.00	SAN LUIS	SU	2.00			

Indian Reservation (County)	CODE	Indian Reservation (County)	CODE
Ak-Chin (Pinal)	PNA	Pascua-Yaqui (Pima)	PMN
Cocopah (Yuma)	YMB	Salt River Pima-Maricopa (Mar.)	MAO
Colorado River (La Paz)	LAC	San Carlos Apache (Gila)	GLP
Fort McDowell-Yavapai (Mar.)	MAE	San Carlos Apache (Graham)	GRP
Fort Mojave (Mohave)	MOF	San Carlos Apache (Pinal)	PNP
Fort Yuma-Quechan (Yuma)	YMG	San Juan Southern Paiute	COQ
GilaRiver (Maricopa)	MAH	Tohono O'Odham (Maricopa)	MAT
GilaRiver (Pinal)	PNH	Tohono O'Odham (Pima)	PMT
Havasupai (Coconino)	COI	Tohono O'Odham (Pinal)	PNT
Hopi (Coconino)	COJ	Tonto Apache (Gila)	GLU
Hopi (Navajo)	NAJ	White Mtn Apache (Apache)	APD
Hualapai (Coconino)	COK	White Mtn Apache (Gila)	GLD
Hualapai (Mohave)	MOK	White Mtn Apache (Graham)	GRD
Kaibab-Paiute (Coconino)	COL	White Mtn Apache (Navajo)	NAD
Kaibab-Paiute (Mohave)	MOL	Yavapai Apache (Yavapai)	YAW
Navajo (Apache)	APM	Yavapai Prescott (Yavapai)	YAX
Navajo (Coconino)	COM		
Navajo (Navajo)	NAM		
Pascua-Yaqui (Maricopa)	MAN		

This Area For Agency Use Only				
Sales	Withholding	NAICS code	Business code	PRG code
Cities				

ADOR 10759 (7/11)

Special Event Tip Sheet

- **CHECK ALL YOUR ELECTRICAL CORDS:**

Are they (UL) rated for the work they are doing? What is their condition? Are they frayed or damaged?

- **PLUGS OR ADAPTERS:**

Are your adapters being used to serve one appliance or are they being overloaded? Remember all temporary cords or plugs must be affixed to temporary stands. Do not run through walls, openings or under doors or areas that can damage them.

- **TENTS AND CANOPIES:**

Must be rated for use. Check the labels to ensure they have a fire certification label and that it has not expired. Check to ensure you have appropriate extinguishers for your tent and size. Ensure that all 'No Smoking' signs are up and visible. Remember if you are in a tent, code does not allow open flame; this means candles or any other device. Tents and canopies in cumulative excess of 240 sq. ft. will incur an additional fee for inspection.

- **TENT LOCATION:**

Tents shall not be located within 20' of property lines, buildings, temporary membrane structure, other tents or canopies, parked vehicles or internal combustion engines. (*temporary membrane structure: an air inflated, air-supported, cable, or frame covered structure.*)

- **TRAILER MOUNTED GENERATORS:**

Will require one ground rod with test, or two ground rods without test.

- **GENERATORS:**

Generators and other internal combustion power sources shall be separated from temporary membrane structures, tents and canopies by a minimum of 20' and be isolated from contact with the public by fencing or other approved means.

- **SIGNS:**

Signage will be reviewed at time of submittal.

- **PARKING:**

Make sure that the parking lot has a dust proof surface (i.e. water, gravel, pavement or chemical/organic stabilizer).

- **FIRE DEPARTMENT ACCESS:**

Remember, we need a minimum of 20' of unobstructed road to bring in Fire or Medical apparatus.

- **FLAMMABLE & COMBUSTIBLE LIQUID STORAGE:**

Flammable, liquid fueled equipment shall not be used in temporary membrane structures, tents or canopies.

Flammable and combustible liquids shall be stored outside in an approved manner not less than 50' from temporary membrane structure, tents and canopies.

- **RECREATIONAL FIRES (BONFIRES):**
Needs to be 25' from any buildings or cars. Need a water source (garden hose) or fire extinguisher. Fire must be attended at all times. Provide a safety barrier around the fire to keep someone from getting too close.
- **FIRE EXTINGUISHERS:**
If you are having a midway or other activities where travel is in place, a fire extinguisher must be in place every 75'.
- **COOKING AND HEATING:**
 1. Cooking and heating equipment shall not be located within 10' of exit or combustible material.
 2. Tents where cooking is performed shall be separated from temporary membrane structure, other tents and canopies by a minimum of 20'.
 3. Outdoor cooking that produces sparks or grease-laden vapors shall not be performed within 20' of a temporary membrane structure, tent or canopy.
- **HOT COOKING, BROILERS, DEEP FAT FRYERS OR GRILLS:**
Must have a minimum of one fire extinguisher (40BC). May be required to have a fixed automatic fire protection system.
- **LIQUIFIED PETROLEUM GAS (LPG):**
Use as intended. All LPG containers must be secured to a solid object to prevent tip over. Please check to make sure that all cylinders are at least 10' from combustibles (things that can burn). Are the tanks protected from hazards (cars or other things that might hit it or cause damage)? Did you post your 'No Smoking' signs at least 15' from tanks? Is your fire extinguisher in place? At least one (2A10BC rated) fire extinguisher is required.
- **All tents, canopies and other membrane structures over 240 sq. ft. are required to obtain a Fire Department Permit 480-503-6352. You may obtain a permit application at the following web link: <http://www.gilbertaz.gov/eservices/fire/pdf/TentCanopyPermit.pdf>**
- **Anyone conducting sales of consumer fireworks is required to fill out a Fire Department Application 480-503-6352. You may obtain an application at the following web link: <http://www.gilbertaz.gov/eservices/fire/pdf/ConsumerFireworks.pdf>**

**HAVE A WONDERFUL EVENT AND SHOULD YOU
HAVE ANY QUESTIONS, PLEASE CALL US AT:**

**DEVELOPMENT SERVICES
(480) 503-6700**