

OFFICIAL USE ONLY	Received by:
	License No./Code:
	Date Issued:

CITY OF COLUMBUS COMMUNITY MARKET PERMIT APPLICATION

APPLICATION INSTRUCTIONS

Please answer ALL questions completely, attaching additional sheets of paper as necessary. This form **MUST** be submitted **45 days prior to the start of the market with the exception of the vendor lists**. Incomplete applications will not be processed and submitting an application does not guarantee a permit will be issued. All applications are processed in the order they were received.

Community Markets are limited to:

- Areas zoned commercial only, no residential areas will be considered
- Hours of operation must be between 8 am and 12 am
- Market boundaries must be contiguous

Please include a non-refundable deposit of **\$150 plus a \$10 application fee** payable to the Columbus City Treasurer. Other fees may apply depending on the permits needed for the Community Market.

GENERAL INFORMATION (Please Print)

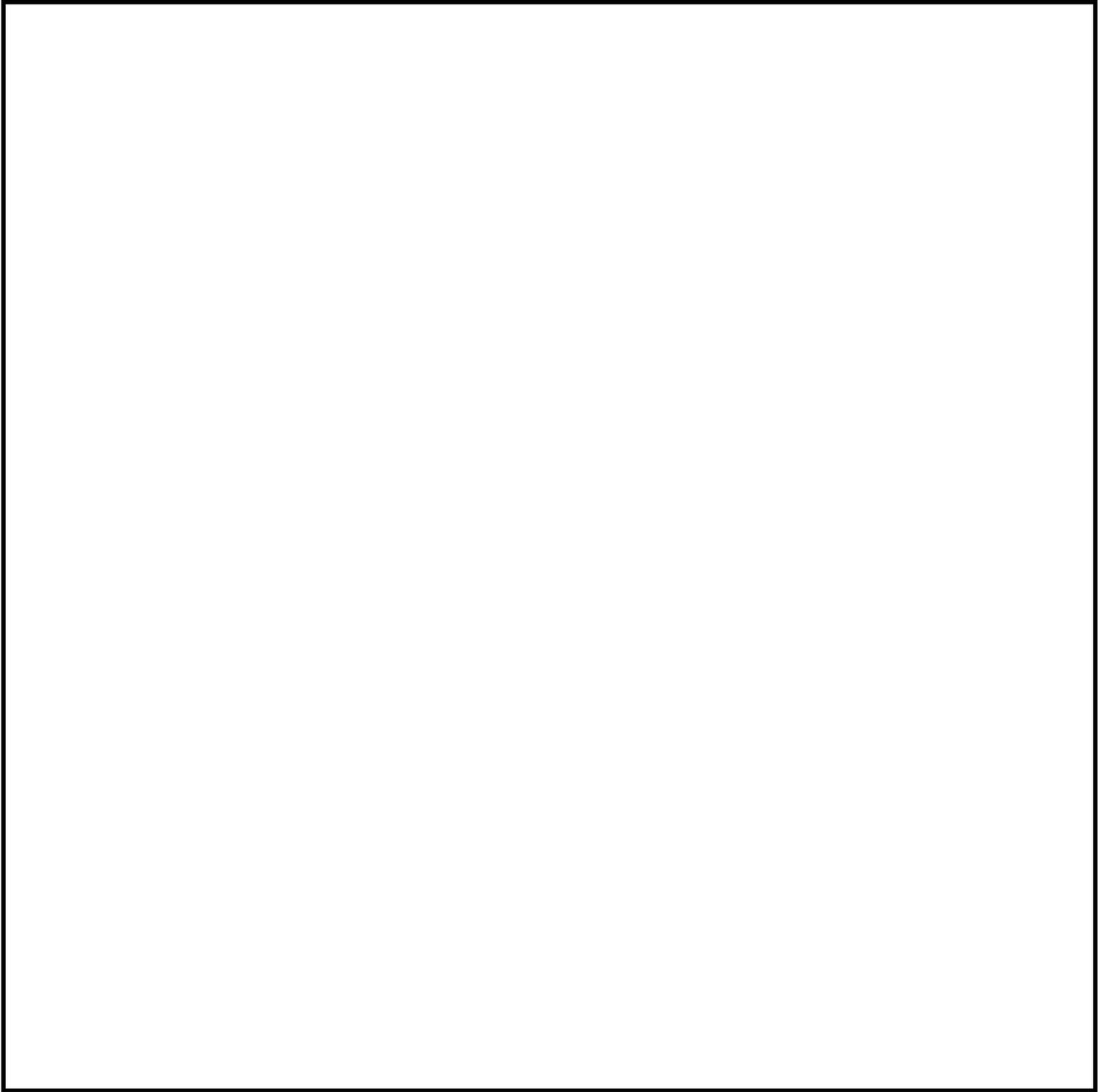
Name of Community Market		First time event? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location of Community Market			
Days of Operation	Months of Operation	Hours of Operation (Limited to 8a to 12a) to	
Describe the purpose of the community market			
Phone number/website for publication			
Name of Sponsoring Organization		Contact person from Sponsoring Organization	
Sponsoring Organization Address		City/State	Zip
Phone Number	Cell Phone Number	Fax Number	
Federal Employee ID Number or Social Security Number if not a corporation			
Name of On-Site Coordinator		Email Address	
Address		City/State	Zip
Phone Number	Cell Phone Number	Fax Number	

