



City of Sumner Special Event Permit Application

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Date of Application:

EVENT:	NAME/TITLE OF EVENT:	
	DATE(S) REQUESTED:	
	DAY(S) REQUESTED:	
	LOCATION: <i>Describe specific location, include a drawing/detailed map to include area used, entry and exits (if enclosed), parking, structure locations, bleachers, canopies, fences, displays concessions, etc. Additional attachments?</i>	
	DESCRIPTION OF EVENT: (in detail) Additional attachments?	
	Admission/Registration Fee?	If Yes, amount: \$
	Set up to start at: <i>(date & time)</i>	
	Event Start Time:	
	Event End Time:	
	Cleanup Completed: <i>(date & time)</i>	
	Person in Charge: <i>(day of event)</i>	
	Home/Office Phone:	
	Cell Phone:	
	Est. Daily Attendance:	
	Est. Total Attendance:	

EVENT NAME/TITLE	REQUESTED DATE(S)
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APPLICANT:	ORGANIZATION:	
	PHONE:	
	CONTACT PERSON:	
	EMAIL:	
	MAILING ADDRESS:	
	Non-Profit Org?	If Yes, ID No.

ATTACH MAP OF CITY AREA(S) IMPACTED BY EVENT: *(See supplement B)*

BANNER:	STREET BANNER?	Yes:	No:
	Size: _____ feet wide X _____ feet high <i>Max. 24ft wide x 3ft high</i>		
	Does Banner meet City Policy requirements? Wind load relief flaps eighteen (18) inches wide and ten (10) inches high spaced at a density of one flap for each (10) sq ft of surface area and placed uniformly. Shall be made of number 12 duck canvas, vinyl coated nylon or polyester fiber mesh with vinyl coating. Message may be sewn in place, be painted on or be of vinyl letters. Snaps, pins or other fasteners shall not be used to secure messages to banner. Banners shall have nylon strips sewn to the top and bottom of the banner along its entire length/shall have grommets installed on 24" centers along the top and bottom of the banner. "D" or "O" rings shall be provided at each of the upper and lower corners for securing banner in position.	Yes:	No:
	Does Banner promote community event relating to Tourism or downtown promotion?		
	Requested Banner hanging dates:		
	From:	To:	
	Banner must be delivered to Public works. Banner must be picked up within 5 days of notification. The city will not make changes or repairs and assumes no responsibility to store or maintain the banner.		

ATTACH DRAWING OF BANNER WITH MEASUREMENTS:

Your Application must also include:

1. A plan or design for any structures or facilities proposed for use along with the location of the street right-of-way and any furniture (lights, signs, benches, trees, etc.) that may be affected.
2. Proof of liability insurance *(must be received at least 10 days prior to event)*
3. A plan to control traffic, parking, noise or any other impact caused by this event.
4. Parade Supplemental Application (If applicable)
5. Event Impact Notification Schedule (if applicable)

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EVENT ELEMENTS: Indicate with Y/N in the left column, whether your event will include any of the following elements

Y/N	TYPE OF ACTIVITY	CITY DEPT	Y/N	TYPE OF ACTIVITY	CITY DEPT
	Alcohol __beer __wine __spirits/mixed drink	8,10		Food/beverage prep Service/vendors	5,8,13
	Special lighting	1,9,13		Live Animals	1,8,10,13
	Amplified music/sound	1,8,9,10,13		Shuttle buses/mass trans	8,11
	Barbecue/open flame	5,13		Retail Sales Booths	1,4
	Car Show	5,8,13		Trade/craft show	1,4,8,13
	Carnival (attach detailed desc)	All		Tents/canopies (attach details)	5
	Circus (attach detailed desc)	All		Private Security	8
	Live performance/concert (attach details)	4,8,10,13		Casino games/bingo/ Drawing/lottery	4,8
	Public dance	8		Race; type:_____	8,10
	Use of venue dumpsters/ trash receptacles	13,15		Scaffolding/temporary Structures (e.g. stages)	1,5,8,10,13
	Dunk tank	10,13		Solicitation of funds	4,8
	Electrical generators	1,9,10		Media coverage	12
	Exclusive use of city parking lot (attach details)	1,2,8		Parade on City Streets/ In public right-of-way	All
	Fireworks, pyrotechnicks/ lasers/rockets, etdc.	5,8		Posting of sign/promo Banners/etc.	1,7,9
	Portable Restrooms	13		Fencing	5,8,13
	Vehicles driven/parked in parks	5,8,13		Other_____	
	Inflatables (jumps, etc.)	10,13		Other_____	

CITY SERVICES REQUESTED/REQUIRED:

Note: Fees may be charged for city services.

Indicate with Y/N in the left column, whether you require/request any of the following city services.

