



SPECIAL EVENTS PERMIT APPLICATION

EVENT INFORMATION

Permit: _____

Type of Event: _____	Date(s): _____
Address/Location: _____	Hours (Start to End): _____
Description of Event: _____	

CONTACT INFORMATION

Organization applying for the permit: _____	
Name of person applying for/picking up the permit: _____	
Phone Number: _____	Email: _____

GENERAL INFORMATION

Please check yes or no to the following event amenities. Also, please review the Special Events Permit Guide for more details/requirements on each amenity.

Tents: Yes ___ No ___ If yes, what size is the tent: _____

Bounce Houses/Carnival rides: Yes ___ No ___

Food Trucks/Tents/Stations: Yes ___ No ___ *If yes, please list the name of the food truck(s) that will be at the event.

Alcohol: Yes ___ No ___ *If yes, Please attach appropriate state permits & proof of insurance

Police: Yes ___ No ___ *If yes, how many hours are they needed (2 hrs minimum): _____ Contact: (803)220-2532 or lexingtonsc@extradutysolutions.com to get current rates and to book officers.

Town provided barricades: Yes ___ No ___ if yes, set up day/ time _____ removal day/time _____

Solid Waste/Recycling: Yes ___ No ___

Portable Restrooms: Yes ___ No ___

***Please be sure to attach all the forms that are required for specific event. See event permit guide for details on specific required licenses, renderings, and lists. All Vendors must have a Town of Lexington Business License.**