



LACEY PARKS
CULTURE & RECREATION

PUT US ON YOUR **PLAYLIST!**

**PARK RENTAL & SPECIAL EVENT
APPLICATION/PERMIT NO.:** _____

Return to: City of Lacey
Parks, Culture and Recreation Department
420 College St SE
Lacey, WA 98503-1238

Phone: (360) 491-0857
Website: www.cityoflacey.org

This application must be completed, signed and forwarded to the City of Lacey at least thirty (30) days prior to the first day of the event. All events shall meet Fire, Life Safety and Occupancy requirements. Any misrepresentation in this application or deviation from the final agreed upon route and/or method of operation described herein, may result in the immediate revocation of the permit, even during the event. Please type or print information clearly and attach additional sheets as necessary.

DATE SUBMITTED: _____ (complete shaded area below and submit up to 15 months prior to event to reserve your date).

Event Name: _____

Event Date(s): _____ Day(s) of the Week: _____ Time: _____

Event Location: _____

Facilities to be used (check): Park Street Sidewalk Other _____

Set-Up Date/Time: Begin: _____ Date: _____ Time: _____ a.m./p.m.

Take-Down Date/Time: Dismantle: _____ Date: _____ Time: _____ a.m./p.m.

Alcoholic Beverage Area Date/Time: Date: _____ Time: _____ a.m./p.m. to: _____ a.m./p.m.

Purpose of Event: _____

Event Crowd Size: Participants _____ Spectators _____ Volunteers/Personnel _____

Has the event been produced previously? No Yes If yes, what were the dates of the event? _____

Is this an event involving political or religious activity intended primarily for the communication or expression of ideas? Yes No

APPLICANT INFORMATION (Complete remainder of application and submit at least 30 days prior to event.)

Organization Name: _____

Mailing Address: _____

Applicant's Name: _____ **Title:** _____

Telephone Number: Home: _____ Work: _____
Cellular: _____ Email: _____

Contact Person: _____

Telephone Number: Home: _____ Work: _____
Cellular: _____ Email: _____

Emergency Contact: _____

Telephone Number: Home: _____ Work: _____
Cellular: _____ Email: _____

FEES AND PROCEEDSAdmission Fee: No Yes If yes, how much? _____Any Vending Sales: No Yes If yes, check all that apply: Food Beverage T-Shirts/Hats Buttons Balloons Other: (please specify): _____**SPECIAL SET-UPS REQUESTED**Check appropriate category below and fill in details or numbers, size and type. **Leave blank, if not applicable.**

Alcohol: (complete Alcoholic Beverage Area section of Application on page 6)	Will alcohol be served or available? <input type="checkbox"/> Yes <input type="checkbox"/> No	Will alcohol be sold? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, by whom? <input type="checkbox"/> Applicant <input type="checkbox"/> Vendor
Amplified Sound: Noise Variance:	Noise Variance required for amplified sound after 10 p.m.	Basis for request and hours of variance:
Animals: <input type="checkbox"/> Yes <input type="checkbox"/> No	How many?	Species:
Booths/Vendors: <input type="checkbox"/> Yes <input type="checkbox"/> No	How many booths? How many vendors?	Where:
Signage: <input type="checkbox"/> Yes <input type="checkbox"/> No	How many?	Size?
Electricity Source: <input type="checkbox"/> Yes <input type="checkbox"/> No	Generators:	How many? Size:
Fireworks/Fire Performance: <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Ground <input type="checkbox"/> Aerial <input type="checkbox"/> N/A	Pyrotechnic Company:
Portable Restrooms: <input type="checkbox"/> Yes <input type="checkbox"/> No	How many?	Handicapped Accessible: <input type="checkbox"/> Yes <input type="checkbox"/> No
Rides: <input type="checkbox"/> Yes <input type="checkbox"/> No	How many?	Type:
Staging/Scaffolding: <input type="checkbox"/> Yes <input type="checkbox"/> No	How many?	Height:
Tents/Canopies: <input type="checkbox"/> Yes <input type="checkbox"/> No	How many?	Size:
Vehicles: <input type="checkbox"/> Yes <input type="checkbox"/> No	How many?	Size and Gross Weight

SOLID WASTE COLLECTION INFORMATIONHave you contacted Waste Management concerning garbage collection? Yes No

Please describe your arrangements: _____

Are you providing recycling containers: Yes No If you are selling food and/or beverage State Law requires that recycling containers be provided.