Y/N	TYPE OF SERVICE	CITY DEPT	Y/N	TYPE OF SERVICE	CITY DEPT
	Electrical hookup to city venue power sources	9		Use of City park/recreation field/shelter/building	6,8,13
	Add'l trash services/receptables	13,15		Street Sweeping	5,8,15
	Traffic Control by Police (required for any street closure)	3,8,11		Crowd control/ Security by Police	3,5,8,10,11
	First Aid on site	5		Special park maintenance	13
	Request power junction boxes #__	9		Request water hookup	9

DEPT. KEY

1 Building	5 Fire Dept	9 PW Operations	13 PW Park OPS/Maintenance
2 Community Dev	6 Recreation	10 Risk Management	14 PW Street Maintenance
3 Transit	7 Planning	11 Traffic Engineering	15 Recycling/Conservation
4 Finance	8 Police Dept	12 Office of Communications	16 Other_____

Applicant declares all information submitted on this application is true and accurate. Applicant will immediately notify the Community Development Permit Center of any additions or changes that arise after application is submitted. Changes could result in denial or revocation of permit. On behalf of the above organization(s) and all members thereof, applicant agrees to abide by all policies, procedures and instructions set forth or provided by the City of Sumner, its staff, officers and designated agents; and will also comply with all relevant local, state and federal regulations.

Applicant's Signature

Date

RETURN COMPLETED SPECIAL EVENT APPLICATION FORM, plus any additional attachments & information to: City of Sumner, Community Development, Permit Center, 1104 Maple Street, Sumner, WA 98390 (253)299-5530
Forms must be submitted at least 45 days prior to event start date. Incomplete forms will not be processed.

EVENT NAME/TITLE		REQUESTED DATE(S)	
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GROUP/ORGANIZATION
Waiver and Release of Liability

ORGANIZATION/GROUP NAME	
EVENT NAME	
EVENT DATE	
<p>ON BEHALF OF THE ABOVE ORGANIZATION/GROUP, I expressly WAIVE, RELEASE and DISCHARGE the City of Sumner, its officers, agents, and employees or any other person from any and all LIABILITY or any death, disability, personal injury, property damage, property theft or actions, including any alleged or actual negligent act or omissions, regardless of whether such an act or omission is active or passive which may accrue to myself or members of my organization/group or our heirs in connection with our participation in the above-described event. I fully understand and acknowledge that the CITY OF SUMNER is relying on my representation that I have authorization to sign this document and that I will provide all members of my group a completed copy of this Waiver prior to our participation.</p> <p>I expressly INDEMNIFY AND HOLD HARMLESS the City of Sumner, its elected and appointed officers, agents and employees from any and all liabilities or claims made by me or my organization/group, my/our heirs and any other individuals or entities as a result of any my/our actions in connection with my/our participation in this event except for those claims arising from the sole negligence or sole willful conduct of the City, its officers, employees, volunteers or other representatives. Such indemnification includes liability settlements, damage awards, costs and attorney fees associated with any such claims.</p> <p>I hereby certify that I have read this document, understand its content, and am authorized to sign this document on behalf of all members of the group I represent.</p>	
DATE	
SIGNATURE	X
NAME	
TITLE	
ADDRESS	

EVENT NAME/TITLE		REQUESTED DATE(S)	
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PARADE SUPPLEMENTAL APPLICATION

ORGANIZATION REQUESTING PARADE:			
DAY & DATE OF PARADE:			
PARADE START TIME:			
PARADE START PLACE:			
STAGING – WHERE & WHEN:			
PARADE TERMINATION POINT:			
DISBAND – WHERE & WHEN:			
PARADE ROUTE:			
APPROX. LENGTH OF PARADE <i>(in blocks)</i>			
WILL HORSES OR OTHER ANIMALS BE IN PARADE?		Yes	No
IF ANIMALS IN PARADE, WHAT SPECIES & HOW MANY?			
REQUEST POLICE OR FIRE DEPT PARTICIPATION IN PARADE?		Yes	No
PERSON RESPONSIBLE FOR PARADE:			
PHONE:			
ADDRESS:			
SIGNATURE	X		
POLICE DEPT. APPROVAL	X	DATE:	
FIRE DEPT. APPROVAL	X	DATE:	
PERMIT DEPT. APPROVAL	X	DATE:	

EVENT NAME/TITLE		REQUESTED DATE(S)	
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EVENT IMPACT NOTIFICATION SCHEDULE

IMPACT AREA(S):	
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NOTIFICATION GIVEN TO:

NAME:		DATE:	

CITY DEPARTMENT REVIEW

POLICE DEPT.	X	DATE:	
FIRE DEPT.	X	DATE:	
PUBLIC WORKS	X	DATE:	
PERMIT DEPT.	X	DATE:	