Willard City Corporation

80 West 50 South Box 593



Willard, Utah 84340 (435)734-9881

EVENT PERMIT APPLICATION

Application Date	Assessor Parcel Number
Applicant	_
Name of Event	Site Address
Mailing Address	
Phone Number	Zone Designation
Email	Event date(s)
	Hours of operation
event and be accompanied by: Completed application and non- Deposit to be determined at time Site plan showing entire property Proof of insurance (must name value) Landowner/Applicant's Affidavit Location map for event and any If the event is open to the public security, fire, emergency manag	y and traffic circulation plan (must be to scale). Willard City on rider).
ambulance, electricity, etc.). Plea	ou require of the City (water, police, fire, ase note that additional charges may be
required. Other Requirements	