

CITY OF ASHLAND

20 East Main Street
Ashland OR 97520
Office: (541) 488-5587 ~ FAX (541) 488-6006
Web: www.ashland.or.us

OFFICE USE ONLY:	
New event: <input type="checkbox"/>	Return event: <input type="checkbox"/>
Route change: <input type="checkbox"/>	
Date Received	
On time: <input type="checkbox"/>	Late: <input type="checkbox"/>
Previous Fees Paid: <input type="checkbox"/>	

Street and Sidewalk Use (Special Event) Permit Application

(Submit at least 90 days prior to first advertising date)

Fill out completely and type or print legibly. Failure to do so could result in permit denial.

APPLICANT AND SPONSORING ORGANIZATION INFORMATION (PERSON / GROUP RESPONSIBLE)			
Sponsoring Organization Name:			
Organization type: <input type="checkbox"/> For-profit <input type="checkbox"/> Nonprofit Tax Exempt Number:			
Organization Street Address:		City, State, ZIP Code:	
Organization Phone:		Organization FAX:	
Primary Contact from Sponsoring Organization:			
Contact Phone: (office)		(cell)	Email:
Name of contact person "on site" day of the event:			(cell – required)
Event coordinated through an event promotion company? <input type="checkbox"/> Yes <input type="checkbox"/> No Name of Company:			
Contact Name:		Phone:	Email:
EVENT INFORMATION			
Event Type (check all that apply): <input type="checkbox"/> Run - Distance <input type="checkbox"/> Walk <input type="checkbox"/> Bike Race <input type="checkbox"/> Parade <input type="checkbox"/> Fair <input type="checkbox"/> Party <input type="checkbox"/> Filming			
<input type="checkbox"/> Demonstration ("First Amendment" Event) <input type="checkbox"/> Other (Please specify briefly here)			
Street location: <input type="checkbox"/> Sidewalk Only <input type="checkbox"/> Street Only <input type="checkbox"/> Street and Sidewalk <input type="checkbox"/> Street, Sidewalk and Park			
City Location(s) (check all that apply): <input type="checkbox"/> Downtown <input type="checkbox"/> Lithia Park <input type="checkbox"/> Plaza <input type="checkbox"/> N Main St <input type="checkbox"/> Siskiyou Bv <input type="checkbox"/> Ashland St <input type="checkbox"/> Outer Park <input type="checkbox"/> Other:			
Event Name			
Requested Event Date(s)		Alternative Event Date(s)	
Event Hours		Start:	End:
Set-up	Location:	Date:	Time:
Break-down	Location:	Date:	Time:
Are participants (including floats, vehicles and bands) charged an entry fee?		<input type="checkbox"/> Yes <input type="checkbox"/> No	Admission Cost and/or Entry Fee(s):
Is this an annual event?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If annual, has the route changed from the previous year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Medical Aid: <input type="checkbox"/> 911 Response <input type="checkbox"/> On Standby - Name and phone number of medical aid: (911 Emergency response and transport services are provided by Jackson Co Ambulance Services Area)			
Attendance:	Participants:	Spectators:	Total:
Basis on which attendance estimate is made:			
Previous year's total attendance – if applicable:			
OVERALL EVENT DESCRIPTION			
Briefly explain event and event details (attach additional sheets if needed):			

STREET CLOSURE INFORMATION		
(REQUIRED: A legible and detailed map that includes the start point, end point, direction of travel, and street names)		
Names of streets to be closed (attach further closures on a separate sheet if needed)		
	Between	And
	Between	And
	Between	And
	Between	And
	Between	And
Route description (i.e., held on sidewalk and/or street, changes to route, where and how you wish to travel)		
The City prefers to reopen streets as soon as tail end of event is in the Plaza area (if applicable). Are you requesting a complete street closure? Why?		
Time of Street Closure	Start:	End:
Participant type and number of entries of each type (check all that apply): <input type="checkbox"/> Participants/Spectators _____ <input type="checkbox"/> Animals _____ <input type="checkbox"/> Vehicles _____ <input type="checkbox"/> Floats _____ <input type="checkbox"/> Bands _____ <input type="checkbox"/> Bikes _____		
If you have vehicles, animals, floats, fire-related entries and/or bands, please provide details about these entries:		
Parking restrictions requested:		
Will your proposed route use N. Main, E. Main (Plaza – 3 rd), Lithia Way, (3 rd to N. Main), Siskiyou Blvd (Walker to I-5), Ashland St (RR Overpass to I-5)? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, this is ODOT's jurisdiction. For ODOT permits contact Cathaleen Harshman with ODOT at 541-774-6360 or cathy.harshman@odot.state.or.us . (To avoid revocation of permit, copy of permit MUST be received by staff two weeks before event.)		
Will your proposed route affect the bus route? <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, contact RVTD at 541-779-2877)		
Will you agree to alter your route if ODOT and the Public Works Department determine the proposed route will require significant city services and/or severely limit transit opportunities in high-volume areas? <input type="checkbox"/> Yes <input type="checkbox"/> No		
EVENT DETAILS		
Does your event involve the sale of alcoholic beverages? <input type="checkbox"/> Yes <input type="checkbox"/> No (Oregon Liquor Control: 541-776-6191) http://www.oregon.gov/OLCC/license_information.shtml#How_to_Get_a_Liquor_License . If yes, will this activity occur on (or spill into) city streets? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please describe:		
Will items or services be sold at your event? <input type="checkbox"/> Yes <input type="checkbox"/> No (If food is being served contact Jackson County Health Dept: 541-774-8206 or http://www.co.jackson.or.us/page.asp?navid=712) If yes, will this activity occur on (or spill into) city streets? <input type="checkbox"/> Yes <input type="checkbox"/> No Please describe:		
Will cooking facilities be used? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, contact Ashland Fire Marshal at 541-552-2229)		
Will you have booths? <input type="checkbox"/> Yes <input type="checkbox"/> No	How many:	
Will the event have amplified sound? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, fill out separate "Noise Permit Application")		
Is this a fundraising event? If yes, please describe:		

Do you have a recycling plan for your event? Yes No Please describe your recycling and clean-up plans for this event:

SAFETY/SECURITY/VOLUNTEERS

Please describe your procedures for crowd control and internal security:

If fences/barriers will be used, include site plan.

Are you expecting City Police services at intersections and/or for crowd control? Yes No

Conformation of Police services and associated fees are determined by the Ashland Police Department's Police Chief.

Do you plan on utilizing volunteers/monitors? Yes No (Note: in most cases they are required)
If yes in what capacity?

Name and phone number of volunteer coordinator:

PUBLIC NOTIFICATION AND PROMOTIONAL INFORMATION

PLEASE NOTE: YOU ARE ADVISED NOT TO ANNOUNCE, ADVERTISE OR PROMOTE YOUR EVENT UNTIL YOU HAVE A SIGNED PERMIT. Please describe the marketing and promotional effort planned for the event (advertising, flyers, etc.). Please also include strategies for notifying affected neighborhoods and businesses (14 days prior).

I have read and agree to the notification requirements at the end of this application and understand that failure to notify the public will result in the revocation of my event permit.

INSURANCE INFORMATION

HOLD HARMLESS AGREEMENT: IN CONSIDERATION OF THE CITY OF ASHLAND CLOSING ONE OR MORE PUBLIC STREETS FOR THE ACTIVITY FOR WHICH THIS PERMIT WAS ISSUED, THE SPONSOR(S) OF THIS EVENT HEREBY AGREES TO SAVE THE CITY, ITS AGENTS, OFFICIALS, AND EMPLOYEES HARMLESS FROM AND AGAINST ALL DAMAGES TO PERSONS OR PROPERTY, ALL EXPENSES, AND OTHER LIABILITY THAT MAY RESULT FROM THIS ACTIVITY. (DEPENDING ON THE SIZE OF AND SCOPE OF THE EVENT A "CERTIFICATE OF INSURANCE" MAY BE REQUIRED.)

