



SPECIAL EVENT APPLICATION

Special Event Review Committee

Instructions:

Please fill out the attached application and all requested materials for the review of your application. An application will not be processed or a date confirmed until all materials have been submitted. Please allow 3 weeks from the date of submittal to receive final approval. Upon approval of your event, you will receive an email stating approval and the permit can be picked up from the Community Development permit desk at Keller Town Hall.

Application Checklist:

- ☐ Site Diagram (include any barricades, cones, road closures, tent placements, traffic direction, and alcohol point of sales)
- ☐ Detailed Summary of Event
- ☐ Certificate of Liability Insurance
- ☐ Park Special Use Permit (If event is occurring on city property or parkland)
- ☐ Pavilion Reservation Online (If applicable)
- ☐ If event location property is owned by someone other than the applicant, a signed memo stating that the applicant has permission to use the property must be attached.
- ☐ If event location will impact any businesses (for instance: their parking, or access to their business), a signed memo by all affected business owners stating that they approve of the event must be attached.

I have received and read a copy of the requirements that pertain to my event:

Please initial:

- _____ Special Events Policy
- _____ Food Vendor (Food tent requirements and/or mobile food unit)
- _____ Tent Membrane Structure Requirements
- _____ EMS Requirements (EMS personnel will contact you with EMS requirements if needed)
- _____ Police Requirements
- _____ Pyrotechnics Display
- _____ Carnival Rides (Carnival inspection must be scheduled with The Keller Fire Department)

Submit application to:
1100 BEAR CREEK PARKWAY (PHYSICAL)
KELLER, TX 76248

PO BOX 770 (MAILING)
KELLER, TX 76244

FAX: 817-743-4193
PHONE: 817-743-4052
EMAIL: eventpermit@cityofkeller.com



SPECIAL EVENT APPLICATION

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DATE SUBMITTED: 9/3/25

PERMIT NO. _____

EVENT – PLEASE PRINT

APPLICATION FEE: \$25 FOR PROFIT \$0 NON PROFIT

EVENT NAME: Keller Farmers Market

EVENT DATE(S): 2026 Calendar Year Attached

EVENT ADDRESS: 400 Bear Creek Parkway

SET UP DATE & TIME: 8am-Noon; 10am - 2pm

HOST/ORGANIZATION: Keller Farmers Market

EVENT OPERATIONAL TIME: 8am-Noon; 10am-2pm

CONTACT: Sheri Almond

TEAR DOWN DATE & TIME: Saturdays @ Noon; 2pm

CONTACT PHONE: 817-707-8904

ALTERNATE CONTACT: _____

CONTACT EMAIL: lovelykfm@gmail.com

ALTERNATE PHONE: _____

CONTACT ADDRESS: 733 St. Andrews, Keller, TX 76248

ALTERNATE EMAIL: _____

PROPERTY OWNER CONTACT:

NAME: _____

EMAIL: _____

PHONE: _____

ADDRESS: _____

EVENT DESCRIPTION-PLEASE PRINT

ANTICIPATED ATTENDANCE: 1,000-4,000

GENERAL DESCRIPTION: (Please include types of activities, structures, parking, rides, food, canopies, large tents, etc...)

60-100 Vendors on Saturdays from 8am to Noon who will set up on Shady Lane inside Bear Creek Park. Food Trucks, Live Music, etc.

Will you have food trucks/food vendors: YES/NO

If yes, they are required to obtain a permit through the City of Keller and through Tarrant County Public Health.
Please list the food trucks or vendors you will have at your event below.

Yes - all have proper permits.

Will you be serving alcohol? YES/NO

If yes, you are required to hire security.

No

Will you be hiring Police/Security for this event? YES/NO

No

Will you be requesting on-site EMS? YES/NO

No

Will you be displaying signs for your event? YES/NO

No

Will you have a golf cart/ ATV at your event? YES/NO Maybe at one event on 9/20 to help get elderly to bridge from parking lot

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Revised 03.16.22



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INDEMNITY CLAUSE

USER, BY EXECUTING THIS SPECIAL EVENT APPLICATION AND THE MUTUAL CONSIDERATION CONTAINED HEREIN WHICH IS ACKNOWLEDGED AND AGREED, HEREBY AGREES TO INDEMNIFY, HOLD HARMLESS, AND DEFEND THE CITY, ITS OFFICERS, AGENTS, AND EMPLOYEES FROM AND AGAINST ALL LIABILITY FOR ANY AND ALL CLAIMS, SUITS, DEMANDS, AND/OR ACTIONS FOR DAMAGES TO PERSON (INCLUDING DEATH), PROPERTY DAMAGE (INCLUDING LOSS OF USE), AND EXPENSES INCLUDING COURT COSTS AND ATTORNEY'S FEES AND OTHER REASONABLE COSTS OCCASIONED BY OR ARISING OUT OF USERS OF PUBLIC SPACES AND/OR ACTIVITIES CONDUCTED IN CONNECTION WITH OR INCIDENTAL TO THE REQUESTED PERMIT AND ARISING OUT OF OR RESULTING FROM THE INTENTIONAL ACTS OR NEGLIGENCE OF USER, ITS OFFICERS, AGENTS, EMPLOYEES OR PERSONS PARTICIPATING IN THE EVENT SPONSORED BY THE USER.

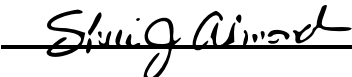
USER MUST FURTHER AGREE THAT IT SHALL, AT ALL TIMES, EXERCISE REASONABLE PRECAUTIONS ON BEHALF OF, AND BE SOLELY RESPONSIBLE FOR THE SAFETY OF ITS OFFICERS, AGENTS, EMPLOYEES, PARTICIPANTS, VISITORS AND OTHER PERSONS, AS WELL AS THEIR PROPERTY, WHILE IN OR ON THE PUBLIC SPACES OR INVOLVED IN ACTIVITIES IN CONNECTION WITH OR INCIDENTAL TO THE PERMITTED USE OF THE PUBLIC SPACES UNDER THIS PERMIT. IT IS EXPRESSEDLY UNDERSTOOD AND AGREED THAT CITY SHALL NOT BE LIABLE OR RESPONSIBLE FOR THE NEGLIGENCE OF USER, ITS AGENTS, SERVANTS, EMPLOYEES, CUSTOMERS, VISITORS, AND PARTICIPANTS.

IT WILL BE FURTHER AGREED WITH RESPECT TO THE ABOVE INDEMNITY, THAT CITY AND USER WILL PROVIDE THE OTHER WITH PROMPT AND TIMELY NOTICE OF ANY EVENT COVERED IN ANY WAY, DIRECTLY OR INDIRECTLY, CONTINGENTLY OR OTHERWISE AFFECT OR MIGHT AFFECT THE USER OR CITY, AND CITY SHALL HAVE THE RIGHT TO COMPROMISE AND DEFEND THE SAME EXTENT OF ITS OWN INTERESTS.

USER WILL FURTHER AGREE THAT THIS INDEMNITY PROVISION SHALL BE CONSIDERED AS AN ADDITIONAL REMEDY FOR CITY AND NOT AS AN EXCLUSIVE REMEDY. I HAVE READ AND UNDERSTAND THE SPECIAL EVENTS POLICY AND AGREE TO TERMS OF SAID POLICY.

Applicant Name: Sheri J. Almond

Property Owner Name: _____

Applicant Signature: 

Property Owner Signature: _____

Date: 9/3/25

Date: _____

DO NOT WRITE BELOW LINE

Reviewer Signature: _____ Date: _____

☐ Sent for Review ☐ Due Date ☐ Approved ☐ Denied

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