

## ***TOWN OF HACKETTSTOWN***

### ***SPECIAL EVENTS LICENSE INSTRUCTIONS & APPLICATION***

1. Submit the original and 8 copies of the application. The copies shall be distributed to the 5 department heads and the Council Printing, License and Franchise Committee.
2. Application must be submitted 60 days prior to the event.
3. If you are a nonprofit organization, and you are requesting that the fee be waived, please submit your request in writing with the application.
4. An application fee of \$50.00 made payable to 'Town of Hackettstown' must accompany the application.
5. An applicant may be required to reimburse the Town for any municipal expenses incurred during an event. If so, you may also be required to pay 50% of the estimated costs owed prior to the issuance of the license. You will also be required to sign, prior to the issuance of the permit, a reimbursement agreement agreeing to pay the balance within 10 days of your receipt of the final bill. The reimbursement agreement will be prepared and signed following the approval of the license by the Mayor and Common Council.
6. If you have any questions concerning the application, please contact the Clerk/Administrator, William W. Kuster, Jr., at (908) 852-3130.

*Fee Paid:*     \$ \_\_\_\_\_  
*Date Application Received:* \_\_\_\_\_  
*Name of Event:* \_\_\_\_\_  
*Applicant:* \_\_\_\_\_  
*Date of Event:* \_\_\_\_\_  
*Date License Approved by Mayor and Common Council:* \_\_\_\_\_  
*Date Reimbursement Agreement Signed:* \_\_\_\_\_  
*Date Initial Reimbursement Fee Paid:* \_\_\_\_\_

*License Approved:* \_\_\_\_\_  
**WILLIAM W. KUSTER, JR., CLERK/ADMINISTRATOR**

*(Above Line for Town Use Only)*

*(Submit Original and Eight Copies of Application)*

**TOWN OF HACKETTSTOWN**  
**SPECIAL EVENTS LICENSE APPLICATION**

***I. Applicant's Information***

- A. Applicant's Name:*** \_\_\_\_\_
- B. Contact Person's Name & Phone Number:*** \_\_\_\_\_  
\_\_\_\_\_
- Email Address:*** \_\_\_\_\_
- C. Applicant's Address:*** \_\_\_\_\_  
\_\_\_\_\_
- D. Applicant's Phone Number:*** \_\_\_\_\_
- E. Name and Phone Number of Emergency Contact:*** \_\_\_\_\_  
\_\_\_\_\_
- F. Name Address & Phone Number of Property Owner if different from Applicant:*** \_\_\_\_\_  
\_\_\_\_\_

***II. Event Information***

- A. Name of Event:*** \_\_\_\_\_
- B. Location of Event:*** \_\_\_\_\_
- C. Date and Hours of Event:*** \_\_\_\_\_
- D. Rain Date, if any:*** \_\_\_\_\_
- E. Zone Event Located:*** \_\_\_\_\_

***III. Event Description***

- A. Activities Planned:***  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- B. Estimated Number of Persons Attending:*** \_\_\_\_\_

**IV. Event Safety**

- A. *Describe security to be provided:* \_\_\_\_\_  
\_\_\_\_\_
- B. *Describe sanitary provisions (i.e. bathroom facilities, garbage disposal):*  
\_\_\_\_\_  
\_\_\_\_\_
- C. *Describe health, fire and rescue squad provisions:* \_\_\_\_\_  
\_\_\_\_\_
- D. *Describe location of parking, number of cars anticipated and any traffic Control needed:* \_\_\_\_\_  
\_\_\_\_\_

**V. Miscellaneous**

- A. *Provide a copy of applicants liability insurance.*
- B. *List alcohol permits or food license required:* \_\_\_\_\_  
\_\_\_\_\_
- C. *Temporary lighting proposed:* \_\_\_\_\_  
\_\_\_\_\_
- D. *Description of any open flame cooking facilities or pressurized flammable or combustible gases to be used. (Please note that such facilities require a permit from the Hackettstown Fire Department.)*  
\_\_\_\_\_  
\_\_\_\_\_
- E. *Describe any noise amplification systems or music to be present:* \_\_\_\_\_  
\_\_\_\_\_

**VI. Additional Information**

*Please provide any additional information that may assist the Town in evaluating the application. If additional space is required please attach additional sheets.* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Application Date:* \_\_\_\_\_ *Signature:* \_\_\_\_\_

*NAME OF APPLICANT:* \_\_\_\_\_

**TOWN OF HACKETTSTOWN**

**215 Stiger Street**

**Hackettstown, NJ 07840**

**SPECIAL EVENTS APPLICATION  
MUNICIPAL COMMENTS/SIGN-OFF SHEET**

---

**Applicant:** \_\_\_\_\_

**Event:** \_\_\_\_\_

---

**Department:**             *Construction Office*             *Rescue Squad*  
                                  *Police Department*             *Department of Public Works*  
                                  *Fire Department*             *Other* \_\_\_\_\_

---

**Comments:**

---

**Estimated Town Costs:** \_\_\_\_\_

**For:**

---

**Approvals**             *Recommended*             *Not Recommended*

**Signature**    **By:** \_\_\_\_\_  
                         **Title:** \_\_\_\_\_  
                         **Date:** \_\_\_\_\_

**REIMBURSEMENT AGREEMENT**

*WHEREAS, the issuance of a special events license was approved by the Mayor and Common Council of the Town of Hackettstown on \_\_\_\_\_, 20\_\_\_\_; and (date)*

*WHEREAS, the approval of the license was conditioned upon the applicant \_\_\_\_\_ paying no more (Name of Applicant) than \$\_\_\_\_\_ to the Town to reimburse the Town for municipal costs incurred by the Town during the event; and*

*IT IS THEREFORE agreed by the applicant to pay 50% of the municipal costs or \$\_\_\_\_\_ prior to the issuance of the license and to pay the balance to the Town within ten (10) days of their receipt of the bill.*

\_\_\_\_\_  
*Applicant*