



APPLICATION FOR OUTDOOR SPECIAL EVENT PERMIT

Public Events or Private Events Requiring Public Services

City of Washington, Parks & Recreation Department * PO Box 1988, Washington, NC 27889 * 8 a.m.-5 p.m., Monday-Friday

Voice: (252) 975-9367, ext. 223 * Fax: (252) 946-8433 * Email: specialevents@washingtonnc.gov

EVENT INFORMATION	City Staff Use	
NOTE: Event Planner is responsible for items marked ►► in relevant sections below		
1. Name of Event	Department to be notified	Fee
2. Location of Event a. <input type="checkbox"/> Roving event b. <input type="checkbox"/> Stationary Event (<input type="checkbox"/> large <input type="checkbox"/> small) (<input type="checkbox"/> public property <input type="checkbox"/> private commercial property <input type="checkbox"/> private residential property) ►► EVENT PLANNER: Attach letter from property owner granting permission for event location if using private property.	<input type="checkbox"/> Parks & Recreation	<u>Reservation Fee</u> <input type="checkbox"/> Parkway <input type="checkbox"/> large <input type="checkbox"/> Parkway <input type="checkbox"/> small <input type="checkbox"/> Parkway Raindate <input type="checkbox"/> Park <input type="checkbox"/> Ballfield
3. When will advance set-up begin?		
4. Date and Time Event Begins: _____ - _____ am / pm Ends: _____ - _____ am / pm		
5. Sponsoring organization/person(s): <input type="checkbox"/> Non-profit. Provide tax ID number _____ <input type="checkbox"/> Commercial <input type="checkbox"/> Individual/family Name: _____ Address: _____ City: _____ State: _____ Zip: _____ Daytime Telephone: _____ Evening Telephone: _____ ►► EVENT PLANNER: Attach signed letter from non-profit organization stating tax exempt number, address & involvement with event.		<input type="checkbox"/> ID Badge
6. Event Planner Contact information Name: _____ Address: _____ City: _____ State: _____ Zip: _____ Daytime Telephone: _____ Evening Telephone: _____ Mobile Telephone: _____		
7. Is this event open to the public? <input type="checkbox"/> yes <input type="checkbox"/> no If "yes," complete 8 below. If "no," skip to 9 below.		
8. Type of event a. Is this event a <input type="checkbox"/> community event (of interest mainly to local people) or is it a <input type="checkbox"/> regional event (of interest to visitors as well as locals)? b. If this is a regional event, do you want event information published on the Special Events Calendar, if eligible? <input type="checkbox"/> yes <input type="checkbox"/> no If "yes", provide a publishable telephone number for the public to call for more information (REQUIRED): _____ Email (optional): _____ Website (optional): _____ c. Admission charged? <input type="checkbox"/> yes <input type="checkbox"/> no If "yes", how much: _____ ►► EVENT PLANNER: It is the event planner's responsibility to inform the public about the event. ►► EVENT PLANNER: Call Electric Department, 975-9303, to arrange for banner over Main Street, if needed.	<input type="checkbox"/> Tourism <input type="checkbox"/> Communications (City Hall)	
9. Attach a letter describing your event. (see page 6) a. Number of people expected: _____ Ages expected: _____ b. How do you plan to handle inclement weather? <input type="checkbox"/> Cancel <input type="checkbox"/> Rain or Shine		
10. Attach a diagram of the layout of the event indicating location and sizes of tents, seating plan, location of portable toilets and all event activities (such as rides, food preparation, etc.), where electricity is needed, streets and parking lots to be closed, and other items/activities as indicated by on pages 2-4 of this application. <i>Venue diagrams for public areas are available from the City of Washington Events & Facilities Coordinator</i>		

EVENT ACTIVITIES CHECKLIST

(Check and provide details for all that apply)

NOTE: Applicant responsible for items marked ► in relevant sections below

Three months advance notice required to arrange for any City service for Large Events

City Staff Use

EVENT ACTIVITIES CHECKLIST (Check and provide details for all that apply) NOTE: Applicant responsible for items marked ► in relevant sections below <u>Three months advance notice required to arrange for any City service for Large Events</u>	City Staff Use	
	Department to be notified	Fee
<input type="checkbox"/> Fireworks show/display. Time of show/display: Address and location of staging area: ☞ Indicate location of staging area on diagram completed for Question 10. ► EVENT PLANNER: Attach copy of firework vendor's certificate of insurance. ► EVENT PLANNER: Secure owner's permission if staging on private property. ► EVENT PLANNER: Contact Fire Marshal, City Fire-Rescue-EMS Dept., 410 N. Market St., (252) 948-9402, for permit & requirements.	<input type="checkbox"/> Fire Marshal <input type="checkbox"/> Risk Manager	<input type="checkbox"/> Fire Inspection
<input type="checkbox"/> Alcoholic beverages to be served (non-profit organizations or private events only). ► EVENT PLANNER: Written request must be submitted to Washington City Council no later than 30 days prior to the event. Letter must include and comply with regulations given by Events and Facilities Manager, set by City Council. ► EVENT PLANNER: Contact NC Alcohol Beverage Control, (919) 779-0700, regarding ABC permit requirements ► EVENT PLANNER: Alcohol liability and other liability insurance required according to "Guidelines for Special Events on City-Owned Property Serving Alcoholic Beverages"	<input type="checkbox"/> Risk Manager <input type="checkbox"/> City Manager	<input type="checkbox"/> Wristbands
<input type="checkbox"/> Boaters expected. If so, how many:	<input type="checkbox"/> Parks & Recreation	<input type="checkbox"/> Slip rental
<input type="checkbox"/> Activities planned on the river. If so, describe: ► EVENT PLANNER: Contact US Coast Guard (252) 247-4570. Request Marine Event Application, which is due 60 days before event. ► EVENT PLANNER: Call NC Wildlife Resources Commission, about activities, schedule & numbers. Captain Preston Tyndall 252-288-5052 ► EVENT PLANNER: If catching saltwater fish, contact NC Division of Marine Fisheries (252) 964-2268.	<input type="checkbox"/> Parks & Recreation	<input type="checkbox"/> Slip rental
<input type="checkbox"/> Request to lift no-wake zone on the river during the following times: ► EVENT PLANNER: Submit request to City Clerk, 102 E. 2 nd St., (252) 975-9318.	<input type="checkbox"/> City Clerk	
<input type="checkbox"/> Parade. Time of parade: ☞ Indicate location of staging area and parade route on diagram completed for Question 10	<input type="checkbox"/> Police	<input type="checkbox"/> Parade Fee
<input type="checkbox"/> Tents to be erected (including vendor canopies). How many: _____ What size(s): _____ When will you set up? _____ Dismantle? _____ ☞ Indicate location and sizes of all tents on diagram completed for Question 10. ► EVENT PLANNER: Arrange for tent rental, setup and dismantling. ► EVENT PLANNER: Portable fire extinguishers shall be provided as required.	<input type="checkbox"/> Fire Marshal <input type="checkbox"/> Inspections <input type="checkbox"/> Electric Director (locates) <input type="checkbox"/> Public Works (locates)	<input type="checkbox"/> 1 tent \$50 <input type="checkbox"/> 2 or more \$100
<input type="checkbox"/> Seating and/or tables to be brought on site. ☞ Indicate seating arrangements on diagram completed for Question 10. ► EVENT PLANNER: Arrange for chair/table rental, delivery, setup, and pick-up.	<input type="checkbox"/> Inspections <input type="checkbox"/> Fire Marshal	
<input type="checkbox"/> Cooking to take place under tents ► EVENT PLANNER: Contact Beaufort Co. Environmental Health Division, 220 N. Market St., (252) 946-6048 about state & local laws. ► EVENT PLANNER: Arrange for proper collection and disposal of non-garbage wastes (such as cooking grease, drippings, hazardous materials & liquids).	<input type="checkbox"/> Fire Marshal <input type="checkbox"/> Beaufort Co. Envir. Health	<input type="checkbox"/> Fire Inspection
<input type="checkbox"/> Food preparation to take place at other facilities or open air ► EVENT PLANNER: Contact Beaufort Co. Environmental Health Division, 220 N. Market St., (252) 946-6048 about state & local laws. ► EVENT PLANNER: Arrange for proper collection and disposal of non-garbage wastes (cooking grease, drippings, hazardous materials & liquids, etc.).	<input type="checkbox"/> Beaufort Co. Envir. Health	
<input type="checkbox"/> Amusement rides. Describe: ☞ Indicate location of amusement rides on diagram completed for Question 10. ► EVENT PLANNER: Attach copy of ride vendor's certificate of insurance, naming the City of Washington as an additional insured. ► EVENT PLANNER: Contact Fire Marshal, City Fire-Rescue-EMS Dept., 410 N. Market St., (252) 948-9402, for permit & requirements.	<input type="checkbox"/> Risk Manager <input type="checkbox"/> Fire Marshal	<input type="checkbox"/> Fire Inspection

