

SWATARA TOWNSHIP

DEPARTMENT OF CODE ENFORCEMENT
599 EISENHOWER BLVD.
HARRISBURG, PA 17111

PH# 717-564-2551 FAX# 717-564-5895

SPECIAL EVENT PERMIT APPLICATION FORM

NAME OF APPLICANT/VENDOR: _____

PRIMARY BUSINESS ADDRESS: _____

DATES OF THE EVENT _____

CONTACT NAME & PHONE # _____

TYPE OF EVENT: _____

LOCATION OF EVENT: _____

IS A TENT BEING USED? ____ IF YES, PROVIDE SPECIFICATIONS FROM SUPPLIER INCLUDING, FIRE RETARDANT MATERIAL, METHOD OF SET UP, FLOOR PLAN OF DISPLAY, EXIT SIGNAGE, FIRE EXTINGUISHERS LOCATIONS AND ALL SAFETY PRECAUTIONS.

ELECTRICAL SUPPLY: _____

REST ROOM FACILITIES: _____

ATTACH ANY ADDITIONAL INFORMATION

SIGNED: _____ DATE: _____

THE APPLICATION SHALL BE ACCOMPANIED WITH A CHECK TO SWATARA TOWNSHIP IN THE AMOUNT OF **\$100.00**.