



EVENT APPLICATION

City of Clewiston

115 W. Ventura Ave.
Clewiston, FL 33440

Telephone: (863) 983-1484
Fax : (863) 983-4055

INSTRUCTIONS: Applicant to submit Event Application and required fee to the City of Clewiston no less than four weeks before the event.

Date of Event:		Applicant's Name:		Event:							
Mailing Address:		City:		State/Zip Code:							
Telephone No.		Email Address:		Fax No.							
Representative to Contact:			Telephone No:								
Site/Facility for Event:		Time Event Starts:		a.m.	p.m.	Will Street be Closed?		Yes	No		
Estimated No. of Attendance:		Time Event Ends:		a.m.	p.m.	Beginning Time:		a.m.	p.m.		
						Ending Time:		a.m.	p.m.		
Description of Event:											
Will Food be Served?		Yes	No	Will Alcohol be Served?*		Yes	No	Are Dumpsters Needed?		Yes	No
Is Electricity Needed?		Yes	No	Minimum of (2) officers required* Officers x \$35/\$50 =		\$	Mandatory Cleaning Fee (Determined by type of Event):			\$	
Any other City Service/Equipment Needed? If Yes, explain:				Yes	No	City Supervisors Needed?		Yes	No		
						Supervisors @\$20 per hour =		\$			
The premises shall not be used for any illegal, improper, or immoral purpose. Renter will promptly and fully observe and comply with requirements, rules, laws, and ordinances of all lawfully constituted governmental authorities in any manner affecting the premises herein and hereby rented. Two weeks cancellation notice is required. Facility and/or site plan to be attached to form.											

Applicant's Signature:	Date:
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Fees (to be completed by City representative):

Bldg/Site Rental:	Cleaning:	Security:	Supervisors:	Other:	Subtotal:	25% Deposit if applicable	TOTAL:
\$	\$	\$	\$	\$	\$	\$	\$

Remarks:

Date submitted to the City:	Date considered by City:	Approved?
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Remarks:
