

City of Houghton Event Application:

Contact Information:

Name: _____ Telephone: _____

e-mail: _____

Name of Event: _____

Type of Event (parade, fundraiser, etc) _____

Date of Event: _____

Start Time: _____ End Time: _____

Proposed Location: _____

Expected Attendance: _____

If event begins at one location and travels through town, please provide the course through town including the end location: (provide detailed map)

Please attach a brief summary of the event and any specific needs/requests.

If food or drinks will be served or sold, please list all items to be served or sold:

If food is being served or sold, do you have a permit from the Health Department? Yes No

If alcoholic beverages are being served or sold, do you have a liquor license? Yes No

Return completed form to: Jeff Jepsen
City of Houghton, P.O. Box 606, Houghton, MI 49931
e-mail: jeffj@cityofhoughton.com

CITY USE ONLY:

Council Approval	Yes	No
Pavilion Rental	Yes	No
Street Closure	Yes	No
Police Department	Yes	No
Parks Crew	Yes	No
Fire Department	Yes	No
Peddler License	Yes	No