



Town of Selma
 114 N. Raiford St.
 Selma, NC 27576
 P: 919-965-9841
 F: 919-965-4637
 www.selma-nc.com

ZONING PERMIT APPLICATION SPECIAL EVENT PERMIT

*Pursuant to the Special Event Ordinance, an outdoor event involving a parade, procession, or assembly of persons or any outdoor event consisting of 250 or more persons is not permitted without a Permit. Staff shall review the request to ensure it meets the standards set forth in the ordinance. A Permit only demonstrates compliance with the Town of Selma Special Event Ordinance and does not imply compliance with the NC Building Code, Fire Code, NCDOT, or any other applicable agencies. It is the applicant's obligation to seek the appropriate permits. **FEE: \$30.00 (CASH, CHECK, OR MONEY ORDER)***

PERMIT IS ONLY VALID AFTER BEING REVIEWED AND SIGNED BY ALL APPROPRIATE REVIEW AUTHORITIES LISTED AT THE END OF THIS FORM

SITE INFORMATION

Write "N/A" if not applicable. If unsure of the correct information, site data may be found on the Johnston County GIS website <https://mapclick6.johnstonnc.com/mapclick/MapClick4/>)

Development or Business Name: _____ Johnston County Tag #: _____

Property Address: _____

Dates of Operation: START DATE: _____ END DATE: _____

Detailed Description of Request (*Use additional sheets if needed*): _____

APPLICANT INFORMATION

Owner's Consent Form is required if applicant is not the property owner.

Applicant Name: _____

Contact Person: _____

Mailing Address: _____

Phone Number: _____ Email: _____

Property Owner (if different than applicant):

Name: _____

Mailing Address: _____

Phone Number: _____

Completed by Staff:

Date Received: _____ Amount Paid: _____ Permit #: _____

ADDITIONAL SITE INFORMATION

Hours use/event will take place, if applicable: _____

Will amplified sound devices be used (microphones, megaphones, amplifiers, etc.)? YES NO

If Yes, describe: _____

Must comply with Selma Municipal Code Chapter 13, Article IV (attached)

Will any shelters be set up or constructed specifically for the special event? YES NO

If Yes, describe and give dimensions: _____

*Fire inspection may be required for tents.

Will any additional plumbing, mechanical, or electrical fixtures be used? YES NO

If Yes, explain: _____

Will any mobile food vendors (i.e. food trucks) be used? YES NO

If Yes, # of vendors and description: _____

Will alcohol be served? YES NO

*ABC permit required

*****Include a site plan (may be drawn as a sketch or drawn onto an aerial photo) showing the location of any temporary structures (such as tents), mobile food vendors (food trucks, concession stands), parking lot/roadways to be blocked, signs, off-street parking, traffic circulation, restrooms, lighting, sound amplification devices, storage areas, crowd control devices, and any other pertinent information.*****

APPLICATION CHECKLIST

The following items must accompany a Special Event Permit application (if not applicable, check "n/a"). Incomplete applications will not be reviewed until all materials have been provided.

Item	Yes	N/A
1. Permit Review Fee (\$30.00, cash check or money order, payable to Town of Selma)	<input type="checkbox"/>	
2. Completed and signed application	<input type="checkbox"/>	
3. Owner's Consent Form <i>Required if applicant is not the property owner.</i>	<input type="checkbox"/>	<input type="checkbox"/>
4. Site Plan (may be hand-drawn) showing location of proposed temporary structures, food vendors, blocked road/parking lots, signs, and any other important features.	<input type="checkbox"/>	<input type="checkbox"/>

APPLICANT AFFIDAVIT

I, the undersigned, to hereby make application and petition to the Town Manager to approve the subject Special Event Permit. I hereby certify that all activities will be carried out in compliance with the Special Event Ordinance and understand that violations will result in a fine. I further certify that I have full legal right to request such action and that the statements or information made in any paper or plans submitted herewith are true and correct to the best of my knowledge. I understand this application, related material, and all attachments become official records of the Town of Selma and will not be returned.

