



## ***SPECIAL EVENT APPLICATION COVER LETTER***

City of Jefferson  
102 N. Polk  
Jefferson, TX 75657  
Office 903-665-3922  
Fax 903-665-1002  
Email: \*\*\*\*

Thank you for your interest in growing tourism in Jefferson. This letter is to give you an overview of the Special Event Application process.

**Purpose of the Special Event Application:** The City of Jefferson encourages special events and programs that will bring more visitors to Historic Jefferson and encourages overnight stays.

**Application Guidelines:** A Special Event Application must be submitted for any event that closes city streets or uses public parking lots or other City of Jefferson Property.

**Submitting the Event Application:** Promoters/organizations (hereinafter referred to as "Promoter") are required to submit Special Event Applications by the given deadline (refer to the Timetable below). Applicants will be asked to present their application in person to the Jefferson City Council. The applications should be delivered, emailed or mailed to City Hall. The original and eight copies of the complete application package are required.

**Timetable:** Projects must meet the guidelines and criteria outlined in this letter and the Special Event Application. Completed applications should be submitted to City of Jefferson not later than:

Events scheduled for January 1 <sup>st</sup> – March 31 <sup>st</sup> .....	September 1 <sup>st</sup>
Events scheduled for April 1 <sup>st</sup> – June 30 <sup>th</sup> .....	December 1 <sup>st</sup>
Events scheduled for July 1 <sup>st</sup> – September 30 <sup>th</sup> .....	March 1 <sup>st</sup>
Events scheduled for October 1 <sup>st</sup> – December 31 <sup>st</sup> .....	June 1 <sup>st</sup>

Applications will usually be presented at a City Council Meeting held within 30 days from date application is received. City Council meetings are generally held on the third Tuesday of each month. Applications may be mailed, emailed or hand delivered to Jefferson City Hall, address as noted above.

**Mandatory Attachments:**

- Special Event Application
- Copies of advertising, brochures, if available
- Certificate of Insurance (not later than ten days prior to event)
- Site plan and/or race/parade route map, if applicable

## **Roles and Responsibilities:**

- Promoter is responsible for
  - Submitting a complete application and copies by due dates in the Timetable
  - Periodically review the City of Jefferson website to determine when your agenda item will be discussed. If you don't see your event on a City Council meeting agenda within the month that you submitted this application, please contact the City of Jefferson as noted below.
  - Appearing at a scheduled City Council meeting to review application
  - Coordinating security with Jefferson City Police
  - Coordinating delivery of street barriers with Jefferson City Hall
  - Setting up and taking down street barriers as set forth in application
  - Coordinating delivery and placement of additional trash barrels with City Hall
  - Coordinating additional trash/debris pick up services with City Hall
  - Renting and servicing of port-a-potties
  - Obtaining appropriate TABC permits, if applicable
  - If event will include vendors, Promoter is responsible to see that vendors obtain applicable permits through City Police
  - Coordinate advertising promotion with Jefferson Tourism Board
  - Coordinate press releases and calendar listings with Tourism Department and Marion County Chamber of Commerce
  - Present a post-event report to the City Council within 60 days of completion of the event to include the approximate number of lodging rooms used during the event.
- City of Jefferson will
  - Provide reasonable security as agreed to by City Chief of Police
  - Deliver street barriers to main intersections, pursuant to road closures in application
  - Deliver and place additional trash barrels
  - Provide reasonable trash/debris pick up services
  - Distribute press releases and place event on Tourism calendar listing

**Disclaimer:** The City of Jefferson reserves the right to accept or reject any or all application, or to waive any informalities in the application process.

**Contacts:** If you have any questions, please contact \*\*\*

City of Jefferson, City Hall, 102 N. Polk Street, Jefferson, TX 75657, 903-665-3922, email: \*\*\*

<http://www.jeffersontexas.us/meeting-agendas/>

### **Additional contacts:**

Marion County Chamber of Commerce, 305 E. Austin, Jefferson TX 75657, 903-665-2672, [jeffersontx1@att.net](mailto:jeffersontx1@att.net)

<http://www.jefferson-texas.com/>

Jefferson Tourism Department, 305 E. Austin, Jefferson TX 75657, 903-665-3733, [visitjeffersontexas@gmail.net](mailto:visitjeffersontexas@gmail.net)

