



KYLE POLICE DEPARTMENT

1700 Kohlers Crossing - Kyle, Texas 78640 - 512.268.0859



Mass Gathering Application

Event Name: _____

Payment Received On: _____

Mass Gathering Permit Application

To be filed at least 45 days before the mass gathering date.

***** Form must be complete in its entirety. Incomplete forms will be rejected.**

Permit Application Type? ___ Single Event ___ Event Series ___ Annual
Event

Is this event held by a non-profit organization? Y or N

If YES, what is your tax identification number: _____

Type of mass gathering? (circle) Festival Concert Circus /
Carnival

Memorial Service Wedding Church Funeral City / School /
County Event

or OTHER (**Must specify**):

Promoters Name: _____ **Email:**

Company: _____

Primary Phone: (_____) _____ - _____ Secondary Phone:
(_____) _____ - _____

Address:

—

Location of Mass Gathering:

Address:

—

Description of location (*consider attaching a diagram and/or areal map*):

Property Owner Name: _____ Phone:

Address:

—

- **MUST ATTACH:** Executed copy of agreement between the promoter and the property owner.

Event time from: _____ am/pm on ___/___/___ until _____ am/pm on ___/___/___

Expected number of attendees: _____

Maximum # of persons the promoter will allow to attend: _____

Plan to limit attendance to that number:

Performers:

Description of steps to ensure minimum health/sanitation standards:

**** Restrooms must be provided at a rate of one toilet per 50 attendees**

Number of permanent toilets on site? _____ Number of portable toilets to be provided?

How will hand washing be provided to portable toilets?

How will trash be collected and disposed of during the event?

When will the site be cleaned up after the event?

How will fresh drinking water be supplied to attendees?

How will food be provided?

Will food be served from under canopies/tents or from mobile vehicles?

If using mobile vehicles, will they be permitted to operate in Hays County, or will it be the standard traveling concession stands that usually accompany a carnival/festival?

Permanent on site restaurant? Yes ___ No ___ If yes, name:

Description of preparations made to provide adequate medical/nursing care:

Description of preparations for traffic control:

Plan for overflow parking?

Description of preparations for event security.

Amount of Officers:

Schedule for the security:

Description of preparations made to supervise minors who may attend the mass gathering:

- When application is fully completed, turn into the Records Division of the Kyle Police Department, 1700 Kohlers Crossing, Kyle, TX
- Questions?? Email D. Gooding, Executive Services Commander at dgooding@cityofkyle.com

FOR OFFICE USE ONLY:

***** Kyle Police
Department:

Approved or Denied

By:

Name: _____

Signature: _____ Date: ___/___/___

Notes:

County Health Authority:

Approved or Denied

By:

Name: _____

Signature: _____ Date: ___/___/___

Notes:

*****Kyle Fire

Department:

Approved or Denied

By:

Name: _____

Signature: _____ Date: ___/___/___

Notes:

