

SECTION I - CONTACT INFORMATION

Host Organization

Organization Name: _____

Type of Organization: Corporation Individual Non-Profit

Mailing Address: _____
(Street Address) (City) (State) (Zip)

Physical Address: _____
(If different) (Street Address) (City) (State) (Zip)

Primary Phone Number: (_____) _____ Fax Number: (_____) _____

Website Address: http://_____

Event Organizer

Name & Title: _____

Mailing Address: _____
(Street Address) (City) (State) (Zip)

Primary Phone Number: (_____) _____ Cell Phone Number: (_____) _____

Fax Number: (_____) _____ E-Mail address: _____

Secondary Organizer

It is recommended that Event Organizer supply contact information for a Secondary Organizer.

Name & Title: _____

Mailing Address: _____
(Street Address) (City) (State) (Zip)

Primary Phone Number: (_____) _____ Cell Phone Number: (_____) _____

Fax Number: (_____) _____ E-Mail address: _____

On-Site Contact

Contact information for the person who will be on-site and will be the primary contact on the day of the event.

Name & Title: _____

Mailing Address: _____
(Street Address) (City) (State) (Zip)

Primary Phone Number: (_____) _____ Cell Phone Number: (_____) _____

Fax Number: (_____) _____ E-Mail address: _____

SECTION III – STREET CLOSURE(S)

Street Closure(s)

Closure Start Date: _____
(Day of Week) (Date)

Closure Start Time: _____AM/PM

Closure End Date: _____
(Day of Week) (Date)

Closure End Time: _____AM/PM

If your event requires multi-day street closures, please complete the following information for each separate date. Space is provided for five (5) additional entries. If your event requires street closures longer than five (5) days, please attach an additional sheet of paper with the requested information.

Additional Day One:

Closure Start Date: _____

Closure Start Time: _____AM/PM

Closure End Date: _____

Closure End Time: _____AM/PM

Additional Day Two:

Closure Start Date: _____

Closure Start Time: _____AM/PM

Closure End Date: _____

Closure End Time: _____AM/PM

Additional Day Three:

Closure Start Date: _____

Closure Start Time: _____AM/PM

Closure End Date: _____

Closure End Time: _____AM/PM

Additional Day Four:

Closure Start Date: _____

Closure Start Time: _____AM/PM

Closure End Date: _____

Closure End Time: _____AM/PM

Additional Day Five:

Closure Start Date: _____

Closure Start Time: _____AM/PM

Closure End Date: _____

Closure End Time: _____AM/PM

Barricade Equipment

Will organization require City barricade equipment?

Yes

No

If not, please indicate how Organization will control traffic:

- Host Organization will rent barricade equipment from a private company. Host Organization will set-up and tear-down barricade equipment.
- Host Organization will rent barricade equipment from a private company. Private Company will set-up and tear-down barricade equipment.

If your event is a multi-day event, please complete the following information for each separate date. Space is provided for five (5) additional entries. If your event is longer than five (5) days, please attach an additional sheet of paper with the requested information.

Additional Day One:

Event Set-Up Date: _____ Event Set-Up Time: _____ to _____
Event Start Date: _____ Event Start Time: _____ AM/PM
Event End Date: _____ Event End Time: _____ AM/PM
Event Tear-Down Date: _____ Event Tear-Down Time: _____ to _____

Additional Day Two:

Event Set-Up Date: _____ Event Set-Up Time: _____ to _____
Event Start Date: _____ Event Start Time: _____ AM/PM
Event End Date: _____ Event End Time: _____ AM/PM
Event Tear-Down Date: _____ Event Tear-Down Time: _____ to _____

Additional Day Three:

Event Set-Up Date: _____ Event Set-Up Time: _____ to _____
Event Start Date: _____ Event Start Time: _____ AM/PM
Event End Date: _____ Event End Time: _____ AM/PM
Event Tear-Down Date: _____ Event Tear-Down Time: _____ to _____

Additional Day Four:

Event Set-Up Date: _____ Event Set-Up Time: _____ to _____
Event Start Date: _____ Event Start Time: _____ AM/PM
Event End Date: _____ Event End Time: _____ AM/PM
Event Tear-Down Date: _____ Event Tear-Down Time: _____ to _____

Additional Day Five:

Event Set-Up Date: _____ Event Set-Up Time: _____ to _____
Event Start Date: _____ Event Start Time: _____ AM/PM
Event End Date: _____ Event End Time: _____ AM/PM
Event Tear-Down Date: _____ Event Tear-Down Time: _____ to _____

If renting from or hiring a private company, please provide the following information.

