

# Story County Planning and Development

900 6th Street, Nevada, Iowa 50201

(515) 382-7245 — pzweb@storycountyiaowa.gov — www.storycountyiaowa.gov

# SPECIAL EVENTS



This application is to be submitted a minimum of 21 days prior to the event.  
All applications are reviewed for comments by other county departments with action by the Board of Supervisors.

## 1. Property Owner\*

(Last Name) \_\_\_\_\_

(First Name) \_\_\_\_\_

(Address) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

(Phone) \_\_\_\_\_ (Email) \_\_\_\_\_

## 2. Applicant (if different than owner)

(Last Name) \_\_\_\_\_

(First Name) \_\_\_\_\_

(Address) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

(Phone) \_\_\_\_\_ (Email) \_\_\_\_\_

**3. Property Address** \_\_\_\_\_ **Parcel ID Number(s)** \_\_\_\_\_

## 4. Certification and Signature

I/we certify that the information and exhibits submitted are true and correct to the best of my knowledge and that in filing this application I am acting with the knowledge, consent and authority of the owners of the property. Pursuant to said authority, I hereby permit County officials to enter upon the property for the purpose of inspection.

**\*Acknowledgement of property owner is required and may occur via email or by signature of this application.**

**Property Owner Signature** \_\_\_\_\_ **Date** \_\_\_\_\_ **Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

### Event Information:

Type of Event: \_\_\_\_\_

Proposed Date(s): \_\_\_\_\_

Proposed Start Time: \_\_\_\_\_ Proposed End Time: \_\_\_\_\_

Proposed Location: \_\_\_\_\_

Estimated Number of Event Staff: \_\_\_\_\_

Estimated Number of Participants: \_\_\_\_\_

Estimated Number of Spectators: \_\_\_\_\_

### Submittal Requirements (see Section 83.06 of Story County Land Development Regulations):

- Filing Fee (required prior to processing): \$50
- Description of event
- Site Plan of existing and proposed buildings, structures, tents, parking, barricades, traffic control devices, street route plan, lighting and perimeter/security fencing
- List of signatures and/or copy of correspondence provided to adjacent property owners of the property planned for event
- Environmental health plan including plans for fresh water supplies, solid waste containers, collection and disposal, and toilet facilities /portable toilets
- Name and contact information of all vendors including Food Establishment Permits from the Iowa Department of Inspections and Appeals
- Fire prevention and emergency medical service plans; Security plan and/or law enforcement assistance
- Severe weather plan
- Certificate of event/liability insurance
- Plans for use of amplified sound, start and ending times, and location of speakers indicated on site plan
- If serving alcohol, a copy of a liquor license
- State electrical permit, if required

Receipt No. \_\_\_\_\_  
Receipt Amount \_\_\_\_\_