<http://www.visitjeffersontexas.com/>

Jefferson Police Department:, E. Austin, Jefferson, TX 75657, 903-665-2432

# SPECIAL EVENT APPLICATION

For City of Jefferson Use Only
<b>Received Date:</b>
For City of Jefferson Use Only
<b>Received By:</b>



For City of Jefferson Use Only
<b>Agenda Date:</b>
For City of Jefferson Use Only
<b>City Council Approval Date:</b>

THIS FORM MUST BE COMPLETED IN FULL AND SUBMITTED NO LATER THAN **90 DAYS** PRIOR TO THE EVENT  
 City of Jefferson \* 102 N. Polk \* Jefferson, TX 75657 \* Ph: 903-665-3922 / Fax: 903-665-1002 \* Website: [www.jeffersontexas.us](http://www.jeffersontexas.us)

**INSTRUCTIONS:** PLEASE TYPE OR PRINT CLEARLY. INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.

## GENERAL EVENT INFORMATION

Name of Event			
Exact Address of Event			
Type of Event (Check all applicable)			
<input type="checkbox"/> Festival	<input type="checkbox"/> Run/Walk	<input type="checkbox"/> Parade(s)	<input type="checkbox"/> Car Show
<input type="checkbox"/> Craft Fair	<input type="checkbox"/> Fireworks	<input type="checkbox"/> Other	
Date(s) of Event	Hours of Event	Date (s) needed (Set-up - Tear down):	
From:	From:	From:	
To:	To:	To:	
Estimated number of volunteers/workers	Phone number for publication	Website for publication	
Estimated Attendance per Day	Total Estimated Attendents	Last Years Actual Attendance	Number of Years for Event
Detailed description of Event (attach advertising, brochure, etc, if any) Describe the event's community and/or cultural benefit:			

## SPONSORING ORGANIZATION INFORMATION

Name of Sponsoring Organization		Contact person from Sponsoring Organization	
Sponsoring Organization Address		City	Zip
Phone Number	E-Mail	Website	

## ORGANIZER/COORDINATOR INFORMATION

Name of Organizer/Coordinator		E-mail	
Organizer/Coordinator Address		City	Zip
Phone Number	Cell Phone Number	Fax Number	

## EMERGENCY CONTACT INFORMATION

Name of Emergency Contact		E-mail	
Emergency Contact Address		City	Zip
Phone Number (24hours)	Cell Phone Number	Fax Number	

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### EVENT OVERVIEW

Is this your first event?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If no, how many years? _____
Will the event include food vendors?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how many vendors? _____ (If yes, each vendor must submit a Temporary Food Event Permit Application prior to the event. Visit: <a href="http://www.jeffersontexas.us/">www.jeffersontexas.us/</a> )
Will the event include alcoholic beverage sales? (TABC laws apply)	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how many vendors? _____ Location of designated area(s)? _____
Will the event include arts & crafts/retail vendors?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how many vendors? _____ (If yes, each vendor must submit a Temporary Merchant Event Permit Application prior to the event Visit: <a href="http://www.jeffersontexas.us/">www.jeffersontexas.us/</a> )
Will the event include rides or devices?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how many vendors? _____ (If yes, each vendor must submit a Temporary Amusement Ride Event Permit Application prior to the event Visit: <a href="http://www.jeffersontexas.us/">www.jeffersontexas.us/</a> )
Are you erecting tents or structures on City of Jefferson property for the event?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how many? _____ Locations: _____
Will the event include a Race/Walk or Parade Event?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, you must complete, Page 3, Section 1 and Section 2.
Will you occupy any public parking lots/streets or other City of Jefferson Property for your event?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, you must complete, Page 3, Section 2.
Are you providing porta-potties? (not provided by the city)	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how many? _____ Locations: _____
Will the event require use of city trash cans?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how many? _____
Will the event require use of city baracades?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how many? _____
Will extra security be needed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please contact City of Jefferson Chief of Police 30 days prior to event. (phone: 903-665-2432)

Application must include the following documentation, if applicable:

- ☐ Special Event Application (Page 1, 2, 3, 4)
- ☐ Certificate of Insurance (see Section 3) (Optional at the descretion of the City of Jefferson)
- ☐ Site Plan and/or Race/Parade Route Map

APPLICATIONS WITH MISSING INFORMATION WILL NOT BE PROCESSED.