Company Name: _____

Contact Name: _____

Mailing Address: _____
(Street Address) (City) (State) (Zip)

Physical Address: _____
(If different) (Street Address) (City) (State) (Zip)

Primary Contact Number: (_____) _____ Sec. Contact Number: (_____) _____

Traffic Plan

The City requires a detailed Traffic Plan to be submitted if street closures are anticipated.

Applicants should prepare this plan in consultation with the Chief of Police.

Please keep in mind that streets must be closed from intersection to intersection; streets cannot be closed mid-block. Event Organizer is responsible for posting Temporary "No Parking" Signs 72 hours prior to the event and meeting other requirements that may be imposed by the Chief of Police.

Please list the streets, from intersection to intersection, which will be closed for your event. Space is provided for up to three (3) entries. If you need more space please attach an additional sheet of paper with the requested information. Your Site Plan/Map must show all streets and closures.

1) Street Name: _____

From (cross street): _____

To (cross street): _____

Type of Closure: Street Closure Sidewalk Closure

2) Street Name: _____

From (cross street): _____

To (cross street): _____

Type of Closure: Street Closure Sidewalk Closure

3) Street Name: _____

From (cross street): _____

To (cross street): _____

Type of Closure: Street Closure Sidewalk Closure

INDEMNIFICATION AGREEMENT

Host Organization and/or Event Organizer agree, in consideration of the granting of this Application and Special Event Permit for:

_____ to be held on _____
Event Name Event Date(s)

by _____ of _____
Event Organizer/Primary Applicant Host Organization

Host Organization and/or Event Organizer(s) agree to defend, indemnify and hold harmless the City of Sutter Creek, and the City's employees, officers, managers, agents, council members, and volunteers harmless from any and all losses, damages, claims for damage, liability, lawsuits, judgment expense and cost(s) arising from any injury or death to any person or damage to any property including all reasonable costs for investigation and defense thereof (including, but not limited to, attorney fees, costs and expert fees) arising out of or attributed to the issuance of Applicant's Special Event Permit regardless of where the injury, death or damage may occur, unless such injury, death or damage is caused by the sole negligence or willful misconduct of the City.

Host Organization and/or Event Organizer agree to provide satisfactory evidence of, and shall thereafter maintain during the specified special event, such insurance policies and coverages in the types, limits, forms and ratings required by the City's Risk Manager or City Attorney or their designee.



Print Name Title

Signature Date

APPLICANT AGREEMENT

Please read each statement. Initialing next to each statement indicates your understanding and agreement to the statement.

_____ Host Organization and/or Event Organizer agrees, upon request, to provide a Liability Insurance Certificate providing evidence of general liability insurance coverage in the minimum amount of \$1,000,000 combined single limit AND an additional insured endorsement naming the City of Sutter Creek, its officers, employees and agents' as additional insured. This document must be submitted no later than fifteen (15) days prior to the event start date.

_____ Host Organization and/or Event Organizer agrees, upon request, to submit a Security Plan setting forth the proposed security measures to be taken to protect the health, safety and welfare of the participants, spectators, bystanders and passersby. This plan may be reviewed by the Police Department who may require alterations to the plan. Security measures may include but are not limited to the hiring of a private security or City Police Officers at the expense of the Event Organizer.

_____ Host Organization and/or Event Organizer agrees, upon request, to provide a copy of their Determination Letter, as issued by the Internal Revenue Service of the United States, if the application is made on behalf of any organization representing itself as a tax-exempt, non-profit and/or charitable organization.

_____ Host Organization and/or Event Organizer agree, upon request, to pay a refundable Cleaning Deposit no later than ten (10) days prior to the event as a condition of the issuance of the Special Event Permit. Applicant also agrees to pay any clean-up costs, in excess of the deposit, incurred by the City as a result of additional clean-up required to return the event location and surrounding area to its previous condition.

_____ Host Organization and/or Event Organizer agrees to post Temporary "No Parking" Signs on streets involved in closures for the event as required by the Sutter Creek Police Department.

_____ Host Organization and/or Event Organizer agree to work with City on placement of signs and/or barricades and to situate them in such a position that the road closure may be maintained in a safe and orderly manner.

_____ Host Organization and/or Event Organizer agree that any false statement or material misrepresentation made in support of this application and permit is cause for denial of issuance of a Special Event Permit. Applicant also agrees that failure to adhere to the policies and procedures established by the City of Sutter Creek ordinance number ~~XXXX~~³⁴¹, known as the "Special Events Ordinance", or any conditions or restrictions imposed upon the permit by the Sutter Creek Police Department or the City Manager's Office is cause for revocation of the Special Event Permit. Applicant further agrees that the Special Event Permit may be revoked at any time by the Chief of Police or City Manager.

By signing below, Host Organization and/or Event Organizer indicate understanding and agreement to the above statements.

Print Name

Title

Signature

Date