Signature of Sponsor or Authorized Representative

Date

LIABILITY AGREEMENT: SPONSORS OF SMALL PARADES, LARGE PARADES, SMALL ATHLETIC, LARGE ATHLETIC, EXTRA LARGE USES, AND POSSIBLY EXCEPTIONS SHALL HOLD HARMLESS, DEFEND AND INDEMNIFY THE CITY AND THE CITY'S OFFICERS, AGENTS AND EMPLOYEES AGAINST ALL CLAIMS, DEMANDS, ACTIONS AND SUITS (INCLUDING ALL ATTORNEY FEES AND COSTS) BROUGHT AGAINST ANY OF THEM ARISING FROM SPONSOR'S ACTIVITIES AUTHORIZED BY A STREET AND SIDEWALK USE PERMIT.

The sponsor shall maintain public liability and property damage insurance that protects the sponsor and the City and its officers, agents and employees from any and all claims, demands, actions and suits for damage to property or personal injury, including death, arising from the sponsor's street and sidewalk use. The insurance shall provide coverage for not less than \$2,000,000 for personal injury to each person, \$2,000,000 for each occurrence, and \$2,000,000 for each occurrence involving property damage; or a single limit policy of not less than \$2,000,000 covering all claims per occurrence.

I have read the hold harmless agreement and liability agreement. I agree to maintain public liability and property damage insurance if the City Attorney determines a liability agreement will be required.

Signature of Sponsor or Authorized Representative

Date

PERMIT CONDITIONS

If your permit is approved and issued the following conditions may apply:

1. **Fees** – Fees for events are to be paid at least 30 days prior to the event. Failure to pay fees may result in the revocation of the permit. See attached sheet for permit fees.
2. **Notifications** – Organizer will notify affected neighborhoods and businesses and copies of notifications will be sent to Public Works Department at 20 E. Main Street, Ashland, OR, or by fax at 541-488-6006 at least 14 days prior to the event and will include a list of those notified.
3. **Signage** – Parking signage is coordinated through the Police Department and traffic control signage by the Street Department. No signs may be posted on utility posts or regulatory sign posts. Event signs such as sandwich boards, pedestal signs, ground signs, etc are not allowed. Some signs are allowed for charitable events - call Planning Department at 541-488-5305 for more information regarding signs.
4. **Volunteers** – Organizer will adequately supply volunteers to staff positions along the route. Volunteers will be instructed to assist in staging a safe and orderly event. Volunteers must be easily identifiable through some form of badge, arm band, bib, shirt or cap. Volunteers will remain on post until advised by Ashland Police Department that they are no longer required. Proof of adequate number of monitors shall be provided upon request of the Permit Coordinator at least 5 days prior to the event.
5. **Insurance** – Sponsors of events shall provide coverage for not less than \$2,000,000 for personal injury to each person. \$2,000,000 for each occurrence and \$2,000,000 for each occurrence involving property damages; or a single limit policy of not less than \$2,000,000 covering all claims per occurrence. A copy of the insurance certificate must be received by the Permit Coordinator prior to the event.
6. **Pace** – Organizer will ensure that all participants are aware they must maintain an overall pace of 12 minutes per mile. The Police supervisor may adjust the pace as necessary for the safety of runners. Participants who fall behind will be required to move to the sidewalks upon request by the Ashland Police Department.
7. **Route** – *Routes for events will not be changed unless specific written approval is given by the Permit Coordinator.* The Police Supervisor may approve changes on the day of the event.
8. **State Highways** – Large events utilizing areas around ramps to state highways will be required to apply for and coordinate closures with the State of Oregon Department of Transportation at 541-774-6360.
9. **Other closures** – Permits are issued with a set starting and ending time. These times will not be changed without permission of the Permit Coordinator or Police Supervisor on the day of the event. Resumption of normal traffic in these areas will occur at the end time specified on the event permit. Any participant left on the course will be required to move to the sidewalks.
10. **Other permits** – Organizers are responsible for ensuring all applicable permits are in place prior to the event. These include, but are not limited to: park use, other venues and noise permits. Approval jurisdiction is the city limits of Ashland. Permits outside city limits are the sole responsibility of the applicant.
11. Special conditions – (list if any)

I have read these conditions and agree to fulfill any requirements therein.

