



# Manchester

## Special Event Application



**MANCHESTER, NH**

*Thank you for choosing New Hampshire's Business Capital for your upcoming event.*



# SPECIAL EVENT APPLICATION

## Welcome to the City of Manchester!

Each year Manchester hosts hundreds of events in our parks and on our roadways. City officials and staff are committed to working with you, the Applicant, to ensure that the planning, permitting and production of your special event is successful.

Our Manchester Special Events Guide is designed to provide all the information necessary to complete this application. Applicants are encouraged to consider the Manchester Economic Development Office as a resource when completing this application and while planning your special event.

Please complete and return this application by email, mail, or in person. Feel free to provide any additional information that is specific to your event. Applications may be submitted up to one year in advance. NOTE: Incomplete, illegible, and/or unsigned applications will be rejected and returned to the applicant. Return completed application and accompanying materials to:

**Manchester Economic Development Office**  
One City Hall Plaza, Manchester, NH 03101  
Phone: (603) 624-6505 Email: [econdev@manchesternh.gov](mailto:econdev@manchesternh.gov)

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**ALL PAGES OF THIS APPLICATION MUST BE SUBMITTED ALONG WITH THE APPLICATION FEE IN ORDER FOR IT TO BE DEEMED COMPLETE. FOR ADDITIONAL INFORMATION, PLEASE REFER TO THE MANCHESTER SPECIAL EVENTS GUIDE - PAGE 8.**



MANCHESTER, NH

# SPECIAL EVENT APPLICATION

## *Applicant Information*

*Today's Date:* \_\_\_\_\_ *Event Date:* \_\_\_\_\_

Name of Event: \_\_\_\_\_ Event Location: \_\_\_\_\_

Organization Name: \_\_\_\_\_  For Profit  
 Non-Profit Tax ID # \_\_\_\_\_

Event Website: \_\_\_\_\_ Organization Website: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, & Zip Code: \_\_\_\_\_

Event Contact: First \_\_\_\_\_ Last: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ E-mail: \_\_\_\_\_

*Please complete if different from above:*

Business Known As \_\_\_\_\_ Legal Name of Business \_\_\_\_\_

Street Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Business Telephone \_\_\_\_\_ Business Fax \_\_\_\_\_

Business Owner \_\_\_\_\_ Business Owner's Address \_\_\_\_\_

Business Owner's Telephone \_\_\_\_\_ Business Owner's Date of Birth \_\_\_\_\_

Building Owner \_\_\_\_\_ Building Owner Address \_\_\_\_\_

Building Owner's Telephone \_\_\_\_\_

## *Event Information & History*

Has this Event previously received an Event Permit from The City of Manchester?  Yes  No Prior Permit #: \_\_\_\_\_

Is this an Annual Event?  Yes  No Do you plan to hold this event next year?  Yes  No

If this is a repeat event, do you plan to change the location or adjust route?  Yes  No If yes, please describe these changes in the narrative portion of the application.

Type of Event:  Revenue Generating  Non-Revenue Generating Event is:  Gated/Ticketed  Open to Public  Private

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

Event Purpose: \_\_\_\_\_ Estimated Number of Attendees: \_\_\_\_\_

Event Day "On-Site" Contact: \_\_\_\_\_ Mobile: \_\_\_\_\_

If your event is open to the public, please check all advertisement methods you plan to utilize:  Print  TV  Radio  Internet  Billboards  Posters  Other

Event Set Up Date: \_\_\_\_\_ Time: \_\_\_\_\_ a.m. p.m.

Event Start Date: \_\_\_\_\_ Time: \_\_\_\_\_ a.m. p.m.

Event End Date: \_\_\_\_\_ Time: \_\_\_\_\_ a.m. p.m.

Event Break Down Date: \_\_\_\_\_ Time: \_\_\_\_\_ a.m. p.m.



# SPECIAL EVENT APPLICATION

## Classification of Event

See Manchester Special Event Guide Page 4

Please provide a brief description of your proposed event here.

Note: You are also encouraged to attach a **brief event narrative** so that all departments may best understand your event request.

Select one that most closely matches your event:

**Block Party (Site Plan Required)**

Means an organized neighborhood or public gathering on a public right-a-way (street, sidewalk, or alley) on a specified date at a specified time and place between the hours permitted by Code for a **non-commercial gathering**.

**Road Festival (Site Plan Required)**

Means an organized neighborhood or public gathering on a public right-a-way (street, sidewalk, or alley) on a specified date at a specified time and place between the hours permitted by Code for a **commercial gathering**.

**Organized Competitive Event (Site Plan and Route Map Required)**

Means any planned race, walk, or event, whether human powered or otherwise, that involves a contest of skill(s) and/or strength and takes place upon public right-of-way, park, or both.

Type of Organized Competitive Event: (choose one below)

Road Race  Walk  Other                      Is this event timed? \_\_ Yes \_\_ No

Where will your event's formal start and finish line be located?

Starting Line: \_\_\_\_\_ Finish Line: \_\_\_\_\_

**Procession/Parade/Walk (Site Plan and Route Map Required)**

Means a public march, run, cortege, walk, cavalcade, autocade, parade of any kind, other gathering of persons that occurs upon public right-of-way, park or both that is used for vehicular traffic.

Is the route        \_\_\_\_\_ Inside Downtown                      \_\_\_\_\_ Outside Downtown

**Public Assembly (Appendix A)**

Means any public gathering of persons upon right-of-way, park space, or both that does not affect vehicular traffic or require road closures

## Parks & Recreation

See Manchester Special Event Guide Page 16

### Location (if applicable)

- |  |  |   |  |
|--|--|---|--|
| <input type="checkbox"/> Arms Park         | <input type="checkbox"/> JFK Ice Arena   | <input type="checkbox"/> Piscataquog River Park | <input type="checkbox"/> Thibault Field          |
| <input type="checkbox"/> Bronstein Park    | <input type="checkbox"/> Gill Stadium    | <input type="checkbox"/> Pulaski Park           | <input type="checkbox"/> Veteran's Memorial Park |
| <input type="checkbox"/> City Hall Plaza   | <input type="checkbox"/> Kalivas Park    | <input type="checkbox"/> Sheridan-Emmett Park   | <input type="checkbox"/> Victory Park            |
| <input type="checkbox"/> Crystal Lake Park | <input type="checkbox"/> Lafayette Park  | <input type="checkbox"/> Stanton Plaza          | <input type="checkbox"/> Wagner Park             |
| <input type="checkbox"/> Derryfield Park   | <input type="checkbox"/> Livingston Park | <input type="checkbox"/> Sweeney Park           | <input type="checkbox"/> Weston Tower            |
|  |  |   | Other: _____                                     |

If "Other," please describe: \_\_\_\_\_



# SPECIAL EVENT APPLICATION

*Site Plan and Event Components*

*See Manchester Special Event Guide Page 6*

Please provide a detailed Site Plan by completing Appendix A, which can be found on Page 9 of this document. Be sure to indicate each of the following items referenced below that apply to your Special Event. For your convenience visit, <http://manchesternh.gov/Maps>

- North, indicated by a directional arrow symbols.
- The overall event area including any requested street closures, plus the location and number of meters to be reserved highlighted.
- Indicate 20 foot wide fire lane clearances in all areas and the location of all fire hydrants.
- Include electrical plans for vendors and stage(s), specifying requirements of amps and volts.
- Require use of City right-of-way? \_\_\_\_\_ Yes      \_\_\_\_\_ No  
*If "yes," please highlight the effected streets on the route map/site plan.*
- Will fundraising take place on-site? \_\_\_\_\_ Yes      \_\_\_\_\_ No  
*If "yes," please describe how and where this will be accomplished:* \_\_\_\_\_
- Will any portion of the event occur on private property? \_\_\_\_\_ Yes      \_\_\_\_\_ No  
*If "yes," please list address of property, owner's name and a letter of authorization from the private property owner.*  
 Address: \_\_\_\_\_ Property Owner: \_\_\_\_\_  Letter Attached
- Will you have any special arrangements for media access? \_\_\_\_\_ Yes      \_\_\_\_\_ No  
*If "yes," please describe locations.* \_\_\_\_\_
- Please provide your plan for participation, parking, and viewing for attendees who experience disabilities.
- Please attach a detailed performance schedule of the event and label with your event name on the attachment, if applicable
- Indicate the locations of all trash and recycling receptacles, and any temporary consolidation areas for trash and recyclables.
- Indicate the locations of all portable restrooms. For planning purposes, refer to Special Event Guide – page 14.