If Yes, please describe:

PUBLIC SAFETY (IF APPLICABLE)

Attach a clear/legible site and route map, with the following indicated:

- North, indicated by directional arrow (↑)
- Names of surrounding streets, with one-way streets marked
- Number and placement of barricades, traffic control, signs, etc.
- Location of the Alcoholic Beverage Area
- Any other details you think are helpful

If your event has a 5K or 10K run, indicate which starting point and route is requested:

- Huntamer Park and Chehalis Western Trail (5K or 10K)
- Horizon Elementary and Chehalis Western Trail (5K or 10K)
- Rainier Vista Community Park and Chehalis Western Trail (5K or 10K)
- Meridian Campus and the William Ives Trail (5K maximum)
- Regional Athletic Complex Trail and ‘cross country’ (5K maximum)

What are your plans for on-site security/monitors/route control?	What are your plans for medical assistance?

Discuss your parking plans for volunteers, participants and spectators.	List any additional information about your event that would be helpful in determining if a permit should be issued.

Police officers may be required at signalized intersections. Flaggers may be required at non-signalized intersections. Monitors may be required at driveway entrances and other pedestrian and vehicle access points. *Please attach map/sketch.*

TRAFFIC CONTROL PLAN (IF APPLICABLE)		
TRAFFIC CONTROL (List monitor, flagger, or police officer)	Location	Duties

SECURITY AND DAMAGE DEPOSIT/BOND INFORMATION

Applicant shall provide a deposit or bond (in the form of an irrevocable letter of credit, certified or cashier's check made payable to the City of Lacey, or cash) to cover the costs of restoration, rehabilitation and cleanup of the area, public safety and police law enforcement coverage, and any other extraneous costs resulting from the special event. The City of Lacey Public Works Department will determine the appropriate amount, but in any event, the minimum amount of deposit or bond will be five hundred dollars (\$500) per day for the duration of the event. Bond costs may increase, depending on the size and scope of the event. The bond must be furnished to the City of Lacey at least fourteen (14) days in advance of the opening date of the event.

Applicant may request a walk-through of the event site no later than a week prior to the event to allow time for any corrections that may or may not be needed. If applicant declines to do a walk-through they are accepting the event site "as is".

All monies received will be deposited within three business days of receipt. A damage assessment will be made immediately following the close of the event. Accounting of charges incurred as a result of the event will be completed by the City within one business day following the close of the event. Any costs accruing to the City will be itemized and deducted from the deposit or bond. A check for the balance remaining will be returned to the applicant, or if necessary, a bill for collection for costs exceeding the bond amount will be issued to the applicant. In the case of an irrevocable letter of credit, accountable charges will be billed within thirty days, and a release issued. Also at this time, an itemized accounting of charges will be sent to the applicant. Applicant may request an estimate of charges for public safety and law enforcement coverage prior to the event.

Cleanup: The Applicant shall be responsible for maintenance of the Property during the event period. The Applicant shall remove all trash and debris accumulated during the event period from the Property and shall return the Property to the City in the same condition as received. If the Property is not returned in the same condition, Applicant agrees to pay actual costs of cleanup.

INSURANCE REQUIREMENTS AND LIABILITY

The City of Lacey does not maintain insurance that will respond to claims against the applicant arising out of the use of facilities by the applicant, its members, or those attending the event. Evidence of insurance must be provided no less than 45 days prior to the event. "City of Lacey" at 420 College St SE, Lacey, WA 98503 must be named as an **additional insured** on the policy. Surplus line policies must be issued and stamped in the State of Washington. Minimum Limits as applicable: \$2,000,000 per occurrence, \$3,000,000 general aggregate Commercial General Liability, Liquor Liability, \$1,000,000 Auto Liability. Coverage must be written on an occurrence form by an "A" rated company licensed to conduct business in the State of Washington. Coverage must include liquor liability – including alcohol sales and serving. All limits and coverage may be adjusted to meet exposure as determined by City Risk Manager. The coverage shall contain a provision that the City shall receive in writing, at least 30 days' notice of cancellation of the insurance policy. Special Event Permit will **not** be issued until insurance has been approved.

