



City of West Plains Special Event Permit Application

Dates of Event:	Date Submitted:
Location of Event:	
Applicant's Name	Sponsor name is the same as the applicant
Applicant's Mailing Address	Sponsor's Name (responsible for the conduct of event)
City, State, Zip	Sponsor's Mailing Address
Applicant's Email Address:	City, State, Zip
Applicant's Phone Number:	Sponsor's Email Address:
	Sponsor's Phone Number:
ddresses and phone numbers:	le, civic or corporate organization, list the officer's and director's names,
ddresses and phone numbers:	
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ddresses and phone numbers: Event purpose: Begin time: Requested dates/times for event set under the set of persons attending the set of persons at	End time: p and shut down, including clean up: g per day: Estimated number of vehicles per day:
ddresses and phone numbers: Event purpose: Begin time: Requested dates/times for event set use the set in	End time: p and shut down, including clean up: g per day: Estimated number of vehicles per day:
Requested dates/times for event set usestimated number of persons attendir Vill alcoholic beverages be allowed, power of the properties of	End time: p and shut down, including clean up: ng per day: Estimated number of vehicles per day: rovided, or sold at the event? Yes No sor private property advertising this event? Yes No signs are subject to the city's sign ordinance.

State the address of the special event and include a description or map illustrating the event site, including lots, existing buildings, parking areas (both on and off street), drive areas and access lanes (attach additional pages if necessary).
Describe all streets or portions thereof to be closed.
If the event is in a city park, describe all park shelters, areas or facilities to be used/reserved for the event.
List all vendors providing services, sales, food, or drink to/at this event.
Please note that all vendors must abide by city code chapter 12, article 2, section 12-21 (5).

Because a portion of this event is on public/city property, I have attached a copy of my certificate of insurance for general liability and property damage, stating limits of coverage and naming the City of West Plains as an additional insured.

EXPENSES

Special event permit applicants, sponsors, and any other individuals or organizations named in the permit shall be responsible for any City of West Plains staff overtime wages up to \$500. The applicant may also be responsible for any additional expenses incurred by the City of West Plains for stolen or damaged city property, the purchase of additional materials and equipment, and utilities used for the event. (Note: Events exempt from these expenses include any City of West Plains' hosted or sponsored events, West Plains' public schools, military or emergency service programs, exercise simulation or training drills, or any governmental agency acting within the scope of its functions.)

BARRICADES

The city will not furnish any type of barricades for a special event unless otherwise specifically approved by the City Administrator. At least two (2) barricades with flashing yellow lights attached shall be placed at each end of every street to be closed for the special event if the event is to continue into the hours of darkness. These barricades with flashing lights attached shall be placed with the other barricades. Boxes, chairs, or any other type of furniture shall not be used for barricades. Failure to provide adequate barricades may result in the special event being

terminated. It is the responsibility of the event sponsor to provide volunteers at each barricade to ensure they are not moved during the event.

CLEAN UP

The street and its right-of-way must be cleaned of all litter and materials within 48 hours of the conclusion of the special event and before the barricades are taken down. The event sponsor will be responsible for disposal of all waste including, but not limited to, sanitary waste, sewage, toilet facilities, garbage, trash, and refuse.

EMERGENCY MANAGEMENT

The event sponsor will be responsible for the event's fire protection plan including the location of fire lanes and water supply for fire control. The sponsor will be responsible for having a plan in place for emergency medical services that may be needed during the event.

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. THE SPONSOR AND/OR APPLICANT AGREES TO FOLLOW THE REQUIREMENTS OF THE CITY OF WEST PLAINS CODE OF ORDINANCES, CHAPTER 12, ARTICLE V.

BELIEF. THE SPONSOR AND/OR APPLICANT AGREES TO FOLLOW THE REQUIREMENTS OF
CITY OF WEST PLAINS CODE OF ORDINANCES, CHAPTER 12, ARTICLE V.
APPLICANT'S SIGNATURE Applicant's Signature
Date

SPONSOR'S SIGNATURE

Sponsor's Signature (if different from Applicant)

Date

Email completed form and certificate of liability insurance to kellie.mayers@westplains.gov

Internal Use Only
Police
Fire
Street
City Administrator