



NEW ALBANY 2025 EVENT PERMIT APPLICATION

New Albany Community Programs
PO Box 188
99 W. Main Street
New Albany, Ohio 43054
614.939.2256 (Phone)
communityevents@newalbanyohio.org

This completed application must be received by the New Albany Community Events 60 days prior to the proposed event. If this application is tentatively approved, the event may be canceled if ALL paperwork and event coordinator responsibilities have not been completed three weeks prior to the event.

Name of Event: _____

Day/Date/Time of Event: _____

Location of Event: _____

Responsible Organization: _____

Contact Person/Relationship to Organization: _____

Address: _____

City/State: _____ Zip Code: _____

Phone: _____

Email: _____

Type of Event: Run/Walk Bike Race Parade Street Fair Other

If other, please describe: _____

Brief Event Description – including purpose, target audience and description.

Day/Dates/Time of Set up: _____
Day/Dates/Times of Tear down: _____
Day/Dates/Times of Rain Event: _____
Will you charge admission or participation fees? If so, what is the charge? _____

Estimated Attendance: Spectators: _____ Participants: _____
Prior Event Attendance: _____
Will normal operations of residents or businesses be affected by your event? _____

If yes, please attach a copy of the notification letter to be approved by the Event Logistics Committee before being sent to the affected residents/businesses.

Do you require a road closure? Yes No
If so, which road(s) _____

If the event includes a parade, race, run or walk, please describe the route and attach a proposed map. Uniform detour routes and parking will be in effect at the discretion of New Albany staff for all parades any time Market Street or another major road is to be closed. *Note: Police and Fire emergency vehicles must be afforded access to the above location at all times.

Requested Day/Date of Road Closure(s): _____
Requested Time of Road Closure(s): _____

Use of Market Square

NOTE: AT THIS TIME NO NEW EVENTS PROPOSALS ARE BEING ACCEPTED FOR ANY EVENT THAT THE PROPERTY OWNER OR THE CITY BELIEVES NEGATIVELY IMPACTS THE MARKET SQUARE AREA OR THE KESWICK COMMUNITY.

If you want to use Market Square, do you have written permission from NAI Ohio Equities, LLC and the Columbus Metropolitan Library? Yes No

Written permission (emails acceptable) must be provided to the city prior to approval of any proposed event.

Market Street Closure Requests (if applicable)

If you are requesting to close Market Street, please answer the following questions:

- Expected event attendance: _____
- Requested Day/Date of Market Street Closure: _____
- Total duration of requested Market Street closure: _____

Potential benefit(s) to immediate and surrounding businesses: _____

Other special or unique circumstances regarding Market Street closure request: _____

Traffic Control & Parking Resources:

Please describe your traffic, parking and overflow plan: _____

List specific lot locations and number of parking spaces available: _____

Will you charge a fee for parking? _____

Will you request on-street parking removal? Yes No

Will you request that any street(s) be closed? Yes No

If yes, please list the street(s), date(s) & time(s): _____

Will you require barricades? Yes No Quantity _____

Will you require traffic cones? Yes No Quantity _____

Security and First Aid

Describe your event security procedures: _____

Will you request New Albany Police safety/traffic control services? Yes No

Will there be a command post at your event? Yes No

Will you have an on-site provider of primary first aid? Yes No

If yes, will you request on-site Plain Township Fire Department or utilize another provider? PTF Other

Please list the first aid provider, if other than Plain Township Fire Department:

Contact: _____ Phone: _____

Signage

Will this event require:

Temporary No Parking signs Yes No Quantity _____

Directional Signage Yes No Quantity _____

Sandwich Boards Yes No Quantity _____

Electronic Sign Board Yes No Quantity _____

Please describe and indicate the location of all on-site directional and promotional signage to be used during and prior to your event on the Event Permit Application. Permission to post any sign on public property must be obtained prior to the display of any signs. These signs must be removed within 24 hours of the conclusion of your event. All signage must comply with current sign code regulations which can be found in Chapter 1169 of the Codified Ordinances. Section 1169.08, General Requirements: Special and Temporary Signs will be made available upon request. _____

Sanitation

Describe your sanitation plans both during and after the event: _____

Entertainment Activities

Will you have music? Yes No

Will the music be outside? Yes No

If yes, what type of music/amplification? _____

Time(s) of music during the Event: _____

Food & Beverage

Will food be sold at your event? Yes No

If yes, describe: _____

Vendor must obtain a food vendor license. If they do not have a license, please contact the appropriate County Board of Health office to secure one.

Alcohol

Will alcohol be served at your event? Yes No

If yes, please attach the Special Events Liquor Permit obtained from the State of Ohio Liquor Control Department. For further permit information, contact the State of Ohio Liquor Control Department at 614.644.3155 or www.liquorcontrol.ohio.gov.

The following sections require a permit from the Community Development Department. Please attach your CDD application if you answer YES to any of the following questions.

Electric

Will you use electricity? Yes No

Generators? Yes No

Outdoor extension cords must be 3-prong UL listed extension cords.

Describe electrical usage: _____

Temporary Structures

Will you use tents? Yes No

Will other temporary structures be used (e.g., bleachers, stages, etc.)? Yes No

If so, please list specifics and locations: _____

All temporary structures must be inspected by the Community Development Department.

New Albany Hold Harmless/Indemnity Agreement/Insurance/Indemnification/Risk Information

Event organizers shall indemnify and hold the City of New Albany, its officers, employees and elected officials harmless for any and all liability related in any way to the event which is caused by the event organization, volunteers, employees, participants and spectators. In order to protect the City of New Albany against any such loss the event organizers/sponsors permit holder or host establishment must furnish to the City of New Albany in a form acceptable to the law director a certificate of commercial general liability insurance naming the City of New Albany as an insured or additional insured with limits of liability of not less than \$1,000,000 per occurrence and \$2,000,000 aggregate coverage for all damages, including but not limited to property damage, personal injury or death. The event organizers/sponsors/permit holder shall provide a copy of such insurance policy to the City of New Albany at least twenty (20) calendar days prior to the event. If this does not occur, the organizer is subject to automatic and immediate revocation of the event permit.

A Hold Harmless-Indemnification Agreement is required and must be signed by an authorized representative of the sponsoring organization prior to approval of the event permit. The applicant will indemnify and hold harmless the City of New Albany and their agents and employees from and against all claims, damages, losses and expenses including attorney’s fees arising out of or resulting from the event.

Signature

By signing below, I certify that I have read, understand and agree to abide by all of the policies and procedures of New Albany as they pertain to the event I am organizing, including the Hold Harmless-Indemnification Agreement. I am also responsible for ensuring that the event organization, its volunteers and employees, and event participants and spectators also abide by all of the policies described in this guidebook and application.

Organization Name _____

Event Name

Date/Time of Event

Event Organizer Printed Name

Event Organizer Signature

Date