By signing this application, sponsor, or sponsor’s authorized representative on behalf of sponsor agrees to all terms and conditions set forth in Ashland Municipal Code and any special conditions listed in the permit.

As the sponsor or authorized representative, I certify that the information provided is true to the best of my knowledge and agree to pay the permit fee for this event as determined by the City Council based upon the information provided in this application.

Name of Sponsor or Authorized Representative (Printed)			
Signature of Sponsor or Authorized Representative		Date	
RETURN THIS COMPLETED APPLICATION AND ROUTE MAPS TO:	Special Events c/o Public Works Administration 20 East Main St (Physical Address: 51 Winburn Way) Ashland, Oregon 97201 Office: (541) 488-5587 ~ FAX (541) 488-6006 Email: SpecialEvents@ashland.or.us Web: www.ashland.or.us		

PUBLICITY AND PUBLIC NOTIFICATION OF SPECIAL EVENTS

Sponsors are advised not to publicize proposed street and sidewalk uses until after receipt of the permit from the Public Works Department to avoid publication of misinformation. Sponsors who disregard this precaution shall not receive special consideration in determining approval for the proposed street and sidewalk uses because of advance preparation or the expenditure of money.

A precondition for receipt of a special event permit is public notification and signage.

Sponsors of large athletic, large parades, extra large uses, uses with a closed course and possibly exceptions shall notify residential complexes, neighborhood groups, businesses and churches which will be affected by the street and sidewalk use (signature form enclosed). **The notification shall be made not less than fourteen (14) days before the street and sidewalk use date.** The notification shall be in writing and shall include the name and telephone number of the appropriate City official to contact in case of questions or concerns. A notification form is at the end of this document. A copy of the actual form of notification shall be sent to the Public Works Department not less than fourteen (14) days before the street and sidewalk use date with a list of those notified.

ADDITIONAL PERMITS

IF ANY OF THESE CONDITIONS EXIST YOU MAY NEED AN ADDITIONAL PERMIT FROM ANOTHER AGENCY.

PERTINENT QUESTIONS	WHO TO CONTACT	PHONE
Will a park be used for the formation or ending area or anywhere along the route? If yes:	<u>City Park:</u> Parks & Recreation	541-488-5340

Will a public address system or amplified music be used? If yes:	Public Works Department	541-488-5587
Will food be served at the event? If yes:	Jackson County Health Division	541-774-8206
Will alcoholic beverages be sold? If yes:	Oregon Liquor Control Commission	541-776-6191
Will your procession interfere with a bus route or schedule? If yes:	RVTD, Field Operations Coordinator	541-779-2877
Will your event include a block party? If yes:	Public Works Department	541-488-5587
Will your event include a street closure that does not include a procession or athletic activity? If yes:	Public Works Department	541-488-5587
Will your event include a neighborhood street fair or community event with broad participation? If yes:	Public Works Department	541-488-5587
Will your event include tents, canopies, booths, food? Are you an outdoor fair? If yes:	Ashland Fire Department	541-482-2770
Will your event include open fires or cooking equipment of any kind? If yes:	Ashland Fire Department	541-482-2770

Notification Certification

To be submitted to the Public Works Department by Event Organizer
at least 14 days prior to the event.

List name of the business or organization hosting the event: _____

Name and phone number of the contact person for the event: _____

Name of the event: _____

I certify that the entities listed below have been notified about my upcoming special event.

Signature of Sponsor or Authorized Representative		Date	
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Name/Business	Address	Phone	Email
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By signing below, we, the abutting residents and/or business representatives affected by the proposed closure, acknowledge notification of the above listed street closure.

Printed Name/Business	Signature	Address	Phone

**Please submit this form to: Ashland Public Works Administration, 541-488-5587,
specialevents@ashland.or.us.**