307 Hines Street West / Wilson, NC 27893



Telephone: 252.399.2891 / Fax: 252.399.2893

Application for Special Event Permit

Pro	moter/Applicant:										
	licant Address:										
Site	/Subject										
Contact Name:				Telephone:							
Contact Email:			Emergency Contact Telephone								
Event Start Date:				Event End Date:							
	nments: mit Fee	¢E0									
Per	mit ree	<mark>\$50</mark>									
	Select Event	Туре		Multiple Permits	Requi	red	☐ No				
	Festivals			Parades		Amusement I	Building		Run/Walks/Bicycle		
	Carnivals/Fairs	i		Rallies		Exhibition/Tra	ade Show		Livestock Gathering		
	Ceremonies			Sports		Religious Ce	remony		Large Outdoor Assembly		
	Circus			Food Event		Musical/Cond	certs		Other		
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Br	Brief Event Description:										
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Mul	tinle Permits: P	Please	selec	et all that apply							
Mul	tiple Permits: P	Please	selec	t all that apply							
Mul	tiple Permits: P			vorks/Pyrotechnics			☐ Spe	cial U	lse (Land Development)		
Mul			Firew		nt Eve	nt Application			lse (Land Development)		
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Updated 8/6/2023

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Wilson Fire/Rescue Services along with the City of Wilson Municipality regulate Special Events Permits within the city limits and Extra Territorial Jurisdiction (ETJ).

Permits shall be submitted 10 days prior to the event.

Special Events Checklist

Please review this checklist prior to submitting your Special Event Permit Application

ITEMS REQUIRED PRIOR TO PERMIT ISSUANCE:

- A completed and signed Application Packet submitted to Wilson Fire/Rescue Services.
- A detailed site plan including locations, streets, emergency access, and any other requested detail by the code official.
- All other additional documentation pertaining to multiple permits required for the event.
- Estimated amount of people attending the event.
- Additional fire extinguisher locations (when required).
- Event Evacuation Plans posted (when required).
- Posted No Smoking Signs or Designated Smoking Areas (when required).
- Approved Crowd Managers (when required based on NC OFSM standards).
- Provided/Required Security or Paid Law Enforcement officer (when required).
- Provided/Coordinated Incident Action Plan (when required).

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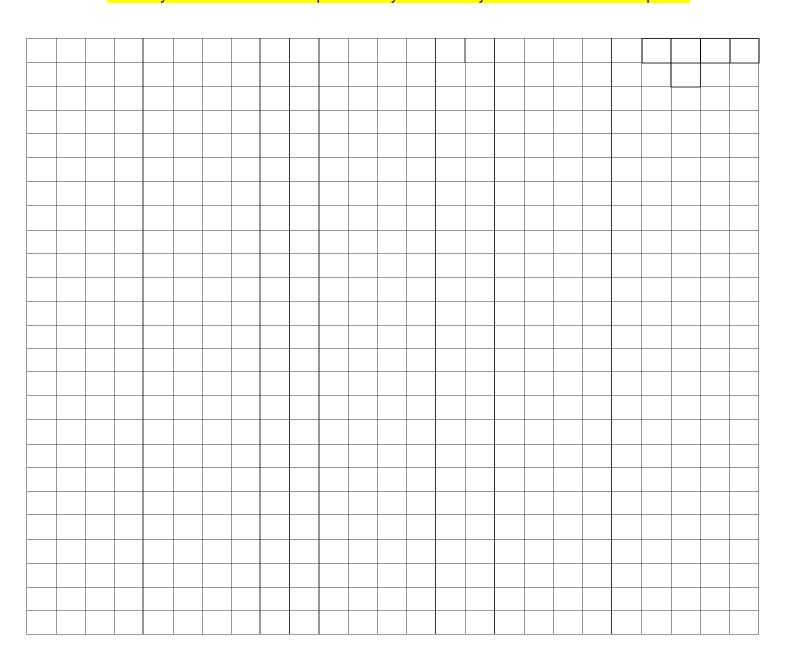


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Site Plan Submittal

Provide a basic sketch of the proposed layout of the event below with a detailed and legible site plan with a symbol legend, which adequately shows location of booths, barricades, tents, road closures, and any other equipment pertinent to the event.

You may also submit an aerial photo with your event layout drawn on the aerial photo.



Wilson Fire/Rescue Services

307 Hines Street West / Wilson, NC 27893



Albert L. Alston, Fire Chief

Telephone: 252.399.2891 / Fax: 252.399.2893

**Any additional findings, information, changes to the site, or the overall scope of the proposed event shall be reported to the fire code official immediately for approval. Not providing adequate notification to the fire code official may result in a revocation of the permit and the immediate termination of all permits on the site.

The approved Permit Application must remain on site for the duration of the event.

The property owner, applicant, promoter, or an approved, responsible, representative shall be on site and provide all appropriate contact information to the fire code official prior to scheduled date of the event.

Permit Approval

The Fire Code Official will coordinate the delivery of the permit to the applicant/permit holder once final approval has been granted to hold the event. Any failure to provide the requested information and documentation may lead to a delay in processing and issuance of a permit.

Acknowledgement and Signature

i nereby certify that I have read and examined this ap	oplication and its attachments and t	inat all of the
information contained therein is true and correct. Fu	ırthermore, I	certify that the
proposed event fully complies with the requirements	contained in the North Carolina Sta	ate Fire Prevention
Code, Wilson Fire/Rescue Service Community Risk	Reduction Division requirements, a	nd the City of Wilson
Zoning requirements. I agree to indemnify, save har employees, from all claims, damages, costs, expense out of or due to holding the proposed event.	•	. •
Applicant	Property Owner (if applicable))
Print	Print	
Signature:	Signature:	
Date:	Date:	

Mail Application, documentation and payment to:

City of Wilson Community Risk Reduction 307 Hines St W, Wilson NC 27893

OR submit in person to:

City of Wilson Fire/Rescue Services 307 Hines St W, Wilson, NC 27893.

Questions? Please contact Wilson Fire/Rescue Services Community Risk Reduction Division at (252) 399-2880.