**\*\* Inflatables or Bounce Houses are prohibited in the parks.**

*Please include the location of the following applicable items on your site plan:*

- |   |  |  |   |
|---|--|--|---|
| <input type="checkbox"/> Alcohol (See Appendix B) | <input type="checkbox"/> Cooking               | <input type="checkbox"/> Parking Meters          | <input type="checkbox"/> Sale/Distribution/Display - Commercial Items |
| <input type="checkbox"/> Amplified Sound          | <input type="checkbox"/> Dance and Drama       | <input type="checkbox"/> Picnic Shelter          | <input type="checkbox"/> Sporting Event                               |
| <input type="checkbox"/> Band Stand               | <input type="checkbox"/> Electric or Generator | <input type="checkbox"/> Portolets               | <input type="checkbox"/> Stage  |
| <input type="checkbox"/> Bicycling                | <input type="checkbox"/> Fireworks             | <input type="checkbox"/> Public Address System   | <input type="checkbox"/> Tents  |
| <input type="checkbox"/> Bleachers                | <input type="checkbox"/> Distribution/Sales    | <input type="checkbox"/> Race (Non-timed event)  | <input type="checkbox"/> Vehicles                                     |
| <input type="checkbox"/> Boat Racing              | <input type="checkbox"/> Marching Bands        | <input type="checkbox"/> Race (Timed Event)      | <input type="checkbox"/> Walk   |
| <input type="checkbox"/> Concert/Live Music       | <input type="checkbox"/> Motorcycle Ride       | <input type="checkbox"/> Remote Parking/Shuttles | <input type="checkbox"/> Wedding or Reception                         |
|   |  |  | OTHER: _____  |

If "Other", please describe: \_\_\_\_\_



# SPECIAL EVENT APPLICATION

## *Manchester Fire Prevention Management*

*See Manchester Special Event Guide Page 10 & 11*

Will you plan to have tents for your event?     Yes     No

*Note: If you have selected "yes", please include the tent vendor information on Appendix D*

- Please also include:
- Floor plan for each tent showing what will be under tent (s)
  - Measurements of tent (s)
  - Copy of certificate of flame resistance for tent (s)

Will Fireworks/Pyrotechnics be used at this event?     Yes     No

*Note: If you have selected "yes," please contact the Fire Marshal at (603) 669-2256 for further instruction.*

## *Manchester Police Department*

*See Manchester Special Event Guide Page 9*

The City of Manchester will determine if and how many extra duty officers are needed based on a number of planning variables including: the estimated number of attendees (including staff, vendors, and volunteers), the availability of alcoholic beverages, event location, weather conditions, time of day during which the event is conducted, the need for street closures or rerouting of vehicular or pedestrian traffic, and history of the particular event.

Please be sure to be as detailed as possible in all sections of this application as the data will be used to determine the appropriate number of officers necessary to an event.

**Cancellation policy:** Cancellations must be made at **least 4.5 hours** prior to the start of the scheduled detail **Except** for weather related cancellations (outside details) which must be made **1.5** hours prior to the START time of the detail. AND you must get a confirmation from the **Detail Clerk or Officer in Charge**. Leaving voicemails or emails are **unacceptable** for cancellations.

**\*A 4 hour minimum will be billed for any cancellation that is not made within these times**

## *Private Security*

Will you hire private, non-armed, security?     Yes     No

*If you have selected "yes," please provide the Security vendor information on Appendix D*

Number of Private Security Officers you intend to hire. \_\_\_\_\_

If "yes," please provide Private Security Company and a brief reason for security.

*What made you decide to have your event in Manchester?*

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# SPECIAL EVENT APPLICATION

**Health Department**

**See Manchester Special Event Guide Page 12**

All food items served or sampled to the public must be prepared and served in a safe and sanitary manner consistent with City and State health regulations. Each individual food provider/vendor must have a valid MHD permit to participate in the event and submit an application for a **Temporary Permit**. Please note that an existing licensed food service establishment whether in Manchester or in another jurisdiction, such as a restaurant or caterer, does not allow for the operation of a temporary food establishment in the City of Manchester without prior approval. This permit is required regardless of the vendors intent to charge or receive payment for their products.

The **Temporary Food Service Establishment Application Form** must be completed and submitted to the Manchester Health Department (see Appendix C of application), with applicable fees for each proposed food vendor/sampler expected to participate in the event at least two (2) weeks or ten (10) working days prior to the event.