<input type="checkbox"/> Portable toilets (required if City of Washington indoor facilities are unavailable or inadequate for expected attendance).	<input type="checkbox"/> Inspections	<input type="checkbox"/> ___ units
<input type="checkbox"/> Other equipment to be brought on site: ▶ EVENT PLANNER: Arrange for rental, delivery, set-up, maintenance and pick-up other equipment		
<input type="checkbox"/> Electricity needed at established location. Check all areas that apply <input type="checkbox"/> Stewart Parkway (\$25 connection fee per pod) <input type="checkbox"/> Large service connection behind Dock Attendants station at Stewart Parkway westend (bandstand) <input type="checkbox"/> Large service connection in parking lot located at Respass Street & Stewart Parkway (bandstand) <input type="checkbox"/> Service connection at Bonner Street pump station near Estuarium <input type="checkbox"/> Standard 120 volt <input type="checkbox"/> Standard 240 volt <input type="checkbox"/> Bandstand 240 volt <input type="checkbox"/> Other areas: Beebe Park, Seventh Street Recreation Center, Civic Center parking lot, Civic Center deck, Sloan Insurance building, Curiosity Shoppe building, South Market Street (\$10 minimum per connection): ☞ Indicate locations where access to electricity is needed, on diagram completed for Question 10. ▶ EVENT PLANNER: Confirm electrical requirements & connections with sound, stage and food vendors 3 months before event.	<input type="checkbox"/> Electric Director <input type="checkbox"/> Parks & Recreation	<input type="checkbox"/> ___ pods <input type="checkbox"/> Large Service (bandstand) <input type="checkbox"/> ___ other connections <input type="checkbox"/> After hours connect <input type="checkbox"/> After hours disconnect
<input type="checkbox"/> Temporary electrical service needed where electric service is unavailable. ▶ EVENT PLANNER: Provide and install service pole if none available. ▶ EVENT PLANNER: Hire licensed electrician to connect electricity from service pole to equipment ▶ EVENT PLANNER: Before beginning work secure temporary electric permit from Inspections, 102 E. 2 nd St., (252) 975-9352 / (252) 975-9304. ▶ EVENT PLANNER: Apply for Temporary Electric Service from Customer Service, 102 E. 2 nd St., (252) 975-9300 or www.washington-nc.com	<input type="checkbox"/> Inspections <input type="checkbox"/> Customer Service	<input type="checkbox"/> Inspection Fee <input type="checkbox"/> Connection Fee
<input type="checkbox"/> Amplified sound system to be used. Describe use: ▶ EVENT PLANNER: Sound system provider name _____, telephone number _____	<input type="checkbox"/> Police <input type="checkbox"/> Electric Director	<input type="checkbox"/> Amplification Fee
<input type="checkbox"/> Street lighting control requested (Waterfront only. Control of individual areas unavailable). Turn lights on: _____ Turn lights off: _____	<input type="checkbox"/> Electric Director	
<input type="checkbox"/> Ballfield lighting requested. Turn lights on: _____ Turn lights off: _____	<input type="checkbox"/> Parks & Recreation	<input type="checkbox"/> Lights fee plus staff time
<input type="checkbox"/> Electric generators to be in use. If so, what is the anticipated load? _____ ▶ EVENT PLANNER: Generator must be sized to handle load	<input type="checkbox"/> Inspections	
<input type="checkbox"/> Mowing requested	<input type="checkbox"/> Public Works <input type="checkbox"/> Parks & Recreation	
<input type="checkbox"/> Street sweeping requested	<input type="checkbox"/> Public Works	
<input type="checkbox"/> Portable bleachers if available	<input type="checkbox"/> Parks & Recreation	<input type="checkbox"/> ___ Bleachers
<input type="checkbox"/> Extra trash receptacles needed. <input type="checkbox"/> Roll-Out Carts <input type="checkbox"/> Dumpsters	<input type="checkbox"/> Public Works	<input type="checkbox"/> ___ Carts <input type="checkbox"/> ___ Dumpsters
<input type="checkbox"/> Street(s) closing requested (approved roads only). What street(s): Begin closing _____ End closing _____ ☞ Indicate street closing(s) on diagram completed for Question 10 ▶ EVENT PLANNER: Notify impacted parties in advance about street closing.	<input type="checkbox"/> City Manager (commercial) <input type="checkbox"/> Police <input type="checkbox"/> Parks & Rec (coordinate with Public Works & Electric) <input type="checkbox"/> Fire-Rescue-EMS	<input type="checkbox"/> Street Closing Fee
<input type="checkbox"/> Parking lot(s) closing requested. What lot(s): Begin closing _____ End closing _____ ☞ Indicate park lot closing(s) on diagram completed for Question 10 ▶ EVENT PLANNER: Notify impacted parties in advance about parking lot closing.	<input type="checkbox"/> City Manager (commercial) <input type="checkbox"/> Fire Marshal	
OTHER REQUIREMENTS		
<input type="checkbox"/> Liability insurance may be required for some special events or activities to be determined by City of Washington Risk Manager. ▶ EVENT PLANNER: Purchase insurance naming City of Washington as an additional insured & attach copy of certificate of insurance. ▶ EVENT PLANNER: Liquor liability and other liability insurance required according to "Guidelines for Special Events on City-Owned Property Serving Alcoholic Beverages."	<input type="checkbox"/> Risk Manager	

TOTAL FEES REQUIRED

<input type="checkbox"/> Event Deposit. Refundable according to terms of City of Washington Special Events Policy	<input type="checkbox"/> \$100 Large <input type="checkbox"/> \$25 Small
<input type="checkbox"/> Event Late Registration Fee (non-refundable), if applicable	<input type="checkbox"/> \$25 (Large <3 mo.) <input type="checkbox"/> \$50 (Large 1-2 mo.) <input type="checkbox"/> \$10 Small
<input type="checkbox"/> Reservation and use of Stewart Parkway	<input type="checkbox"/> \$100 Original date <input type="checkbox"/> \$100 Rain date
<input type="checkbox"/> Reservation and use of other park areas or shelters	<input type="checkbox"/> \$20 (parks) <input type="checkbox"/> \$25 (1-4 hr shelter) <input type="checkbox"/> \$40 (5-10 hr shelter)
<input type="checkbox"/> Reservation and use of athletic field	<input type="checkbox"/> \$_____ = \$50 (field) \$25 x _____ ea additional field(s)-McConnell <input type="checkbox"/> \$_____ = \$25 (per 4 hours) all other fields
<input type="checkbox"/> Installation of electric service pods downtown	<input type="checkbox"/> \$_____ = \$25 x _____ pod(s)
<input type="checkbox"/> Custom electrical connections	<input type="checkbox"/> \$_____ = \$10 x _____ + time and materials
<input type="checkbox"/> Activation of <input type="checkbox"/> waterfront bandstand elec serv <input type="checkbox"/> docks bandstand elec serv <input type="checkbox"/> Bonner Street Pump elec serv	<input type="checkbox"/> \$25 regular <input type="checkbox"/> \$125 after connect <input type="checkbox"/> \$125 after disconnect
<input type="checkbox"/> Fire inspection	<input type="checkbox"/> \$50 (1 tent) <input type="checkbox"/> \$100 (2 tents)
<input type="checkbox"/> Reservation and use of boat slips	<input type="checkbox"/> Contact Docks
<input type="checkbox"/> Parade Permit	<input type="checkbox"/> \$50
<input type="checkbox"/> Amplification Permit	<input type="checkbox"/> \$50
<input type="checkbox"/> Street Closing Permit	<input type="checkbox"/> \$25
<input type="checkbox"/> Temporary electric service inspection	<input type="checkbox"/> Contact Customer Service
<input type="checkbox"/> Temporary electric service connection	<input type="checkbox"/> Contact Customer Service
<input type="checkbox"/> Tank of potable water	<input type="checkbox"/> \$50, plus \$10 refundable key deposit
<input type="checkbox"/> Roll-out cart solid waste service (.5 cubic yard)	<input type="checkbox"/> \$_____ = \$3 x _____ cart(s)
<input type="checkbox"/> Dumpster solid waste service (8 cubic yards)	<input type="checkbox"/> \$_____ = \$25 x _____ dumpster(s)
<input type="checkbox"/> Portable Toilets	<input type="checkbox"/> \$_____ = \$_____ x _____ units
<input type="checkbox"/> Wrist bands	<input type="checkbox"/> \$_____ = \$1 x _____ units
<input type="checkbox"/> Identification badge deposit	<input type="checkbox"/> \$_____ = \$10 x _____ units
<input type="checkbox"/> Off-duty police officer	<input type="checkbox"/> \$_____ = \$_____ x _____ officers x _____ hours
<input type="checkbox"/> Portable bleachers	<input type="checkbox"/> \$_____ = \$100 x _____ units
<input type="checkbox"/> Other	<input type="checkbox"/> \$_____
TOTAL DUE	\$ _____
TOTAL PAID <input type="checkbox"/> Check # _____ <input type="checkbox"/> Cash <input type="checkbox"/> Credit Card	\$ _____
Received by _____ Date _____	

