

St. Mary Municipal Corporation

Entertainment/Events Application Form

Under the Building Act 2018, The St. Mary Parish Council (Places of Amusement) Regulations 1999 and the Town & Country Planning (Control of Advertisement) Regulations, 1978

Date: Day Month	Year	2	
The Chief Executive Officer The St. Mary Municipal Corporation 13 Hodgson Street St. Mary, Jamaica	'n	Cop	
Dear Sir/Madam,	We Serve	2	
V V	SECTION A		
A1. Applicant's Name:		P	
A2. Applicant's Address:		-	
12	-	2	
A3. Applicant's Contact Info:	Cell:	Landline:	
A4. Applicant's TRN:			
A5. Applicant's Email Address:			
A6. If Applicant is a Company, li	st Directors:		
	SECTION B		
B1. Type of Amusement License:			
Annual Special Event	Other (Please spe	ecify):	
Application for Entertainment/Events in accordance with the Building Act 2018, The St. Mary Parish Council (Places of Amusement) Regulations 1999 and the Town & Country Planning (Control of Advertisement) Regulations, 1978			

B2. Type of Entertainment:			
Cinema	Dance	Club	
Open Air Dance Venue	Carnival	Skate Rink	
Festival	Amusement Arcade	Fashion	
Games	Circus	Sports	
Concert	Comedy	Sports Bar	
Exposition	Parade	Other (please specify)	
Round Robin	Party		
🗌 Fish Fry			
	CIPA,		
SECTION C			
C1 Logation of Project Activity / Front Verses			
C1. Location of Business Activity/ Event Venue:			
Street Number:	We Serve	-0	
Street Name:		60	
Plaza/Commercial District:			

Parish:

Day _____

Name of Vol. # Folio #. Valuation # Owner: C2. Where the Application is for a *Special Event License*, please state the date of the event: Month

Year_

C3. Use of Venue

Building Only Grounds Only Building and Grounds

C4. If the venue has more than one building, please identify all of the buildings to which the license applies.

N.B. Please be advised that the following documents must accompany the completed application form:

- Proof of Ownership, Lease Agreement or Authorization Letter from the owner •
- Certificate of Property Tax Payment •
- **Insurance Certificate**
- Fire Certificate

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SECTION D

D1. Maximum Capacity of Venue:

D2. Maximum Number of Patrons Expected:

D3. Parking Capacity:

Location	Organization's Name	Capacity
	STC	
N		2
ê	We Serve	0
A		2
Z		F
D5. Are there Private Secu D6. If yes, please indicate:	rity arrangements in place? Yes 🗌	No 🗌
Name of Company:		2
Total No. of Security for the	Event:	
	SECTION E	

N.B. All applicants for an **Entertainment/Event License** are hereby advised that approval is required from the **St. Mary Municipal Corporation** to display advertisements for the event being promoted/hosted at the venue for which the application is being made and for the erection of all temporary structures. Failure to obtain this approval will result in any one of the following:

- Removal of Advertisement
- Removal of the structures
- Refund/Revocation of Entertainment/Event License

E1. Examine the table below. If you will be displaying any of these items <u>at or leading up</u> to the event, please provide the requested information.

Туре	Size(s)	Qty	Total Cost
Feather Banners			
Bunting			

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Туре	Size(s)	Qty	Total Cost
Banners			
Poster/Flyer			
LED Screens			
Illuminated Signs			
Sign boards	1' x 1' – 4' x 4'		
	2' x 2'	1.	
	3' x 3'		
	4' x 4'	IPA.	
	8' x 4'	AL	
Stage(s)	20' x 24'		Ca
	16' x 8'		0
2	10' x 10'	Courses	10
0	8' x 8'	Nerve	0
4	12' x 8'		
\geq	12' x 12'		5
Trussing		2 3310.23	-
Tent(s)	20' x 20'		1-1
	10' x 20'		0
1	10' x 10'		2
Branded Tents	p /	Par la	
Booths			
Any other structure			
0.1.77.1.0			
Sub-Total for Advertisement			
Sub-Total for			
Structures Sub-Total for Places			
of Amusement License			
Inspection Cost:			
Total Cost:			

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief, and I undertake to inform you of any changes therein immediately in case any of the above information is found to be false, untrue, misleading or found to be a misrepresentation. I confirm that I may be held liable to same.

Applicant's Signature: _____

Date:

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For Official Use Only

Entertainment/Event License Fees Paid? Yes No No	If Yes, Receipt No.
Fee for Advertisements Paid? Yes No N/A	If Yes, Receipt No.
Fee for Temporary Structures Paid? Yes No	If Yes, Receipt No.
Insurance Certificate Provided?	Yes No
Fire Certificate Provided?	Yes No
Floor and Site Plan Provided?	Yes No
Certificate of Property Tax Payment Provided?	Yes No
Proof of Ownership/Authorization Provided?	Yes No
Approval Granted?	Yes No
Comments:	I ON
Name of Processing Officer: (block letters):	Signature & Date
Approved by (block letters):	Signature & Date:
Name of Cashier: (block letters):	Signature:
Date	

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