

# CLIFFORD TOWNSHIP

Susquehanna County, Pennsylvania

119 Cemetery Street  
P. O. Box 339  
Clifford, PA 18413  
Office (570)222-9364  
cliffordtownship@yahoo.com

SUPERVISORS  
Dennis Knowlton  
Barry Searle  
Chris Marcho

## OUTDOOR EVENT PERMIT APPLICATION

The undersigned hereby applies for an Outdoor Event Permit to operate within the Township of Clifford for the following:

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Trade Name: \_\_\_\_\_

Include a description of type of amusement, admission, entertainment:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Maximum number of tickets to be offered per day \_\_\_\_\_ Estimated # of attendees per day \_\_\_\_\_

Location of amusement(s): \_\_\_\_\_  
\_\_\_\_\_

What arrangements have been made for (if applicable):

Parking: \_\_\_\_\_

Sanitary: \_\_\_\_\_

Medical: \_\_\_\_\_

Security: \_\_\_\_\_

Food/Housing: \_\_\_\_\_

Period/Dates for which applied: \_\_\_\_\_ Start and End Time: \_\_\_\_\_ to \_\_\_\_\_  
(AM/PM) (AM/PM)

\_\_\_\_\_  
Signature of applicant or agent

\_\_\_\_\_  
Date

Please include a copy of your **Public Liability Insurance** with your application for review to:  
Clifford Township, P.O. Box 339, Clifford, PA 18413