Will food be sold at the Market?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please submit a list of all food vendors, including their Health Food License Number. (Please use the attached form).	
Will food be cooked or prepared on-site?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, the Sponsoring Organization is responsible for making certain that all vendors have the proper license to operate.	
Will merchandise be sold at the Market?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please submit a list of all merchandise vendors, including their State Tax ID Number. (Please use the attached form) For the health, welfare and safety of the public, it is the responsibility of the Sponsoring Organization to make certain that any and all merchandise being sold is deemed appropriate by a License Officer or Police Officer.	
Are street closures required for the Market?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please complete and submit the Street Closure Permit Form with the Community Market Permit Application. Type III barricades and detour signs are required for all Community Market street closures. (Permit application is included in packet.)	Additional Fee May Apply
Will the Market require parking meters to be temporarily removed from service?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please contact the Dept. of Public Services at 645-7497 upon receipt of this application. (Permit application CC903 is included in packet.)	Additional Fee May Apply
Will the street closure be on a COTA bus route?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, applicant is required to contact COTA at 614-275-5800 prior to submitting the Community Market Permit Application. Once approved by COTA, please include a map/plan for the routing of buses.	
Will a tent larger than 200 sq. ft. be erected?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please complete and submit a Festival Tent Registration with the Community Market Permit Application. (Permit application is included in packet.)	Additional Fee May Apply
Columbus Fire Temporary Event Permit	<input type="checkbox"/>	Permit application included in packet	Additional fee may Apply

SAFETY PLAN (Please Print)

Please describe a Safety Plan that addresses emergencies specific to the market. Please make certain to include the following: evacuation plan; weather radar monitoring; communication with staff, vendors and spectators; and steps for securing tents and other potentially dangerous items. Please attach additional pages as necessary.

SITE PLAN (Please Print) Use the space below to illustrate the layout of the market. Please make sure that ALL streets and alleys are included. You may submit a map no larger than 11X17 or 1" equals 50'. It must be legible.



If applicable, the following must be included:

- | | | |
|--|--|---|
| <input type="checkbox"/> Clearly mark all streets and alleys | <input type="checkbox"/> Location of fire lane (FL) | <input type="checkbox"/> Location of bus stops (BS) |
| <input type="checkbox"/> Location of vendors (V) | <input type="checkbox"/> Location of fire hydrants (FH) | <input type="checkbox"/> Location of parking meters (PM) |
| <input type="checkbox"/> Location of tents (T) | <input type="checkbox"/> Location of garbage receptacles (G) | <input type="checkbox"/> Location of building exits (BX) |
| <input type="checkbox"/> Location of barricades (BAR) | <input type="checkbox"/> Location of recycling receptacles (R) | <input type="checkbox"/> Location of support vehicle parking (SV) |

INSURANCE

In addition to completing the application form and paying the permit fee(s), the applicant is required to submit an original Certificate of Insurance in an amount not less than one million dollars (\$1,000,000) combined single limit bodily injury and property damage for each occurrence. Your insurance certificate shall list as the Certificate Holder: City of Columbus, Treasurer, 90 W. Broad Street, Columbus, Ohio 43215.

REMOVAL OF LESSEE-PROPERTY

Applicant shall remove any of its property, facilities, fixtures, items, or improvements immediately upon termination of the event.

ACKNOWLEDGEMENT/SIGNATURE

I, the applicant, understand that I am responsible for providing all information necessary to meet the conditions and requirements of the application process. I acknowledge that by providing such information there is no guarantee that my proposed community market will be issued a permit by the City of Columbus. I further accept responsibility to hold free and harmless the City of Columbus and to meet all department deadlines including submitting proof of proper insurance, payment of all departmental fees, a detailed site map, a safety plan, a list of food and merchandise vendors, and any/all other required documentation as the application specifies. I verify that I have read and understand this application and the conditions under which my request will be considered. The risk of promoting an event before a permit is issued is the sole responsibility of the applicant.

All information contained in this application is subject to disclosure as a matter of public record. Any false statement made or given in this application shall result in denial or future revocation of this license, as well as criminal prosecution under, but not limited to, Chapter 2321.13 (A-3) (A-5), Columbus City Code.

State of Ohio, County of Franklin

(Applicant Print Name) _____, being duly sworn, deposes and says he or she is the individual making the foregoing applications; that he or she is knowledgeable with respect to that which is to be licensed; that the answers to the foregoing questions and other statements contained herein are true of his or her own knowledge and belief.

(Applicant Signature)

Sworn to before me and subscribed in my presence this _____ day of _____, 20_____.

(Notary or Agent of the Department of Public Safety)

Community Market Permit Fee is \$150 plus a \$10 application fee. Please make check or money order payable to Columbus City Treasurer. Other fees may apply depending on the permits needed for the Community Market.

For questions, please contact the License Section at (614) 645-8366

**Return completed application to:
 Department of Public Safety
 License Section
 750 Piedmont Road
 Columbus, Ohio 43224**

Applications are processed in the order that they are received.

FOR OFFICIAL USE ONLY (Do Not Write Below This Line)

Merchandise Vendor List	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Date Received:
Food Vendor List	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Received By:
Street Closure Permit	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Fees Paid:
Occupancy Permit	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Other info:
COTA Bus Route Plan	<input type="checkbox"/> No	<input type="checkbox"/> Yes	
Tent Permit	<input type="checkbox"/> No	<input type="checkbox"/> Yes	
Certificate of Insurance	<input type="checkbox"/> No	<input type="checkbox"/> Yes	
Signature Page	<input type="checkbox"/> No	<input type="checkbox"/> Yes	

