



Village of Middleville, 100 E Main St. Middleville MI 49333  
Application for Event Permit

***Any person, firm, or organization organizing an event within the Village of Middleville must obtain an Event Permit.***

This application must be filed with the Village sixty (60) days prior to the scheduled date of the Event.  
Any application received less than 60 days before the event may not be approved.  
For questions, please call the Village Hall at 269-795-3385.

Person / Group responsible for event: \_\_\_\_\_

Complete Mailing Address for Person or Group: \_\_\_\_\_

Main Contact: \_\_\_\_\_ Daytime Phone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

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

Description of Activity or Event: \_\_\_\_\_

\_\_\_\_\_

Location Requested: \_\_\_\_\_

\*Facility Rental may be required – please complete the applicable form

Date of Event: \_\_\_\_\_ Time Start: \_\_\_\_\_ am/pm Time End: \_\_\_\_\_ am/pm

Number of expected participants and spectators: \_\_\_\_\_

Provide a detailed explanation, including drawings or completed information where applicable, of the following:  
(Please use an extra sheet if needed for complete information)

1. Submit route map for any parades, running/walking events, etc.
2. Specification of any street or intersections which the applicant is asking to be closed during the event.
3. If and where parking is to be restricted or prohibited during the event. \_\_\_\_\_  
\_\_\_\_\_
4. Will you have parking attendants and parking areas defined? \_\_\_\_\_
5. Description of any sound amplification equipment to be used and how and where it is to be used.  
\_\_\_\_\_
6. Will admission be charged or offerings/donations be solicited? \_\_\_\_\_ Yes \_\_\_\_\_ No

Will beverages, food, or other merchandise be available for sale? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, explain \_\_\_\_\_

Is a food truck/concession being requested? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, what is the proposed location? \_\_\_\_\_

\*Applicant shall be responsible for communicating all permit requirements to Vendors. Vendor / Solicitor permits are at the Village Hall and must be completed/approved for all Vendors. If food or beverages are to be sold, approval from the Barry-Eaton County Health Department is required.

7. Are the restrooms in the area adequate? Who will maintain them during the event? Who will replace the restroom supplies? \_\_\_\_\_

8. How much refuse will be generated by your event and what measures have been taken to keep the area clean? \_\_\_\_\_

9. Who within your organization is responsible for cleanup and by what time will the area be cleaned? \_\_\_\_\_

10. Liability Insurance in the amount of at least \$1,000,000 is required, with the Village of Middleville listed as a Certificate Holder. Proof of Insurance will need to be provided.

a. Insurance Co. Name: \_\_\_\_\_

b. Amount \_\_\_\_\_

The Village Council may impose any additional conditions and requirements that it deems necessary, or appropriate, for the protection of the public health, safety, and welfare of citizens and visitors to the Village.

Conditions (to be completed by Village Staff) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. Are Village services being requested? \_\_\_\_\_ Yes \_\_\_\_\_ No (Fees may be charged for Village services) Fees to be determined by Village DPW Director based on estimated time needed at \$25.00/man hour. If yes, describe in detail what services (traffic control/barricades/extra trash bins/etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Fees for services \$ \_\_\_\_\_ (to be completed by Village Staff)

12. What is the plan for emergency vehicle access? \_\_\_\_\_

13. Do you plan to distribute advertising or flyers before or during this event? \_\_\_\_\_ Yes \_\_\_\_\_ No

14. Do you plan to place any signs, banners, or other advertisements at the event site? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, all signage locations must be approved the Village DPW Director.

If yes, who is responsible for installation and removal of all items \_\_\_\_\_

15. Will any fireworks be discharged during the event? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, an Application for Consumer Fireworks Display is required.

I do attest and affirm that the above and attached information is true and accurate to the best of my knowledge and that I am authorized to apply for an Event permit on behalf of the above-named organization.

I understand that the filing of this application does not ensure approval of an event. I also understand that all Event organizers and participants must comply with applicable Village ordinances, traffic rules, state health laws, fire codes, and liquor licensing regulations. I further understand that an incomplete application may be cause for the denial of this event.

The Host Organization and/or Event Organizer(s) agree to defend, indemnify, and hold harmless the Village of Middleville and the Village’s employees, officers, Village council members, and volunteers harmless from any and all losses, damages, claims for damage, liability, lawsuits, judgement expenses, and costs arising from any injury or death to any person or damage to any property including all reasonable costs for investigation and defense thereof (including but not limited to attorney fees, cost and expert fees) arising out of or attributed to the issuance of the applicant’s event permit regardless of where the injury, death or damage may occur, unless such injury, death or damage is caused by the sole negligence or willful misconduct of the Village.

The Host Organization and/or Event Organizer(s) agree to provide satisfactory evidence of, and shall maintain evidence of, and shall thereafter maintain during the specified event such insurance policies and coverages in the type, limits, forms and rating required by the Village, naming the Village as an additional insured and copy provided upon event approval.

I agree to be responsible for the removal of all equipment, paraphernalia, waste, trash, and other personal property belonging to or resulting from the event.

In case of a public works emergency, I/We will call **Barry County Dispatcher at 269-948-4800 Ext. 1.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**OFFICE USE ONLY**

◆-----◆  
Date Received: \_\_\_\_\_ To be presented to Council on: \_\_\_\_\_

Application Complete: \_\_\_\_\_

Application emailed as follows for input:                      Comments:

VOM/DPW Department on \_\_\_\_\_

BCSD-Middleville Unit on \_\_\_\_\_

Thornapple Township EMS on \_\_\_\_\_

\_\_\_\_\_ Approved    \_\_\_\_\_ Denied (reason if denied) \_\_\_\_\_ by Council on \_\_\_\_\_

Proof of Insurance received by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Fees for Village services in amount of \$ \_\_\_\_\_ paid via \_\_\_\_\_ Cash \_\_\_\_\_ Check #: \_\_\_\_\_

Received by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_