Thank you for choosing Manchester for your upcoming event.
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

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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.
**SPECIAL EVENT APPLICATION**

### Applicant Information

<table>
<thead>
<tr>
<th>Name of Event:</th>
<th>Event Location:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organization Name:</td>
<td>___ For Profit ___ Non-Profit Tax ID #</td>
</tr>
<tr>
<td>Event Website:</td>
<td>Organization Website:</td>
</tr>
<tr>
<td>Address:</td>
<td>City, State, &amp; Zip Code:</td>
</tr>
<tr>
<td>Event Contact:</td>
<td></td>
</tr>
<tr>
<td>Mailing Address:</td>
<td></td>
</tr>
<tr>
<td>City:</td>
<td>State:</td>
</tr>
<tr>
<td>Phone:</td>
<td>Mobile:</td>
</tr>
</tbody>
</table>

**Please complete if different from above:**

<table>
<thead>
<tr>
<th>Business Known As</th>
<th>Legal Name of Business</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Address</td>
<td>Zip Code</td>
</tr>
<tr>
<td>Business Telephone</td>
<td>Business Fax</td>
</tr>
<tr>
<td>Business Owner</td>
<td>Business Owner’s Address</td>
</tr>
<tr>
<td>Business Owner’s Telephone</td>
<td>Business Owner’s Date of Birth</td>
</tr>
<tr>
<td>Building Owner</td>
<td>Building Owner Address</td>
</tr>
<tr>
<td>Building Owner’s Telephone</td>
<td></td>
</tr>
</tbody>
</table>

### 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

<table>
<thead>
<tr>
<th>Event Set Up Date:</th>
<th>Time:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Event Start Date:</td>
<td>Time:</td>
</tr>
<tr>
<td>Event End Date:</td>
<td>Time:</td>
</tr>
<tr>
<td>Event Break Down Date:</td>
<td>Time:</td>
</tr>
</tbody>
</table>
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

Location (if applicable)

☐ Arms Park ☐ JFK Ice Arena ☐ Piscataquog River Park ☐ Thibault Field
☐ Bronstein Park ☐ Gill Stadium ☐ Pulaski Park ☐ Veteran’s Memorial Park
☐ City Hall Plaza ☐ Kallivas Park ☐ Sheridan-Emmett Park ☐ Victory Park
☐ Crystal Lake Park ☐ Lafayette Park ☐ Stanton Plaza ☐ Wagner Park
☐ Derryfield Park ☐ Livingston Park ☐ Sweeney Park ☐ Weston Tower
☐ Other: __________

If “Other,” please describe: ___________________________________________________________
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 symbol.
- 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:

- Alcohol  (See Appendix B)  ____
- Amplified Sound  ____
- Band Stand  ____
- Bicycling  ____
- Bleachers  ____
- Boat Racing  ____
- Concert/Live Music  ____
- Cooking  ____
- Dance and Drama  ____
- Electric or Generator  ____
- Fireworks  ____
- Food  ____
- Distribution/Sales  ____
- Marching Bands  ____
- Motorcycle Ride  ____
- Parking Meters  ____
- Picnic Shelter  ____
- Portalets  ____
- Public Address System  ____
- Race (Non-timed event)  ____
- Race (Timed Event)  ____
- Remote Parking/Shuttles  ____
- Sale/Distribution/Display - Commercial Items  ____
- Sporting Event  ____
- Stage  ____
- Tents  ____
- Vehicles  ____
- Walk  ____
- Wedding or Reception  ____

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?

___________________________________________________________________________________________

___________________________________________________________________________________________
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**

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

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:

<table>
<thead>
<tr>
<th>Type of Receptacle</th>
<th>Number</th>
<th>Size of Receptacles* (in gallons)</th>
<th>Total Volume (in gallons)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trash</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Boxes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dumpsters</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (specify):</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recycling</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Boxes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carts</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Dumpsters</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (specify):</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

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

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

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.: ___


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
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/
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.*
These forms can be obtained at [http://www.manchesternh.gov/health/TemporaryFoodPermitApplication.pdf](http://www.manchesternh.gov/health/TemporaryFoodPermitApplication.pdf)

Temporary Food Event Coordinator’s Application Form

Event Coordinator’s Application Form – Page 2

Temporary Food Service Establishment Application Form

Food Item List (each vendor must complete)
Handwashing Requirements

How to Properly Prepare and Use Sanitizers

Temporary Food Permit Requirements

These forms can be found for your use at:
http://www.manchesternh.gov/Departments/Health/Forms/Permits-and-Licenses
## Event Vendor Contacts

### Alcohol Sales | Perimeter Fencing Vendor

1. Name of Fence Vendor: 
2. Contact Person: First __________________ Last __________________________
3. Daytime Phone: ______________________________
4. Mobile Phone: ______________________________
5. Email: ______________________________

### Private Security Vendor

1. Private Security Vendor Name: ________________________________
2. Contact Person: First _____ __________________ Last __________________________________
3. Daytime Phone: ______________________________
4. Mobile Phone: ______________________________
5. Email: ______________________________

### Tent Vendor

1. Tent Vendor Name: ________________________________
2. Contact Person: First __________________ Last __________________________
3. Daytime Phone: ______________________________
4. Mobile Phone: ______________________________
5. Email: ______________________________

### Pyrotechnic Vendor

1. Pyrotechnic Vendor Name: ________________________________
2. Contact Person: First __________________ Last __________________________
3. Daytime Phone: ______________________________
4. Mobile Phone: ______________________________
5. Email: ______________________________