



**City of Rochester
Building Department**
1000 Rochester Hills
Rochester Hills, MI 48309
(248) 656-4615 Phone
(248) 656-4623 Facsimile

SPECIAL EVENT PERMIT
COVID 19 APPLICATION



I. Event Location	
Street Address	
Sidwell Number	
Type of Event	
<input type="checkbox"/> Outdoor seating - A copy or picture of your current Occupant Load Placard is required	
<input type="checkbox"/> Retailers/Commercial Tents	

Project Number: _____

Permit Number: _____

II. Applicant Information			
<input type="checkbox"/> Tenant <input type="checkbox"/> Owner	Name	Email	
Address (Street Number and Name)			State
City	Cell Number ()	Zip Code	
Telephone Number ()	Federal Employer ID Number (or reason for exemption)	Fax Number ()	

III. Site Plan Requirements
<p>PROVIDE A SITE DRAWING ON 8 ½" x 11" PAPER, TO INCLUDE THE FOLLOWING:</p> <ol style="list-style-type: none"> 1. Location of stand and/or sales area. Include distances from all adjacent buildings. 2. Location and number of off-street parking; and fire lanes. 3. Location and size of any signage. 4. Anticipated number of participants. <p>If Applicant is other than Property Owner, a copy of Lease Agreement and/or written permission from the owner shall be submitted.</p>

Date(s) of Event: From _____ to _____	Hours of operation: From _____ to _____
Temporary electric Yes <input type="checkbox"/> No <input type="checkbox"/>	Sanitary facilities available: Inside <input type="checkbox"/> Outside <input type="checkbox"/>
Number of tents _____	Size of tent(s) _____
Number of canopies _____	Size of canopy(s) _____

By making application for and accepting a permit, the applicant/permittee acknowledges and accepts full responsibility for the proper installation and maintenance of the subject tent or temporary structure. The applicant/permittee further acknowledges, understands, and agrees that the City disclaims and bears no responsibility for the proper installation and maintenance of the subject tent or temporary structure or for the safety or security of same from and against any and all causes including, but not limited to, wear and tear, defective materials or workmanship, vandalism, fire, or weather, and the applicant/permittee agrees to indemnify and to hold the City, and its elected and appointed officials, officers, and employees harmless against any claims, suits, liabilities, damages, expenses, or losses in connection therewith.

IV. Applicant Signature	
I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of the State of Michigan. All information submitted on this application is accurate to the best of my knowledge.	
Signature of Applicant	Date
Print Name	

FOR OFFICE USE ONLY

Zoning Review

Use _____ ZBA _____

Stipulations: _____

Approved by: _____ Date: _____

Not approved by _____ Date: _____

Reason(s) _____

Building Plan Review

Stipulations: _____

Approved by: _____ Date: _____

Not approved by: _____ Date: _____

Reason(s) _____

Application Checklist

- Flame Spread Information on tents (if applicable)
- Written approval from Property Owner (if applicable)
- Certificate of Insurance with City named as certificate holder
- Fire Department Review
- Engineering Review
- Planning Review
- Building Review

Inspector Notes