

Borough of Northumberland Event Planning Request Form

Contact Name: _____

Phone Numbers: Home _____ Cell _____

Sponsoring Organization: _____

Does Sponsoring Organization have insurance? _____ Yes _____ No

If yes, please provide copy of policy. If no, insurance may be required prior to event.

Name of Event: _____

Type of Event: _____

Date of Event _____ Time of Event _____ AM or PM

Location: _____

Will event require streets shut down? _____ Yes _____ No

If Yes, what Streets: _____

****Please provide a map, if appropriate.**

What specific activities will be taking place? _____

Estimated Attendance: _____

Borough Assistance Required: _____ Yes _____ No

Comments: _____

Office use only

Date request received: _____

Map included: __ YES __ NO

Request: __ Approved __ Denied

Date applicant notified: _____ by: _____

Date proof of insurance provided: _____ Insurance not required _____