

**CITY OF LADUE
SPECIAL EVENT PERMIT REQUEST FORM**

The Special Event Permit Request Form is also available in alternative format (e.g. large print Braille) by request.

Site Plan Provided – A site plan of the property shall be attached to this form upon submittal.

Submit Special Event Permit Request Form to Andrea Sukanek, City Planner at asukanek@cityofladue-mo.gov

Name of Event _____ Date of Event _____

Day of Week _____ Time of Event _____

Event Address _____

(If you are not the property owner, provide written permission from property owner for this event.)

Event Contact Person _____ Phone Number _____

E-mail Address _____

Brief description of event _____

Annual event Yes _____ No _____

Set Up Date(s)/Time(s) _____ Take Down Date(s)/Time(s) _____

Number of people anticipated to attend this event _____

Will music/outdoor entertainment be provided at event? _____ Hours of music/entertainment _____

What type of music/entertainment will be provided (live music, recorded, music, type of sound system, etc.)?

Will event include amusement structures (e.g. bounce houses) or other temporary structures? If so, how many and what type? _____

Are tents to be erected? _____ Number of tents _____

Size of tent(s) to be erected _____

(Indicate on site plan approximate location of tents to be erected)

Number of vendors participating in this event _____

Will food be served? _____ **(If food will be prepared by vendors, each vendor must acquire a Temporary Food Establishment Permit from the St. Louis County Health Department)**

Will alcohol be served? _____ Do vendors serving alcohol have a caterer's license? _____
(Vendors serving alcohol must have a caterer's license; contact both St. Louis County Department of Licensing and Missouri Dept. of Public Safety Alcohol and Tobacco Control to obtain a license, if applicable.)

Will there be event signage? _____ **Size, Type and location of signage** _____

(Indicate on site plan approximate location of signage to be erected)

How will you address parking and site access? _____

How will traffic control be handled? _____

Will there be temporary restrooms? _____ **(Indicate on site plan approximate location of temporary restrooms, if applicable. A permit will be required from St. Louis County Health Department)**

Will the event include fireworks? _____
(If you intend to have fireworks you must obtain a Pyrotechnics Permit from Ladue Police Department and St. Louis County Department of Public Works.)

How will security be handled? _____

To be completed by City of Ladue

Any modifications to existing license/special use permit? _____

Will certificate of insurance be required? _____

Approved by _____

Date of Approval _____