



UPPER MACUNGIE TOWNSHIP

8330 Schantz Road, Breinigsville, PA 18031

Rcv'd Date: _____

Permit #: _____

Issue Date: _____

Application for: **SPECIAL EVENT PERMIT**

LOCATION OF EVENT: _____

(Please Print ALL Information)

Organization Name: _____

This Organization is a(n): Association Corporation Individual Other

If other, please describe: _____

CONTACT INFORMATION

Name: _____ Signature: _____

Phone: _____ Email: _____

EVENT INFORMATION

Event Name: _____

Event Date(s): _____

Event Start Time: _____ Event End Time: _____

USE OF AREA INFORMATION

Requested for: _____

List of equipment, seating, exhibitor signage: _____

No food or drink will be served or used except: _____

For Official Use ONLY – Approval Date and Initial

Zoning Official

Bureau of Fire

UMT Police

Returned To Permit Dept