

Municipally Significant Event Application Form

Please provide the following information:

Organization Name:			
Contact Person:			
Contact Information – Email:			
Organization Mailing			
Address:			
Date (s) and Time (s) (open			
and close):			
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Location of the Event:			
Estimated Daily Attendance:			
Reason(s) the organization be	elieves their e	vent should be dee	emed Municipally
Significant:			
Details of how, when and whe	re the event	will be advertised to	o the public:
Is the event an exhibition, event or function open to the general public that is being			
held within the Township of Se	elwyn?		
Yes		No	

Can the event be defined as any of the following? (Check all that apply to your event			
and explain your reasoning in detail)			
Has local, regional, national or international historical or cultural significance			
Builds awareness of diverse cultures			
Benefits the community at large			
Is the event a one-time, annual or infrequently occurring event that is open to the			
public and has a predetermined opening and closing date and time?			
Yes No			

By signing, the applicant agrees to:

- 1. Serve the public interest by upholding the By-laws and policies of the Township of Selwyn and any other applicable legislation.
- 2. Assume all responsibility for compliance with regulations regarding SOPs and with other applicable legislation, including but not limited to the rules with respect to the Fire Code, Building Code, Noise By-laws, etc.
- 3. Provide any additional details as may be requested by the circulated stakeholders of the Township of Selwyn.

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Applicant	Date	
Office Use Only		
Date of Council Meeting:		
Resolution Number:		
Approved	Not Approved	