

City of Fergus Falls Special Event Permit Application-2024

- Requests must be submitted at least three days prior to the event
- Charges are for DAILY rates
- Materials will not be rented to an out-of-town event
- Tax-exempt organizations must attach a certificate of exemption to avoid sales tax
- The city will drop off materials at one site. There will be a \$35 delivery charge unless otherwise indicated. Additional charges will be assessed if materials are dropped off or picked up in multiple locations
- You will be billed after the event is concluded

Event Name				
Event Date	Hours	AM/PM to	AM/PM	
Event Location				
Please include a highlighte	d route map if appl	icable		
Does the event require a street closure?	Yes (Type III barricades may be required) No			
Does the event require police services?	Yes (An additional fee may be assessed)No			
Contact Person				
Phone	Email			
Billing Name and Address				
By signing this form, you are taking responsibility for return all items in the same condition they were rece	-	he items you are reserving	g and agree to	
Applicant Signature		Date		

SEE BACK SIDE FOR RENTAL SCHEDULE AND FEES

Please return completed forms to: City Administrator's Office 112 W Washington Ave Fergus Falls, MN 56537

Email city.hall@fergusfallsmn.gov

City of Fergus Falls Special Event Rental Fees 2024

	<u>Price</u> Quantity Total (charges mo		arges may include tax)	
Picnic Tables Picnic tables can comfort Includes delivery within city of \$35 will be added to each	limits. Up to 5 table		\$ted in one load	l. An additional delivery charge
Bleachers Includes delivery within city	\$75.00 each		\$	
Bike Rack Includes delivery within city	\$35.00 each		\$	
Trash Containers 65-gallon Disposal fee \$30	\$5.00/day plot(up to 3 containers)	us disposal fee , \$60 (4 or mor	\$ re containers)	
Barricades				
Type I Type III	\$3.00 each \$5.00 each		\$ \$	
Up to 10 barricades can be t additional loads are required	=	d. An additiona	l delivery charg	e of \$35 will be added if
Cones	\$1.00 each		\$	
• •	ay request a waive	r of the \$35 del	ivery/pickup	ose to pickup/drop off the fee. If you are picking up or ements.
Please sign here if reques	ting a delivery fee v	vaiver		
Please indicate what date	and time you plan	to pick up the	items	
Please indicate what date	you plan to drop o	off the items		
Tax (if applicable)			\$	
Total Fee			\$	

Office Use Only: Rental Budget #101-36401 State Tax 101-22802 (6.85%) County Tax 101-22816 (.5%) City Tax (.5%) (as of Oct 1, 2023); Trash containers #609-37340, Disposal #609-37610, SWMT 609-22803 (17%)