REFUNDABLE FEES

Deposit Paid	\$ _____	Explanation Of Penalties
Penalty (see explanation at right)	\$ _____	
Amount Refunded	\$ _____	
Check payable to Name _____ Address _____		
Date Processed _____ Date Mailed _____		
<i>Note: Refund checks are written on the 10th and the last pay period for the month. Deposits may take up to two weeks to be refunded.</i>		

APPLICANT STATEMENT

As Planner of the Outdoor Special Event described above, I understand that I and/or the sponsoring organization are responsible for

- securing additional permits and certificates as indicated in section "ADDITIONAL REQUIREMENTS FOR APPLICATION" in this application;
- coordinating with agencies other than the City of Washington as indicated in section "ADDITIONAL REQUIREMENTS FOR APPLICATION" in this application;
- notifying the City of Washington Events and Facilities Coordinator about any changes, additions, deletions and/or modifications to the event as described above no later than three weeks before a large or roving event and one week before a small event;
- providing handicapped access to activities that are open to the public;
- having an event planner on site at the beginning of set-up through the duration of the event;
- informing vendors about regulations and requirements in the City of Washington Special Events Policy, rules and regulations by other agencies with jurisdiction over activities at the event; and requirements and restrictions for this event prior to arriving at the event venue;
- settling disputes about locations or other event related matters between vendors;
- ensuring access of emergency and service vehicles to event venues and activities;
- coordinating permission with private property owners if a privately-owned location will be used for event activities;
- notifying affected parties in advance about street and/or parking lot closings due to this event;
- informing the public about the event, if is a public event;

I also understand that new events and/or unprecedented activities may require advance approval from Washington City Council through request of the Parks and Recreation Department.

I also understand that requests for City services less than three weeks prior to large or roving events or one week prior to small events may be impossible to meet and, if met, can result in forfeiture of event deposit due to unanticipated operational expenses by the City of Washington.

I also understand that allowing non-permitted and/or unscheduled activities to occur during the above described special event will result in forfeiture of event deposit and may jeopardize receipt of Special Events Permits from the City of Washington to the Event Planner and/or sponsoring organization for future special events.

Name (please print) _____ Signature _____ Date _____

▶▶ EVENT PLANNER: Attach copies of other required permits and/or certificates and payment receipt to application

Special Event Permit is pending review of this application by appropriate City of Washington departments. Departments may make additional requirements or have additional questions based on the description of the event provided above. When approved by all appropriate City of Washington departments, the Events & Facilities Coordinator will issue the Special Events Permit for the day, times and location indicated.



Event Submission Form – Tourism Development Authority

Event Title: _____

Event Description (limit 65 words): _____

Event Date(s): _____

Event Hours: _____

Admission _____

Location Address: _____

Event Host Organization: _____

Contact Information: _____

Additional Information: _____

Event information may be faxed (948-9416) or emailed to (visitus@originalwashington.com). One photograph per event can be used in the listing. Please provide photograph via email or disk.