



SPECIAL EVENT APPLICATION

Return to: Planning Department
Sequim Special Events
152 West Cedar Street
Sequim, Washington 98382

Phone: (360) 683-4908
Fax: (360) 681-0552
Website: www.ci.sequim.wa.us

This application must be completed, signed and forwarded to the City of Planning Department at least ninety (90) days prior to the first day of the event. **All events shall meet Fire, Life Safety and Occupancy requirements. Occupancy for Carrie Blake Park (Guy Cole Center) is Max. Occupancy 335 people. James Center for the Performing Arts is Max. Occupancy 1,200 people. All applications shall set forth a plan to assure compliance with these limits.** 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. Application fee of \$175.00, non-refundable.

EVENT

Event Name: _____

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

Event Location: _____

Facilities to be used (check): Park Street Sidewalk Private Property

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

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

Purpose of Event: _____

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

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

Any change from previous events? No Yes If yes, please list changes on a separate sheet.

APPLICANT INFORMATION

Organization Name: _____

Mailing Address _____

Applicant's Name: _____

Title: _____

Telephone(s) Home: _____ Work: _____

Pager: _____ Cellular: _____

Fax: _____ Email: _____

Contact Person: _____

Telephone(s) Home: _____ Work: _____

Pager: _____ Cellular: _____

Fax: _____ Email: _____

Contact Person During Event: _____

Telephone(s) Home: _____ Work: _____

Pager: _____ Cellular: _____

EVENT NAME:

EXEMPTION REQUEST

Are you requesting exemption from the event bonding, Letter of Credit? No Yes If Yes, state the reason for the exemption (Use additional sheets, if necessary. This exemption can only be approved by Sequim City Council and/or Sequim City Manager):

FEES AND PROCEEDS

Admission Fee: No Yes If yes, how much? _____
 Any Vending Sales: No Yes If yes, check all that apply: Food Beverage T-Shirts/Hats Buttons Books
 Balloons Other: (please specify): _____

ENTERTAINMENT AND PROMOTIONS

Sound System: Acoustic Amplified
 Describe entertainment: _____

 List of entertainers or bands performing at event: _____

 Check type of promotion you plan to use to attract participants:
 Television Radio Newspaper Flyers Billboards Posters Other (please specify): _____
 Have local neighborhood groups/businesses approved your event concept? Yes No
 If no, what steps will be taken to notify them of your event? _____
 List community contacts and phone numbers (for verification) or attach an approval letter.
 Name: _____ Phone: _____
 Name: _____ Phone: _____

SPECIAL SET-UPS REQUESTED

Check appropriate category below and fill in details or numbers, size and type. Leave blank, if not applicable.

Alcohol:	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?
Amplified Sound: Noise Variance:	Noise Variance required for amplified sound after 10 p.m.	Basis for request and hours of variance:
Animals:	How many?	Species:
Booths/Vendors:	How many booths? How many vendors?	Where:
Signage:	How many?	Size?
Electricity Source:	Generators:	How many? Size:
Fireworks/Fire Performance:	<input type="checkbox"/> Ground <input type="checkbox"/> Aerial <input type="checkbox"/> N/A	Pyrotechnic Company:
Portable Restrooms:	How many?	Handicapped Accessible: <input type="checkbox"/> Yes <input type="checkbox"/> No
Rides:	How many?	Type:
Staging/Scaffolding:	How many?	Height:
Tents/Canopies:	How many?	Size:
Vehicles:	How many?	Size and Gross Weight

INSURANCE AND BONDING INFORMATION

Permittee shall provide a bond (in the form of an irrevocable letter of credit, certified or cashier's check made payable to the City of Sequim, or cash) to cover the costs of restoration, rehabilitation and cleanup of the area, public safety and police law enforcement coverage, and any other unbudgeted costs resulting from the special event. The City of Sequim Public Works Department will determine the appropriate bond amount, but in any event, the minimum amount of this 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 Sequim at least fifteen (15) days in advance of the opening date of the event. 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 24 hours following the close of the event. Any costs accruing to the City will be itemized and deducted from the bond. A check for the balance remaining will be returned to the permittee/sponsor, or if necessary, a bill for collection for costs exceeding the bond amount will be issued to the permittee. 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 permittee.

Evidence of insurance must be provided no less than 15 days prior to the event. "City of Sequim" at 152 West Cedar Street, Sequim, WA, 98382 must be named "additional insured" to all coverage on form CG2026 or its equivalent: Notation on certificate will not be accepted. Surplus line policies must be issued and stamped in the State of Washington. Minimum Limits as applicable: \$1,000,000 Commercial General Liability, Liquor Liability, \$1,000,000 Garage Keepers Legal Liability, \$500,000 Auto Liability. All limits and coverage may be adjusted to meet exposure as determined by City Risk Manager. Special Event Permit will *not* be issued until insurance has been approved.

City of Sequim
152 W. Cedar Street
Sequim WA 98382

Office: (360) 683-4139
Fax: (360) 681-3448

EVENT NAME:

SOLID WASTE COLLECTION INFORMATION

Contact made with Waste Management concerning garbage collection? Yes No

Please describe your arrangements: _____

Are you providing recycling containers: Yes No

If Yes, please describe: _____

TRAFFIC CONTROL PLAN

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 (List monitor, flagger or police officer)	Location	Duties

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.

Print Applicant's Name

Today's Date

Applicant's Signature