Print Name

Signature of Applicant

Date

REVIEW AUTHORITIES (OFFICE USE ONLY)

Submit application to Town Manager. Staff review determined by the Town Manager.

Parks & Recreation:

Approved: _____ Not Applicable: _____ Denied: _____

Director of Parks & Recreation (or designee)

Date

Conditions & Comments: _____

Fire Department:

Approved: _____ Not Applicable: _____ Denied: _____

Fire Chief (or designee)

Date

Conditions & Comments: _____

Police Department:

Approved: _____ Not Applicable: _____ Denied: _____

Police Chief (or designee)

Date

Conditions & Comments: _____

Public Works:

Approved: _____ Not Applicable: _____ Denied: _____

Public Works Director (or designee)

Date

Conditions & Comments: _____

Electric Department:

Approved: _____ Not Applicable: _____ Denied: _____

Electric Director (or designee)

Date

Conditions & Comments: _____

HELPFUL INFORMATION & CONTACTS

TIMING: Once a complete application and payment is received by the Town Manager, efforts are made to complete the review in five (5) business days. For requests requiring multiple departments to review, the timeframe may take up to two weeks. Please take this timeframe into consideration when submitting your application.

SUBMITTAL: Please submit the application with the timeframe noted above in mind. Review will not begin until a complete application with all required information is provided, along with the fee. The fee must be cash, check, or money order (payable to the Town of Selma). Credit cards are not accepted. Application may be delivered in person or mailed to the following address:

Town of Selma
114 N. Raiford St.
Selma, NC 27576

OTHER PERMITS REQUIRED: Note that depending on the scope of the activity, multiple agencies may need to be contacted for permits. This permit only covers review by Town of Selma authorities, with the exception of a Fire Inspection, which is a separate request with the Town’s Fire Department, if required. Separate permits may be required from Johnston County Building Inspections (for example, for tents), Johnston County Environmental Health (for certain types of food service), or ABC Commission (for alcohol sales).

Department	Phone	Purpose
Town Manager	919-965-9841	Submittal of Permit, Questions about the Permit process, review of site layout
Selma Parks & Recreation	919-975-1411	To arrange for use of City Property, such as parks, gazebo, etc.
Town of Selma Police	919-965-8189	For Police assistance in traffic control, parking direction, route layout.
Selma Fire Department	919-965-2697	All tents associated with the temporary use permit shall comply with the North Carolina Fire Code.
Selma Public Works	919-965-9841	To make provisions for waste disposal.
Johnston County Building Inspections	919-989-5060	For building permits associated with temporary structures
ABC Commission (alcohol)	919- 779-0700	Permits to serve alcohol
Johnston County Environmental Health	919-989-5180	To apply for permits for sales of food



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AGENT AUTHORIZATION / OWNER'S CONSENT FORM

Pursuant to Section 17-602 of the Town of Selma Unified Development Ordinance, written authorization is required from the property owner(s) if an agent will act on their behalf. A separate form is required from each owner. All fields must be completed.

AGENT/APPLICANT INFORMATION:

_____	_____
(Name)	(Address)

	(City, State, Zip)

I hereby give CONSENT to the above referenced agent/applicant to act on my behalf, to submit applications and all required materials and documents, and to attend and represent me at all meetings and public hearings pertaining to the following processes (*list applicable requests*):

_____	_____
_____	_____

Furthermore, I hereby give consent to the party designated above to agree to all terms and conditions which may arise as part of the approval of this application.

I hereby certify that I have authority to execute this consent form as/on behalf of the property owner. I understand that any false, inaccurate or incomplete information provided by me, or my agent will result in the denial, revocation or administrative withdrawal of this application, request, approval or permits. I further agree to all terms and conditions which may be imposed as part of the approval of this application.

OWNER AUTHORIZATION:

_____	_____
(Name)	(Address)

(Owner's Signature)	(City, State, Zip)