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### NAME OF EVENT

SECTION 1: RACE/WALK, PARADE(S) INFORMATION	Not Applicable
Starting Location	Ending Location
Approximate Number of Attendees (runners/marchers)	Approximate Number of Vehicles (cars/floats)
Location of Assemble (Registration)	Location of Personal Vehicle Parking
Police Officers / Law Enforcement needed for Parade(s)	Other / Additional Information

Please attach a course map, with location of the staging area, start/finish lines, and water/first aid stations

SECTION 2: STREET CLOSURES /PARKING LOT/PROPERTY USAGE INFORMATION	Not Applicable
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Street Closures /Public Parking Lot / Property Intended for "Event"

Lot Number or Location	Date of Closure	Time of Closure	Date to Reopen	Time of Reopen

1. No Staking in the Street or Public Parking Lot is permitted
2. Only chalk or other City of Jefferson approved marking is permitted (No spray paint)

ADDITIONAL INFORMATION:

SECTION 3: INSURANCE	Does this event have insurance?	YES	NO
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### INSURANCE REQUIREMENTS

If yes, Sponsoring Organization will provide an original Certificate of Insurance evidencing the following insurance minimums:

**Commercial General Liability - minimum \$1,000,000 per occurrence**

Certificate of Insurance should be provided by applicant 10 days prior to Event contingent on applicant naming the **City of Jefferson** as additional insured.

INSURANCE AGENT / CONTACT INFORMATION:

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### SECTION 4: APPLICANT AGREEMENT

Name of Sponsoring Organization

Name of Event

Date(s) of Event

### ACKNOWLEDGEMENT/SIGNATURE

By signing this document, I certify that the information provided above is correct. I agree to conduct the special event in compliance with all applicable codes, ordinances, laws and the conditions contained in the special event permit.

SIGNATURE

DATE

PRINT NAME

TITLE/POSITION

### SECTION 5: APPROVAL / NON APPROVAL - JEFFERSON CITY COUNCIL USE ONLY

APPROVED: ☐ YES

☐ NO

DATE

APPROVED BY:

SIGNATURE / PRINT NAME

TITLE/POSITION

IF NOT APPROVED, REASON FOR NON-APPROVAL:

City of Jefferson has the right to waive any or all requirements of this application,  
or add additional requirements.

*Please PRINT Clearly*

Date: \_\_\_\_\_ Event Name: \_\_\_\_\_

YOUR NAME: \_\_\_\_\_

Email Address: \_\_\_\_\_

Where do you live: \_\_\_\_\_

Where did you stay: Highway - Motel or Hotel RV Park  
In Town B&B Hotel At Home Other: \_\_\_\_\_

How many days are you staying overnight in town?  
1 2 3 or more

Did you eat in a restaurant: YES NO  
Downtown or Highway

How much did you spend: \_\_\_\_\_

Did you shop in town: YES NO

How much did you spend: \_\_\_\_\_

What did you come to Jefferson Texas for?

What did you like best about your visit to Jefferson Texas?

How did you hear about the Event?

Radio TV Magazine Online Innkeeper Local  
Comments:

This questionnaire is very important, Please give the best estimates you can.

*Thank you so much for coming!*

*Please PRINT Clearly*

Date: \_\_\_\_\_ Event Name: \_\_\_\_\_

YOUR NAME: \_\_\_\_\_

Email Address: \_\_\_\_\_

Where do you live: \_\_\_\_\_

Where did you stay: Highway - Motel or Hotel RV Park  
In Town B&B Hotel At Home Other: \_\_\_\_\_

How many days are you staying overnight in town?  
1 2 3 or more

Did you eat in a restaurant: YES NO  
Downtown or Highway

How much did you spend: \_\_\_\_\_

Did you shop in town: YES NO

How much did you spend: \_\_\_\_\_

What did you come to Jefferson Texas for?

What did you like best about your visit to Jefferson Texas?

How did you hear about the Event?

Radio TV Magazine Online Innkeeper Local  
Comments:

This questionnaire is very important, Please give the best estimates you can.

*Thank you so much for coming!*

## City of Jefferson Post Event Report

Please present your Post Event Report to the Jefferson City Council within 60 days of your event.

Event Name:		Event Date:	
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Organization Name:	
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Event Attendance:	
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Total # of Lodging Rooms Per Night:	
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Total # of Nights:	
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Did this event meet your attendance objectives?	
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If no, please explain the reason:	
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Describe your marketing and promotion methods that were used to attract visitors to your event:

Please describe results of any surveys or follow up that was conducted with attendees in regard to the event.

Additional Comments: