



## City of Seneca, Oregon

### Special Events

106 A Ave., PO Box 208

Seneca, Oregon 97873

Office: (541) 542-2161 ~ FAX (866) 688-0015

<http://www.senecaoregon.com>

#### OFFICE USE ONLY:

New event: ☐ Return event: ☐

Route change: ☐

Date Received

On time: ☐ Late: ☐

## Special Event Permit Application

(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: ☐ For-profit ☐ 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? ☐ Yes ☐ No Name of Company:

Contact Name:

Phone:

Email:

### EVENT INFORMATION

Event Type (check all that apply): ☐ 5K ☐ 10K ☐ Half Marathon ☐ Marathon ☐ Triathlon ☐ Walk ☐ Bike Race ☐ Parade

☐ Demonstration ("First Amendment" Event) ☐ Other (Please specify briefly here)

Street location: ☐ Sidewalk Only ☐ Street Only ☐ Street and Sidewalk ☐ Street, Sidewalk and Park

City Location(s) (check all that apply): ☐ City Park ☐ Ballfield ☐ Golf Course ☐ Other:

Application Fee of \$25 submitted with application ☐ Yes ☐ No (**application will not be considered until received**)

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?

☐ Yes ☐ No

Admission Cost and/or Entry Fee(s):

If graduated or multi event, attach fee schedule separately

Is this an annual event?

☐ Yes ☐ No

If annual, has the route changed from the previous year?

☐ Yes ☐ No

Name and phone number of EMT/Paramedics provider:

Attendance

Participants\*:

Spectators:

Total:

Basis on which attendance estimate is made:

Previous year's total attendance – if applicable:

*\*Athletic Events require final registration counts sent to Special Events Coordinator within 3 days of event*

### OVERALL EVENT DESCRIPTION

Briefly explain event and event details:

STREET CLOSURE INFORMATION		
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
Special event route (i.e., held on sidewalk and/or street, changes to route, where and how you wish to travel) <b>(ALSO REQUIRED: a detailed map that includes the start point, end point, direction of travel, and street names)</b>		
Are you requesting a complete or rolling street closure? Why are you requesting this street closure?		
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, and/or bands, please provide details about these entries:		
Parking restrictions requested:		
Active street monitoring requested?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Describe:
Will the proposed route cross a bridge? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, which bridge(s)?		
Are you requesting a full or partial bridge closure? Why are you requesting a bridge closure?		
EVENT DETAILS		
Does your event involve the sale or consumption of alcoholic beverages? <input type="checkbox"/> Yes <input type="checkbox"/> No (Oregon Liquor Control: 503-872-5000) 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 (Food being served: Grant County Health: 541-575-0429) If yes, will this activity occur on (or spill into) city streets? <input type="checkbox"/> Yes <input type="checkbox"/> No Please describe:		
Are you charging a fee for vendors to participate in your event? <input type="checkbox"/> Yes <input type="checkbox"/> No		How much:

Will the event have amplified sound? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please describe:
Is this a fundraising event? If yes, please describe:	
Do you have a cleanup plan for your event? <input type="checkbox"/> Yes <input type="checkbox"/> No      Please describe your recycling and clean-up plans:	
<b>SAFETY/SECURITY/VOLUNTEERS</b>	
Please describe your procedures for crowd control and internal security:	
Are you expecting police services at intersections and/or for crowd control? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you plan on utilizing volunteers? <input type="checkbox"/> Yes <input type="checkbox"/> No (volunteers/monitors are required) Name and phone number of volunteer coordinator: If yes in what capacity?	
<b>PUBLIC NOTIFICATION AND PROMOTIONAL INFORMATION</b>	
<b>PLEASE NOTE: YOU ARE ADVISED NOT TO ANNOUNCE, ADVERTISE OR PROMOTE YOUR EVENT UNTIL YOU HAVE A SIGNED PERMIT.</b> 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) and posting signage at and around major intersections (7 days prior). <input type="checkbox"/> <b>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.</b>	
<b>INSURANCE INFORMATION</b>	
<u><b>HOLD HARMLESS AGREEMENT:</b></u> IN CONSIDERATION OF THE CITY OF SENECA 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.	
<b>Signature of Sponsor or Authorized Representative</b>	<div style="border-bottom: 1px solid black; height: 20px; width: 100%;"></div> <div style="text-align: right; padding-top: 5px;"> <b>Date</b> </div>
<u><b>LIABILITY AGREEMENT:</b></u> 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 \$1,000,000 for personal injury to each person, \$1,000,000 for each occurrence, and \$500,000 for each occurrence involving property damage; or a single limit policy of not less than \$1,000,000 covering all claims per occurrence.  <u><b>CITY INSURANCE PROGRAM:</b></u> THE CITY OF SENECA DOES NOT PROVIDE SPECIAL EVENT INSURANCE AT THIS TIME.	
<input type="checkbox"/> <b>I have read the hold harmless agreement and liability agreement. I agree to maintain public liability and property damage insurance if the City of Seneca determines a liability agreement will be required.</b>	
<b>Signature of Sponsor or Authorized Representative</b>	<div style="border-bottom: 1px solid black; height: 20px; width: 100%;"></div> <div style="text-align: right; padding-top: 5px;"> <b>Date</b> </div>

## PERMIT CONDITIONS

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

1. **Fees** – Scheduled permit 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.
  - Cost recovery for athletic events are calculated and will be billed post-event with payment due net 20 days.
2. **Notifications** – Organizer will notify affected neighborhoods and businesses at least 6 days prior to the event. Notification documents will be sent to the City at cityseneca@centurytel.net for approval prior to distribution. Proof of delivery may be required.
3. **Signage** – Organizer will post signage appropriate to the event. At and around major intersections and traffic areas, signage such as sandwich boards may be required 7 days prior to the event.
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 John Day Police Department that they are no longer required. Proof of adequate number of monitors shall be provided upon request of the Special Events Coordinator at least 5 days prior to the event.
5. **Insurance** – Sponsors of events shall provide coverage for personal injury to each person and for each occurrence involving property damages; or a single limit policy of not less than \$1,000,000 covering all claims per occurrence. A copy of the insurance certificate must be received by the City 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 Police Supervisor.
7. **Route** – Routes for events will not be changed unless specific approval is given by the City. The City Manager may approve changes on the day of the event.
8. **State Highways** – Large events utilizing areas around state highways will be required to apply for and coordinate closures with the State of Oregon. Example: U.S. 395
9. **Other closures** – Permits are issued with a set starting and ending time. These times will not be changed without permission of the City Manager 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 and permissions are in place prior to the event.

☐ **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 the Seneca City Code, Administrative Regulations 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/cost recovery fees for this event as determined by CITY, 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, APPLICATION FEE, AND ROUTE MAPS TO:**

**City Manager/Recorder**

106 A Ave., PO Box 208 ~ Seneca, Oregon 97873  
Office: (541) 542-2161 ~ FAX (866) 688-0015  
Email: cityseneca@centurytel.net  
Web: <http://www.senecaoregon.com>

## OFFICE USE ONLY:

**Event Type:** ☐ Small Sidewalk ☐ Large Sidewalk ☐ Street ☐ Small Parade ☐ Large Parade  
☐ Small Athletic ☐ Medium Athletic ☐ Large Athletic ☐ Exception

**Application Fee Received:** ☐ Yes ☐ No

**Information entered into database?** ☐ Yes ☐ No

**Application sent to Special Events Review Committee?** ☐ Yes ☐ No **Date Sent:**

**Event Approved?** ☐ Yes ☐ No **If no, meeting scheduled?** ☐ Yes ☐ No **When?**

**Event approved at meeting?** ☐ Yes ☐ No **Permit denied, with cause** ☐ **Appeal** ☐

**Event Amended?** ☐ Yes ☐ No **Event cancelled** ☐

**Fee Paid:** ☐ Yes ☐ No

**Date Paid:**

**Amount:**

**Date Permit Issued:**

### ADDITIONAL REQUIREMENTS (REVISED 2016)

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

EVENT FEATURE(S)	CONTACT	PHONE
Event uses <b>Grant County Fairgrounds</b>	Grant County Fairgrounds Office	541-575-1900
Event will use a bridge or restrict bridge opening	Coordinated through the City	541-542-2161
Event uses address system or amplified music	Coordinated through the City	541-542-2161
Food will be served	Grant County Health Division	541-575-0429
Alcoholic beverages will be sold or served	Coordinated through the City	541-542-2161
Event includes <b>regional festivals, indoor events and/or large gatherings</b>	Oregon Office of State Fire Marshal	541-419-1844

### 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 **CITY** 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 athletic, large parades, and other uses with a closed course 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 more than fourteen (14) days and not less than six (6) 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. All public notifications must be reviewed by the Special Events program prior to distribution. Delivery confirmation/signatures need to be provided no less than 5 days prior to the event date. **Additionally, you may be required to post signage at and around major intersections.**

### PUBLIC NOTIFICATION STRATEGIES AND RESOURCES

In addition to notifying residential complexes, neighborhood groups, businesses and churches, it is a good idea to notify the public at large. Outlined below are a few ways that you can let the public know about your event.

#### **KJDY:**

To contact the local radio station please contact Elkhorn Media Group at: 541-575-1400 or visit them at 413 NW Bridge St in John Day

#### **BLUE MOUNTAIN EAGLE:**

Contact the local newspaper at: 541-575-0710 or visit them at 195 N. Canyon Boulevard in John Day

#### **Items to include in announcement(s):**

- Name of the event
- Name of sponsor organization, mailing address, telephone number
- Date of the event
- Starting and ending times
- Detailed route description