

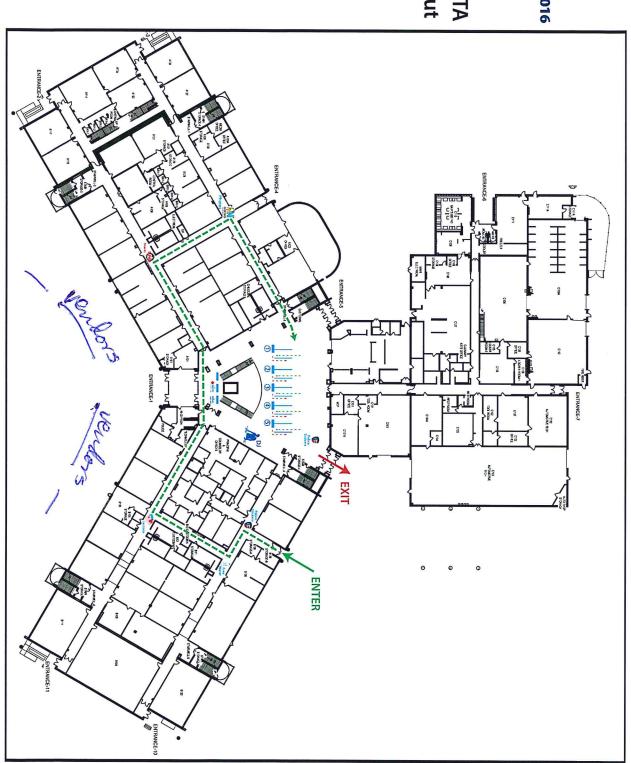
1200 East Broad Street, Mansfield, TX 76063 www.mansfieldtexas.gov Fax: 817-477-1416

**Special Event Application** 

Organization/Group: Mansfield ISD	Date: June 27, 2016
Applicant: BACK TO SCHOOL BASH - Lynn Wilkse	
Applicant's Address: 605 EAST BrOAD S	
*Will be called or emailed for more information neede	
when the permit is ready for pick-up	d and/or Email: Lynnwilkie@ misD mail
Address of Event: 1110 West Debbie Lane (The MISD Center)	
Description & Activities: (ptyr. for event) Back pack give a way, vendors, Food Trucks, Dunking booths, performances	
Date of Event: Sat., Aug. 13, 2016	Hours of Event: 8 am - 2 pm
Public Invited or Public Private Party?	Estimated Number of Attendees 5,000 - 10,000
Is the event in a Mansfield Park? \(\int\cappa_O\)	*If yes, Insurance is required
Do you plan to Temporarily Close a Public Street?	N D *If yes, Insurance is required
Is the event on Private Property other than your own?	*If yes, signed permission is required
Will there be any new or temporary electric lines installed?	
*If yes, a registered Electrician must obtain a permit. Indicate the line locations on the site plan.	
Will you be using generators?	*If yes, show location on the site plan
Do you plan to have any Tents?	*If yes, a separate permit is required.
Do you plan to have any pop-up canopies?	
Do you plan to have any Promotional Signs? (banners, streamers, balloons)	*If yes, a separate permit is required
City of Mansfield Assistance Requested:	
Barricades/ Street Closure? No	*If yes, show on site plan where you want to have barricades. A resident roster must be submitted for a block party.
Police/Traffic Control/Security? MISD Chief working with	rack IS *If yes, attach an explanation and the name
Please Read and Include the Following Information With This Application	
• For all outdoor activities, a site plan must be attached. One can be provided if requested. You need to	
show where all items will be located on the site plan.	
<ul> <li>If Insurance is required, the City of Mansfield must be listed as "Additional Insured".</li> </ul>	
All documents must be turned in at the same time. Please allow enough time for review and approval	
before the date of your event.	
Applicant's Printed Name:	Applicant's Signature:
Lynn Wilkie	Applicant's Signature:



## Ben Barber CTA Interior Layout



## CFPA EXTERIOR LAYOUT