Indemnification and Hold Harmless: The Applicant shall defend, indemnify and hold harmless the City of Lacey, its agents, employees, volunteers and officials, while acting within the scope of their duties, from all causes of action, demands and claims, including the cost of their defense, arising in favor of the applicant/organization, the applicant's/organization's employees or third parties on account of personal injuries, bodily injuries, death, or damage to property arising out of the acts or omissions of the applicant/organization, its employees or representatives, concessionaires of the event or any other person or entity, except for liability caused due to the sole negligence of the City of Lacey.

Personal Property: All personal property placed at the Property by the Applicant shall be at the risk of the Applicant and the City shall not be liable for any loss or damage to the Applicant's personal property located thereon for any reason whatsoever. The Applicant agrees and understands that the City does not and shall not carry liability, theft or fire insurance on said property to cover the Applicant interest therein.

Survival of Terms: The hold harmless and indemnifications provided in this Agreement shall survive termination of the event.

Release: The Applicant shall additionally hold harmless and release the City Manager or designee from any claims for damages, including but not limited to economic, consequential or other monetary damages suffered by the Applicant, in the event that the City Manager or designee revokes the Permit or otherwise stops the event due to the Applicant's violations of any conditions of the Permit, applicable laws or City regulations.

ALCOHOLIC BEVERAGE AREA

FEE: \$250 PER DAY

FACILITY:

- Huntamer Park Woodland Creek Community Park
- Regional Athletic Complex The Depot

Refer to 'CITY OF LACEY ALCOHOLIC BEVERAGE AREA SALES AND CONSUMPTION POLICIES AND PROCEDURE'

Alcoholic Beverage to be served and/or Sold: Beer Wine Cider

Hours of Operation of Alcohol Beverage Area: _____
(The hours of operation of the Alcoholic Beverage Area may not be longer than 10:00 a.m. – 10:00 p.m.)

Alcoholic Beverage Area Size: _____ Estimated Capacity: _____

Type of Barrier: 6 foot Chain link 42 inch wood picket 42 inch Orange/white Mesh
Type of security and control to be provided: (describe) _____

Who will be serving and dispensing the alcoholic beverage? _____

Describe the training and experience of the servers. _____

- Attach verification of completion of Washington State Liquor Control Board Training.

Type of container the alcoholic beverage will be served in? _____

For what charitable or public purpose will the proceeds from the sale be used?

- Attach a copy of the Washington State Liquor Control Board Special Occasion Permit

The applicant and/or party represents and warrants that all necessary approvals for this agreement have been obtained, and the persons whose signatures appear below have the authority necessary to execute this agreement on behalf of the party/organization indicated.

The applicant agrees to comply with all federal, state and local laws, rules and regulations with respect to the conduct and operations on the premises.

Any misrepresentation in this application or deviation from the final agreed upon method of operation described herein may result in the immediate revocation of the permit.

Applicant's Name (Printed) _____
Date

Applicant's Name (Signed)

(FOR OFFICIAL USE ONLY)

APPROVED BY: _____ Community Development Dept. (Building Official/Fire Marshal)
_____ Public Works Dept.
_____ Parks & Recreation Dept.
_____ Police Dept.
_____ Public Affairs Dept.
_____ Risk Manager
_____ Legal Dept.
_____ Finance Dept.
_____ Other

PERMIT DENIED FOR THE FOLLOWING REASONS:

RECOMMENDED APPROVAL WITH THE FOLLOWING CONDITIONS:

	FEE	INITIAL	DATE	RECEIPT #
Application Fee:	_____	_____	_____	
Damage Deposit:	_____	_____	_____	
Additional Costs:	_____	_____	_____	
TOTAL PAID:	_____	_____	_____	
TOTAL REFUNDED:	_____	_____	_____	
PROOF OF INSURANCE? YES / NO				
BOND REQUIRED? YES / NO				
Amount: \$	_____			