



# TOWN OF JAMESTOWN

## One Day Event/Entertainment Application

**\$5.00 Application Fee**

Date Rec'd \_\_\_\_\_  
Office will enter date

**All licenses are issued subject to the resolution of debts, taxes and appropriate signatures  
(This form can be used with or without vendors)**

*Please complete the following information:*

- Seasonal Event
- Parade
- Race:
  - Bicycle/Wheelchair
  - Run/Jog/Walk/Wheelchair
  - Marine Vessel
- Art/Craft Show
- Theatre/Film Production
- Concert
- Miscellaneous Function (please explain) \_\_\_\_\_

Name of Event: (if applicable) \_\_\_\_\_

Date of Event: \_\_\_\_\_ Hours of Event: \_\_\_\_\_

Location of Event: \_\_\_\_\_ Number of people attending: \_\_\_\_\_

Name of Applicant/ Business: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Business Phone #: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone Number: \_\_\_\_\_

List the type of entertainment being requested, if applicable (Band, DJ, etc.) \_\_\_\_\_

Who will the event benefit? \_\_\_\_\_

Type of Operation: (Private, State Sponsored, Non-Profit): \_\_\_\_\_

R.I. Show Promoter's Permit Number, per RIGL § 44-19-1, (if applicable): \_\_\_\_\_

If the applicant is a Non-Profit organization, is it registered with the State? Yes No

RI Tax ID #: \_\_\_\_\_ Non-Profit ID #: \_\_\_\_\_

Number of Vendors/Peddlers: (circle one) N/A 1-10 11-20 21-30 31-40 41-50  
(\$5.00 each Vendor/Peddler in addition to Application Fee)

*A list of vendor/peddler and fee must be submitted to the Town Clerk's Office with this license. Vendor/Peddler list Must include name, address, phone number, date of birth, type of merchandise to be sold and exact location of sales.*

What types of items will be sold at this event? \_\_\_\_\_

Will food be sold at the location? *If yes, you must contact the R.I. Department of Health* Yes No

Will alcohol be provided and/or served at this event? *If yes, Alcohol Liability Insurance must be provided* Yes No

Will traffic control or a public facility be needed? Yes No

*If yes, Please contact the Jamestown Police Department, Public Works Department and/or the Recreation Department for rates and forms for approval.*

**Note: All applicants must submit a liability insurance policy with coverage in the amount of \$1,000,000 (one million dollars) when using Town owned property. Certificate of insurance: Yes No**

If there is additional information for the Town Council that you would like to add please attach separate correspondence.

Signature of Applicant: \_\_\_\_\_

Please attend the Town Council meeting on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ for Council review.

**For Office Use Only**

License Fee: \$ \_\_\_\_\_ Ins. Policy: \_\_\_\_\_ Ft. Getty Rental Permit: \_\_\_\_\_

*For Approval: Please sign, date & provide approximate cost to Town.*

Department	Date	Approximate Cost or Comments
Town Administrator:		
Chief of Police:		
Fire Chief:		
Zoning Official:		
Director of Parks & Recreation:		
Director of Public Works:		
Water & Sewer Clerk		
Tax Collector		



This application has been **GRANTED/DENIED** by the Jamestown Town Council at a meeting held on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_ for the event scheduled for: (date) \_\_\_\_\_ (time) \_\_\_\_\_ with a location of \_\_\_\_\_.

Issued: \_\_\_\_\_

Arlene D. Petit, Town Clerk

***Please keep this license on hand for the day of the event.***