

# KAMAS CITY SPECIAL EVENT PERMIT GUIDELINES

\$50 APPLICATION FEE

This information has been prepared to assist you in planning and meeting the necessary requirements for a safe and enjoyable event. If you should have any questions which are not answered in this application packet, please contact Kamas City at 435-783-4630.

### A Special Event Permit will be required for any special event within the city.

"Special event" means a temporary event, gathering, or activity, including, but not limited to, parades, block parties, runs, races, walks, fairs, festivals, concerts, demonstrations, rallies, performances, shows, and other similar events, which are held in whole or in part upon public property, streets, sidewalks, trails, walkways, or other public rights-of-way, or if occurring on private property, will nevertheless substantially affect, impact, or interfere with the ordinary use of public property by the general public within the vicinity of such event and/or require the use of city services. A special event shall not exceed 3 days.

A special event permit does <u>not</u> include a "noise permit". Noise violations may result in citation(s) issued to event applicant/responsible person if a violation occurs.

#### PROCESSING PROCEDURE:

Once you obtain a permit application, please submit the completed application to the Kamas City Hall not less than 30 business days before the date of the event for block parties, 45 business days before the date of the event for events involving the sales or service of alcohol, and 60 business days before the date of the event for all other events, and no more than one year prior to the event date. This will allow sufficient time for processing the application. The application will be routed through the Police Department and Business License Administrator for approval to ensure that the application meets the requirement of each respective department. This review process may require additional time if questions and/or problems with the application arise. If alcohol is to be served at the event, you must also contact the Liquor Licensing Authority and Kamas City Council to obtain a permit.

### **APPLICANT RESPONSIBILITIES:**

Attach route or event map: A map is required for all events.				
<b>Fee:</b> The following fees will be paid before the permit is issued.				
Kamas City Resident:	\$50.00 per event			
Kamas Valley Resident:	\$250.00 per event			
Nonresidents:	\$500 per event			
If any special event requires a City staff or support person to be				

If any special event requires a City staff or support person to be present, the cost of service will be billed at \$85 for Police, Public Works, and Administration, per hour, per staff person with a 4-hour minimum. All other costs (calls, faxes, etc.) will be charged at cost plus 30%. South Summit School District will be exempt from these fees upon approval from the City Council.

- ☐ Indemnification Agreement: Prior to issuance of a permit, the applicant, and sponsor if applicable, must sign an indemnification agreement. This agreement indemnifies the City of Kamas from any liability, which may arise as a result of the special event.
- □ <u>Signatures of affected residents and/or businesses:</u> Required for any street or sidewalk blockages or closures.



# KAMAS CITY SPECIAL EVENT PERMIT APPLICATION

## **APPLICANT INFORMATION**

Application Fee Paid:

Sponsoring Organization: _					
Name of Applicant:					
Address:					
City, State, Zip:					
Daytime Phone:		Cell Phone:			
Email:		Event Webs	site:		
Contact Person During Ever (if different from Applicant)	nt:	Cell Phone:			
EVENT INFORMATION					
Name of Event:					
Location or Address of Ever	nt:				
Facilities to be used:  □ Park □ Street □ Sides	walk □ Private Prop	erty 🗆 Ot	her:		
Type of Event:  □ Foot Race □ Bicycle Ra □ Other:	ace 🗆 Parade 🗆 C	community (	Celebration 🗆 B	lock Party	□ Street Fair
Date of Event:	Event Tim	ne: from:	(a.m./p.m.)	to:	(a.m./p.m.)
Set-Up Date:	Time:	Take-Down	n Date:	Tir	ne:
Blockage/Closure Time: Sta	orting(a.m.	./p.m.) Unti	1:	(a.m./p.m.)	
Location of Street/Sidewalk (Note: Location or route map is REQ		A Traffic Contro	l Plan may also be requ	ired.)	
Estimated Number of Partic	ipants/Spectators:				
	(For	r Office Use Only	)		
Application Fee Required:	Yes □ No □	Authorizing	Official:		_

# GENERAL INFORMATION

Parking Control? (Attach Plan)	Yes	No		
Traffic Control/Security (Attach Plan)	No	(Required for	any street closure)	
Sound Amplification Equipment?	Yes	No		
Medical Aid Stations?	Yes	No		
Alcoholic Beverage Present?	Yes	No	(City License	Required)
Sale of Merchandise?	Yes	No		
Sale of Food/Beverages?	Yes	No	(Health Dept.	approval required)
Description for any information marked "	yes" above:			
Will event involve open burning?		Yes	_ No	
Will event involve any open flame cooking	ng?	Yes	No	
Will event involve the use of tent or cano	Yes	No		
Will event involve fireworks display?		Yes	No	
(Permit	required from the Sou	th Summit Fire	Department – Attach C	Copy)
Will event involve use of a City Park/park	k building or facilit	y? Yes	No	Approved By:
	(Approval requ	ired from Kam	as City office)	
ROUTE INFORMATION (for pa	rades, races, etc.)		Assembly Time:	
Completion Point:		Event Start Time:		
•	uired)	1	event Start Time.	
Floats: Number:	Types:			
Signs/Banners: Mate	• •		Size:	
I acknowledge that the information cont	ained in this applic	cation is true	and complete to the	e best of my knowledge.
Applicant Signature:			Date:	

# RESIDENT'S AGREEMENT FOR STREET CLOSURE/BLOCKAGE

Special Event Name:					
Special Event Applicant:					
	Time:				
es are required by all residents	s affected by the closure of use of the	ne street/sidewalk during the event.)			
Address	Phone #	Approve/Disapprove	_		
			_		
			_		
			_		
		es are required by all residents affected by the closure of use of the	es are required by all residents affected by the closure of use of the street/sidewalk during the event.)		

#### INDEMNITY/INSURANCE

The applicant agrees that in the event the permit is granted, the following indemnity agreement applies to the event. The undersigned hereby waives his or her right to any and all claims, of any nature or type, against Kamas City, its officers, agents, servants, and employees, arising out of the special event and specifically agrees to indemnify, and hold harmless, the City, its invites, officers, agents, servants, and employees from and against any and all suits, actions, legal proceedings, claims, demands, damages, costs and expense, and attorney's fees incident to such claim.

A Certificate of Insurance must be filed with the city ten (10) working days before the event which names Kamas City as an additional insured.

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.

I am aware of the terms and conditions of the permit and will advise the participants in this event of these terms and conditions.

Print Applicant's Name	Date	
Applicant's Signature	-	
DEPARTMENT APPROVALS/COMMENTS	S:	
City Planner: Comments: Site Plan Required.	Mayor:Comments:	
Business License: Comments:	Building Inspector:Comments:	
Police:		

VENDOR INFORMATION				
Business Name:	Business Name:			
Current License issued by:	Current License issued by:			
Type of Business:	Type of Business:			
Contact Name:	Contact Name:			
Address:	Address:			
Phone:	Phone:			
L	1			
Business Name:	Business Name:			
Current License issued by:	Current License issued by:			
Type of Business:	Type of Business:			
Contact Name:	Contact Name:			
Address:	Address:			
Phone:	Phone:			
Business Name:	Business Name:			
Current License issued by:	Current License issued by:			
Type of Business:	Type of Business:			
Contact Name:	Contact Name:			
Address:	Address:			
Phone:	Phone:			
Business Name:	Business Name:			
Current License issued by:	Current License issued by:			
Type of Business:	Type of Business:			
Contact Name:	Contact Name:			
Address:	Address:			