

Town of Danville Administration  
49 N Wayne St, Suite 120  
Danville, IN 46122  
Phone: (317) 745-4180



**SPECIAL EVENT/FOR-PROFIT PARTY**

**APPLICATION**

\*Minimum 30-Day Notice Prior to Event Date\*

**GENERAL EVENT INFORMATION**

Event Name: Danville Tri Kappa Fair on the Square

**Fees:**

\$100 Per Road - Street Closure \$25 Per Hour – Trash Cleanup (Labor)

\$200 Non-refundable - For-Profit Party

\$50 Non-refundable – Admin Fee

Event Location: Danville Town Square

Event organizer has permission of property owner to host this event on his/her property. (Letter granting permission is attached/included.)

Event Date(s): 9/6-7/25 & 9/5-6/26 Event Hours of Operation: 8am-5pm (varies by day)

Set-Up for Event: Date(s): 9/5/25 & 9/4/26 Hours: 4pm-9pm

Dismantling Event: Date(s): 9/7/25 & 9/6/26 Hours: 3pm-7pm

Alternate Date (if applicable): n/a Admission Fee (if applicable): n/a

Estimated Attendance: 2500 Private or Public Event: Public

Type of Event: (Check all that apply)

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Festival                          | <input type="checkbox"/> Parade  | <input type="checkbox"/> Car Wash for Fundraising |
| <input type="checkbox"/> Sporting Event/Run/Walk           | <input checked="" type="checkbox"/> Arts and Craft Fair                            | <input type="checkbox"/> Circus                   |
| <input type="checkbox"/> Raffle                            | <input type="checkbox"/> Concert   | <input type="checkbox"/> Grand Opening            |
| <input type="checkbox"/> Carnival/Rides                    | <input checked="" type="checkbox"/> Fundraiser/Charitable Event-                   |   |
| <input checked="" type="checkbox"/> Annual/Recurring Event | <input checked="" type="checkbox"/> Other, please describe: <u>Handmade Market</u> |   |

General Description of Event Handmade market with juried crafts. This is the main fundraiser of Tri Kappa

which we use the proceeds to support community events, grants, and scholarships throughout the year

**ORGANIZATION INFORMATION**

Sponsoring/Planning Organization: Danville Tri Kappa

Permit No. \_\_\_\_\_ (to be completed by staff)

Organization is registered with the State of Indiana as a Non-Profit Organization

Address: PO Box 254 Danville, IN 46122

Phone: 317-217-0933 Fax: \_\_\_\_\_

Web Site: www.danvilletrikappa.com

**Event Manager:** Brittany Titus and Lori Bradley

4438 Londenderry Ct Avon, IN 46123

317-217-0933 Cell Phone: 317-217-0933 or 317-550-8205

TKFaironthesquare@gmail.com

**Onsite Contact:** Brittany Titus Phone: 317-217-0933

Address: 4438 Londenderry Ct Avon, IN 46123

Cell Phone: 317-217-0933 Email: Bntitus09@gmail.com

Address:

Phone:

\*Email:



Please check all that will apply to your special event. If you are unsure, please checkmark and add any necessary notes/comments.

PROPOSED LAYOUT AND/OR ROUTE INCLUDED (**Mandatory**)

SECURITY PLANS (**Mandatory**)

TRAFFIC CONTROL/EMERGENCY EVACUATION PLANS (**Mandatory**)

STREET CLOSURES (DPW) \* Closures on Washington, Jefferson, and Marion as of 4pm on that Friday

MUSICAL ENTERTAINMENT (Bands, DJ) \* We will have a DJ

OTHER ENTERTAINMENT (Rides, inflatables, etc.) \_\_\_\_\_

MASS GATHERING (OVER 5000 PEOPLE)

TENT(S) OVER 200 SQUARE FEET

Permit No. \_\_\_\_\_

(to be completed by staff)

- FOOD VENDOR(S) \* we have roughly 3-4 food trucks/vendors
- LIQUOR- SOLD OR GIVEN AWAY \*Possible, still exploring this avenue and working with health dept
- MERCHANDISE/CRAFT VENDORS
- BANNERS (DPW)

Total Assessed Fees: \_\_\_\_\_ (to be completed by staff)

The undersigned affirms under penalty for perjury that the answers, representations and information provided in this application are true and correct. Furthermore the undersigned agrees to abide by all ordinances and law regulating the described activities.

*Brittany Titus*  
 \_\_\_\_\_  
 Signature

\_\_\_\_\_ Brittany Titus \_\_\_\_\_

12/16/2024

**Name Printed**  
 Town of Danville Administration  
 Special Event/For-Profit Party Application

**Date**



Department Approval Routing Slip

Department

Signature

Date

POLICE

Permit No. \_\_\_\_\_ (to be completed by staff)

**FIRE**

**PUBLIC WORKS**

**ADMINISTRATION**

Permit No. \_\_\_\_\_ (to be completed by staff)