1. Will your food purveyors vend, sample or prepare unwrapped foods onsite (e.g. cutting, slicing, assembling, cooking)? Y/N
  - a. **Y= Temporary food service permits are required**
  - b. Please provide all proposed cooking method(s):  
(e.g. grilling, frying, smoking, boiling, etc...)
2. Will your food purveyors (vendors/samplers) limit food service to **ONLY pre-packaged non-perishable foods**? Y/N  
(e.g. chips, candy, water, soda, whole fruits, whole uncut vegetables, etc...)
  - a. Y = Temporary food service permits *not* required
3. Will your food purveyors use cooking oils onsite? Y/N
  - a. If “yes” please provide name of chosen grease/oil disposal company....

**Food/Alcoholic Beverages**

**See Manchester Special Event Guide Page 12**

*Please check all that apply*

- Yes  No - Sale or Distribution of Food                       Yes  No - Sale or Distribution of Alcoholic Beverages

*Note: If you have checked “Yes” to either item above, please contact the Manchester Health Department – (603) 624-6466*

- Any Distribution or Sale of Alcohol will require:**
- City of Manchester - DPW Approval (if event is located in a park)
  - Fire Marshal Approval
  - Chief of Police or designee
  - State of NH Temporary Liquor Permit or Liquor License
- \*Further details can be found in Special Event Guide – Page 12*



# SPECIAL EVENT APPLICATION

*(DPW) - Waste Management and Recycling*

*See Manchester Special Event Guide Page 13*

1. How many trash/recycling stations will you provide? \_\_\_\_\_
2. Indicate the type, number and volumetric size of your trash and recycling receptacles in the following table:

	Type of Receptacle	Number	Size of Receptacles* (in gallons)	Total Volume (in gallons)
<b>Trash</b>	Boxes			
	Carts			
	Dumpsters			
	Other (specify): _____			
	<b>Total</b>			
<b>Recycling</b>	Boxes			
	Carts			
	Dumpsters			
	Other (specify): _____			
	<b>Total</b>			
<b>TOTAL</b>				

3. How many people will be assigned to manage trash and recycling, including emptying of full receptacles, monitoring of temporary consolidation areas and off-haul of materials from the event area? \_\_\_\_\_
4. When and where will you ultimately dispose of trash off-site? \_\_\_\_\_
5. Who will transport the trash to its disposal location? \_\_\_\_\_
6. When and where will you ultimately take recyclables off-site? \_\_\_\_\_
7. Who will transport the recyclables to the recycling facility? \_\_\_\_\_

**Parking Division**

*See Manchester Special Event Guide Page 15*

The City of Manchester Parking Division is eager to assist you with the parking needs of your Special Event. Manchester offers many parking options for your guests, including on street parking, parking lots, and parking garage. In order to serve you best, please complete the section below relative to the parking needs of your event.

✓ Please check location (if applicable)

- Canal Lot   
  Lake Ave Lot   
  Middle Lot   
  Pearl Lot   
  Victory Garage  
 Hartnett Lot   
  Line Drive Lot   
  Myrna Lot   
  Pine Lot   
  Other: \_\_\_\_\_

If "other," please describe: \_\_\_\_\_

Are there metered parking spaces that abut your event location perimeter? If "yes" please indicate locations.

What parking arrangements have been made for the event?

(If you are using alternate parking lots for event parking, a letter of approval from the property owner must accompany this application)

Please list event participant vehicles:

(e.g. production trailers, media vehicles, vendor vehicles, volunteers)



# SPECIAL EVENT APPLICATION

## *Insurance Requirements*

*See Manchester Special Event Guide Page 7*

You are required to have liability insurance that covers your event from the beginning of set up through the event and completion of the breakdown and removal of all equipment. This insurance must name the City of Manchester as an additional insured party in any and all policies. Insurance must be evidenced by a Certificate of Liability Insurance document and submitted a minimum of thirty (30) days prior to your event set up date. Failure to provide acceptable insurance within the thirty (30) day time frame may result in cancellation of the event.

- For your convenience an example of this document can be requested from Manchester Economic Development at (603) 624-6505

## *Hold Harmless & Acknowledgement*

In consideration of the privileges that may be granted by issuance of a permit, the Applicant shall, to the fullest extent permitted by law, indemnify, defend and hold harmless the City, and all officials, agents, and employees of the City, from and against all claims which may result from allowing Applicant to utilize the public right-of-way or City owned Park. "Claim" as used in this agreement means any financial loss, claim, suit, action, damage, or expense, included but not limited to attorney's fees, attributable for bodily injury, sickness, disease or death, or injury to or destruction of tangible property including loss of use resulting there from.

The Applicant's obligation to indemnify, defend, and hold harmless includes any claim by Applicant's agents, participants, employees, representatives or any subcontractor or its employees.

By signing this application, you are stating that you understand the information in this application to be true to the best of your knowledge, and that you are agreeing to comply with City of Manchester Code of Ordinances. Should the City grant approval and a permit be issued, you agree to comply with any other requirements provided by law.

**Applicant Printed Name**

**Date**

**Applicant Authorized Signature**

## *For Office Use Only*

This application and its attachments have been sent to the following departments on: Date: \_\_\_\_\_ By: \_\_\_\_\_

The application has also been sent to FYI notification list: Date: \_\_\_\_\_ By: \_\_\_\_\_

BMA Approval: \_\_\_ MFD: \_\_\_ MPD: \_\_\_ MHD: \_\_\_ Parks: \_\_\_ DPW: \_\_\_ Clerk: \_\_\_ Parking: \_\_\_ State Liquor Comm.: \_\_\_

**FEES** MFD: \$ \_\_\_ MPD: \$ \_\_\_ MHD: \$ \_\_\_ Parks: \$ \_\_\_ DPW: \$ \_\_\_ Clerk: \$ \_\_\_ Parking: \$ \_\_\_ State Liquor Comm.: \$ \_\_\_

TOTAL EVENT FEE: \$ \_\_\_ NOTES: \_\_\_\_\_

## **FINAL APPROVAL**

BMA Approval: \_\_\_ MFD: \_\_\_ MPD: \_\_\_ MHD: \_\_\_ Parks: \_\_\_ DPW: \_\_\_ Clerk: \_\_\_ Parking: \_\_\_ State Liquor Comm.: \_\_\_ Does Event have City of Manchester requirements? circle one YES NO --- If "yes" please list



MANCHESTER, NH

# SPECIAL EVENT APPLICATION

APPENDIX A

EVENT SITE MAP

**YOUR EVENT NAME:** \_\_\_\_\_

*Please include all items referenced on page 4 of this application. We encourage you to print duplicate copies of this page as needed to ensure all components your event are clearly defined and remain easy to understand by all City of Manchester Departments.*

**TIP** - Create an easy map by using  
<http://www.manchesternh.gov/Maps>  
**OR** <https://maps.google.com/>



# SPECIAL EVENT APPLICATION

## APPENDIX B

## Alcoholic Beverage Sales (Temporary)

Refer to Special Event Guide - Page 12  
 The Local Official Signature Sheet can be found  
 for your use at:  
<http://www.nh.gov/liquor/enforcement/licensing/documents/1-023a-officials-sig-sheet.pdf>

In addition to complying with the State of New Hampshire and City of Manchester requirements, the Parks and Recreation Department has specific requirements for Temporary Alcohol Sales, including:

- Promoter/non-profit beneficiary is required to have State of NH Liquor Commission approved temporary alcohol sales two (2) weeks prior to the event date – which is able to be verified over the phone with State Liquor Commission.
- Promoter/non-profit beneficiary is required to provide double fencing/barriers around the entire area intended to host both the temporary alcohol sales points and all consumption.
- Location and number of pour stations
- Promoter/non-profit beneficiary is required to submit the barrier plan (with accurate dimensions as a drawing to the Fire Marshal who will determine the approved number and size of designated entry and exit points.
- Promoter/non-profit beneficiary is required to hire sufficient extra-duty officers and required number of fire watch officers to attach to the points of sales as well as the Fire Marshal designated entrance/exits.
- Promoter/non-profit beneficiary is required to provide not only a general liability policy naming the City of Manchester as additionally insured, but a Liquor Liability Policy in the amount of \_\_\_\_\_ providing the City the same protection.
- Promoter/non-profit beneficiary and their representatives may NOT relocate or change the nature of the area for Temporary Alcohol Sales while on site. The configuration as approved MUST remain the same on site.

**\*\*Attempts to change the approved barrier locations will result in cancellation of the alcohol sales\*\***

- Do you have a State of NH Liquor License? \_\_\_\_ Yes \_\_\_\_ No

*If you selected "Yes", please attach a most recent copy dated within the last six months.*



# SPECIAL EVENT APPLICATION

## APPENDIX C (cont.)

## Health Department Forms

### Handwashing Requirements

Manchester Health Department  
1528 Elm Street  
Manchester, NH 03101  
Tel: (603) 624-6466 / Fax: (603) 628-6004

Temporary Food Permit Requirements

**Handwashing Facilities:**  
Provide a five or ten gallon water container with a dispensing valve to leave hands free for washing; a waste-water container, dispensed soap and paper towels for handwashing within the food booth.

