

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

Rockin 4th July

Special Event Application

Organization/Group: Lity of Mansfiel	d Date: 5-25-11	
Applicant: Argic Henley		
	10+ Phone No. 817.804.5795	
*Will be called or emailed for more information needed ar when the permit is ready for pick-up	Email: Coma e. hanen @ Man	
Address of Event: 500 Heritage Pkwy		
Description & Activities: LIVE MUSU, KIDS activities, food + beverage		
Date of Event: July 3, 2016	Hours of Event: $\left \frac{1}{2} \right $	
Public Invited or Private Party?	Estimated Number of Attendees /2,000	
Is the event in a Mansfield Park?	*If yes, Insurance is required	
Do you plan to Temporarily Close a Public Street?	*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? USide But 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 you a consult.	
City of Mansfield Assistance Requested:		
Barricades/ Street Closure?	*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?	*If yes, attach an explanation and the name of the person you are working with	
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. If Insurance is required, the City of Mansfield must be listed as "Additional Insured". 		
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 Finited Name:	Applicant's Signature:	
Angie Henley angie Henley		



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ockein 4th of Je Temporary Tent Application 🖇 **Tent location Address** Suite No. Tenant/Business Applicant* 817.804-5795 Phone Applicant Address E-mail *Will be called for questions and/or when the permit is ready for pick-up **Tent Company** Kental Stop Tent Company Name Contact Number Company Address SW Green Oaks **Purpose of Tent:** Special Event | Sale or Promotion | Assembly \(\Bar{\} Other 🗌 3/16 Dates Tent will be on the Property | Erected: Removed: Size and Height of Tent (in feet at tallest peak) #1 Tent Size Height in feet 10 X 20 #2 Tent Size Height in feet 20 x 20 #3 Tent Size Height in feet Please read and Include the Following Information With This Application Permit Fee \$60 1. SITE PLAN: You must include a site plan showing where the Tent(s) will be located on the property. You need to indicate the distance from any structures and the property lines. 2. FLOOR PLAN: Provide a simple floor plan for each tent showing the tables, chairs, stages, width of aisles, exits, etc. Note if the Tent sides will be Up or Down. 3. FLAME RESISTANT CERTIFICATE: You must attach a Flame Resistant Certificate for the specific tent you are renting. The Tent Company can provide this. 4. NOTE: Temporary tent sales by retail establishments or tent assemblies may be permitted for a period not to exceed thirty (30) days and no more than once a year. No tents or similar structures shall be erected in any required yard setbacks or designated easements. Applicant's Printed Name & Date Tenley Applicant's Signature Property Owner/Manager **Printed Name** Property Owner/Manager Signature *REQUIRED

AGREEMENT TO ASSIST AT SPECIAL EVENT

Special Event Name and Date: ROCKIN 4th of J	uly
Name of Group Assisting:	U
Mansfield Police	
☐ MISD Police	
☐ Constable Office	
Other	
Please check all that apply:	
We have an agreement to be <u>Traffic Officers for this Special Event</u> .	
☐ We have an agreement to be <u>Security Officers</u> for this Special Event.	
☐ Other:	
Signature	
Daniel Sherron PD.	
Printed Name/ Job Title	
Mailing Address	
Contact Phone Number	E-mail







