

**CITY OF GRANDVIEW  
SPECIAL EVENT PERMIT**

**APPLICATION INFORMATION:**

Please check the event type:

- |  |  |
|--|--|
| <input type="checkbox"/> <b>Athletic Event</b> | <input type="checkbox"/> <b>Marina Event</b> |
| <input type="checkbox"/> <b>Noise Permit</b>   | <input type="checkbox"/> <b>Park Event</b>   |
| <input type="checkbox"/> <b>Car Show</b>       | <input type="checkbox"/> <b>Parade</b>       |
| <input type="checkbox"/> <b>Other</b> _____    |  |

Name of Applicant/Organization: \_\_\_\_\_

Person in Charge: \_\_\_\_\_ Address: \_\_\_\_\_

Phone Number: Daytime: \_\_\_\_\_ Work: \_\_\_\_\_ Email: \_\_\_\_\_

Additional Authorized Individuals: \_\_\_\_\_

Phone Number: Daytime: \_\_\_\_\_ Work: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Phone Number: Daytime: \_\_\_\_\_ Work: \_\_\_\_\_ Email: \_\_\_\_\_

Type of Activity Planned (describe event): \_\_\_\_\_

\_\_\_\_\_

Is this an event involving political or religious activity intended primarily for the communication or expression of ideas? (Please circle) YES NO

Will participants pay a fee or make a donation? (Please circle) YES NO

Will City services be requested for:

- |  |  |
|--|--|
| <input type="checkbox"/> <b>Street Closure</b>     | <input type="checkbox"/> <b>Sidewalk Closure</b>     |
| <input type="checkbox"/> <b>Security</b>           | <input type="checkbox"/> <b>Equipment</b>            |
| <input type="checkbox"/> <b>Garbage Collection</b> | <input type="checkbox"/> <b>Parking Restrictions</b> |
| <input type="checkbox"/> <b>EMS</b>                | <input type="checkbox"/> <b>Other</b> _____ -        |

\_\_\_\_\_

Date(s) of Proposed Event: \_\_\_\_\_

Hours of Operation: \_\_\_\_\_

Set-up Date/Time: \_\_\_\_\_

Dismantling Date/Time: \_\_\_\_\_

Number of Staff/Volunteers: \_\_\_\_\_

Estimated Number of Participants: \_\_\_\_\_

LOCATION/STREET(S) TO BE USED (describe area to be used, attach map/route plan):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Special Considerations – (Additional permits and/or licenses may be required) - Will there be:**

Amplified sound? (Please circle) YES NO

Alcohol? (Please circle) YES NO

Animals? (Please circle) YES NO number \_\_\_\_\_ species \_\_\_\_\_

Booths/Commercial Vendors: (Please circle) YES NO

Cooking/Food Service: (Please circle) YES NO

Fire/Fireworks/Pyrotechnics: (Please circle) YES NO

Inflatables or Amusement Rides: (Please circle) YES NO

Mechanical Rides: (Please circle) YES NO

Portable Restrooms: (Please circle) YES NO How many ? \_\_\_\_\_ Some restrooms must meet ADA requirements.

Dumpsters: (Please circle) YES NO How many and where? \_\_\_\_\_

Signs: (Please circle) YES NO

Stage: (Please circle) YES NO

Other special considerations: \_\_\_\_\_  
\_\_\_\_\_

List any special signs/barricades/cones requested to be supplied by City.

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ATTACH COPY OF SAFETY PLAN

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**Public Relations:** Please state what efforts, if any, have occurred, or you intend to make, to notify residents or businesses that will likely be affected by your event. Please attach any letters of support. If permit is granted it will be the responsibility of event organizers to alert those likely to be impacted. (i.e. street closures, no parking zones, noise, etc.)

\_\_\_\_\_  
\_\_\_\_\_

ATTACH COPIES OF BROCHURES, POSTERS, FLYERS, OR MAILINGS ADVERTISING THIS EVENT

INSURANCE – The City 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. Depending on the type of event you are planning, and the activity and risk level of your group, you may be required to obtain liability insurance in accordance with City policy, name the City as an **additional insured** on the policy, and be responsible for providing proof of such insurance. After reviewing this application, the City will determine whether you must obtain liability insurance.

HOLD HARMLESS –Applicant/Permittee/User shall defend, indemnify and hold harmless the City, its officers, officials, employees and volunteers from and against any and all claims, suits, actions, or liabilities for injury or death of any person, or for loss or damage to property, which arises out of the acts or omissions of the Applicant/Permittee/User, its employees, volunteers, representatives or vendors, or from any activity, work or thing done, permitted, or suffered by Applicant/Permittee/User, related to the permitted activity, except only such injury or damage as shall have been occasioned by the sole negligence of the City.

Date: \_\_\_\_\_  
Signature of Applicant: \_\_\_\_\_  
Organization/Title: \_\_\_\_\_

(FOR OFFICIAL USE ONLY)

APPROVED BY:    \_\_\_\_\_ Parks & Recreation Dept.    \_\_\_\_\_ Police Dept.  
                          \_\_\_\_\_ Planning Dept.                            \_\_\_\_\_ Public Works Dept.  
                          \_\_\_\_\_ Fire Dept.    \_\_\_\_\_ Mayor/Designee

PERMIT DETAINED/DENIED FOR THE FOLLOWING REASONS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RECOMMENDED APPROVAL WITH THE FOLLOWING CONDITIONS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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