**Note:** Ensure water temperatures (>110°F) and water are maintained at appropriate levels throughout event.

Dispose of all water in a sanitary sewer, not a storm drain or on the ground.

**Utensil Washing Facilities:** Booths without commissary facilities require three separate containers of appropriate size for the cleaning and sanitizing of equipment and utensils. One shall contain hot soapy water, one clear clean hot rinse water, and the other an appropriate concentration of sanitizing water (Use one tablespoon of household bleach per gallon of water-check with appropriate test kit 50-200ppm).

**NOTE:** Additional facilities such as a three compartment sink with running water may be required when there is extensive food preparation, or where water, power and sewer connections are available.

### How to Properly Prepare and Use Sanitizers

**How to properly prepare and use sanitizers**

Either regular (unscented) bleach or quaternary ammonium (in liquid or tablet form) may be used to sanitize your food service equipment and preparation surfaces.

To make the bleach and water solution at the proper concentration, use the following guideline:

**Add 1 tablespoon regular bleach to 1 Gallon of water**  
(This will give you a 200 ppm chlorine solution)

Use chemical test strips to check the concentration of the solution. A bleach and water solution for sanitizing food preparation surfaces and equipment shall be in the range of 50-200 ppm chlorine.

For quaternary ammonium, either liquid or tablet form may be used. If using either the liquid or tablet form, follow the manufacturer's directions on the bottle/container in order to obtain the proper concentration. Use chemical test strips to check the concentration of the solution. The proper concentration shall be 200 ppm quaternary ammonium.

**Helpful hint:** If making a spray bottle of sanitizer, it may be easier to make a large batch of the sanitizer at the proper concentration and then fill the spray bottle, rather than try and make it in the bottle itself.

Check the concentration frequently using the test strips. The solution will need to be changed periodically, especially if it becomes dirty with food or other debris.

**How to use test strips**

- Make sure the test strip is appropriate for the type of sanitizer.
- Prepare the sanitizing solution.
- Dip a strip into the solution for at least 1 second.
- Compare the color the strip changed to with the grade on the outside of the package to determine the solution strength.

### Temporary Food Permit Requirements

Manchester Health Department  
1528 Elm Street, Suite 302  
Manchester, NH 03101  
Tel: (603) 624-6466 - Fax: (603) 628-6004

TEMPORARY FOOD PERMIT REQUIREMENTS

- KEEP POTENTIALLY HAZARDOUS FOOD ITEMS BELOW 41°F OR ABOVE 140°F SUCH AS MEAT, FISH, POULTRY, DAIRY, FROZEN FOOD ITEMS NEED TO BE STORED AT OR BELOW 0°F.
- SHIELD FOOD AND FOOD CONTACT SURFACES FROM POSSIBLE CONTAMINATION. PROVIDE OVERHEAD PROTECTION IF OUTDOORS.
- STORE FOOD ITEMS AT LEAST 18 INCHES OFF THE GROUND WHEN EVENT IS OUTDOORS OR 6 INCHES OFF THE GROUND WHEN EVENT IS INDOORS.
- PROVIDE AT LEAST TWO GARBAGE CONTAINERS WITH TIGHT FITTING COVERS.
- KEEP HANDS CLEAN. WASH HANDS AFTER USING TOILET FACILITIES, EATING OR SMOKING.
- WEAR CLEAN CLOTHING THAT INCLUDES A SHIRT OR BLOUSE WITH SLEEVES, HAIR RESTRAINTS, AND AN APRON.
- USE PLASTIC GLOVES OR DISPENSING UTENSILS WHEN PREPARING OR SERVING FOOD PRODUCTS.
- DO NOT SMOKE OR EAT IN THE FOOD PREPARATION AREA.
- FOOD ITEMS ARE NOT TO BE STORED IN DIRECT CONTACT WITH ICE.
- FOOD ITEMS NOT PREPARED ON SITE MUST BE PREPARED IN AN APPROVED LICENSED FACILITY.

These forms can be found for your use at:  
<http://www.manchesternh.gov/Departments/Health/Forms/Permits-and-Licenses>

