



**MEMBERS OF COUNCIL**

*Patricia Tartaglia Passio,  
Council President  
Eleanor M. Kelly  
Robert Farrell  
Craig Laubenstein  
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**MAYOR**

*Nick Kappatos*

**CHIEF FINANCIAL OFFICER**  
*Shelley Strehle, CMFO, QPA*

**BOROUGH CLERK**  
*Beth Miller, RMC/CTC/CMR*

**Special Event/Activity Request Form and Checklist**

**MUST BE SUBMITTED TO THE BOROUGH CLERK'S OFFICE NO LESS THAN 30 DAYS PRIOR TO EVENT**

Type of Event/Activity: \_\_\_\_\_

Host Organization's Name and Address: \_\_\_\_\_

Host Organization Contact: Name \_\_\_\_\_ (H) \_\_\_\_\_ (C) \_\_\_\_\_

Location of Event/Activity: \_\_\_\_\_

Date of Event/Activity: Start \_\_\_\_\_ End: \_\_\_\_\_ Time of Event/Activity: Start \_\_\_\_\_ End: \_\_\_\_\_

Parade/Outside Activity: Start Location: \_\_\_\_\_ Finish Location: \_\_\_\_\_

Estimated Number of Participants: \_\_\_\_\_

Copy of Sate License, Certificate of Insurance, and/or Safety Inspection Certificate: (Y) \_\_\_\_\_ (N) \_\_\_\_\_ (N/A) \_\_\_\_\_  
**Certificate of Insurance naming Runnemede as additional insured is REQUIRED**

**ACTION PLAN/ DESCRIPTION OF EVENT REQUIRED (Plan May Be Attached Separately)**

**ADDITIONAL REQUIREMENTS: Some activities/ requests will require special approval (specify type and attach a copy)**

Fire Safety Permit \_\_\_\_\_

Food Handling Approval: \_\_\_\_\_

Vendor Contract/ Licensing: \_\_\_\_\_

State/ County Approvals: \_\_\_\_\_

ADDITIONAL INFORMATION (please provide any other pertinent information): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**REQUESTED SUPPLIES TO BE PROVIDED BY THE BOROUGH (Fees May Apply):**

**Check Supplies Needed:**

Cones \_\_\_\_\_ Flares \_\_\_\_\_ Barricades \_\_\_\_\_ No Parking Signs \_\_\_\_\_ Detour Signs \_\_\_\_\_ Traffic Vests \_\_\_\_\_ Tables \_\_\_\_\_ Chairs \_\_\_\_\_

Lights \_\_\_\_\_ Electrical Cords \_\_\_\_\_ Audio Equipment \_\_\_\_\_ Stage \_\_\_\_\_ Coolers \_\_\_\_\_ Charcoal BBQ \_\_\_\_\_ Gas BBQ \_\_\_\_\_ Fuel \_\_\_\_\_

Fire Extinguishers \_\_\_\_\_ Cleaning Supplies \_\_\_\_\_ Trash Cans \_\_\_\_\_ Trash Bags \_\_\_\_\_ Mops/Brooms \_\_\_\_\_ Transport Bus \_\_\_\_\_

Trash Truck \_\_\_\_\_ Street Sweeper \_\_\_\_\_

**APPLICANT SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

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**OFFICE USE ONLY**

**Notification and Authorizations:**

Police Chief: \_\_\_\_\_

Approval: \_\_\_\_\_ Disapproval: \_\_\_\_\_

Fire Chief: \_\_\_\_\_

Approval: \_\_\_\_\_ Disapproval: \_\_\_\_\_

Fire Official/ Safety Coordinator: \_\_\_\_\_

Approval: \_\_\_\_\_ Disapproval: \_\_\_\_\_

EMS Chief: \_\_\_\_\_

Approval: \_\_\_\_\_ Disapproval: \_\_\_\_\_

DPW Superintendent: \_\_\_\_\_

Approval: \_\_\_\_\_ Disapproval: \_\_\_\_\_

OEM Coordinator: \_\_\_\_\_

Approval: \_\_\_\_\_ Disapproval: \_\_\_\_\_

Public Events Director: \_\_\_\_\_

Approval: \_\_\_\_\_ Disapproval: \_\_\_\_\_

**MUNICIPAL CLERK SIGNATURE:** \_\_\_\_\_

**DATE RECEIVED:** \_\_\_\_\_