

City of Oakdale

SPECIAL EVENTS APPLICATION

Please Note

Effective August 1, 2007 the Oakdale City Council approved the following processing fees pertinent to Special Events Applications.

Fees:

\$205 per application

PLUS \$130 street closure equipment delivery

Fees MUST accompany application at time of submission.

(The minimum 30-day application process will not begin until fees are received by the Council Services and Legislative/Records Manager.)

City of Oakdale

280 North Third Avenue, Oakdale, CA 95361
209.845.3571 Telephone 209.847.6834 Fax

SPECIAL EVENTS APPLICATION

CITY OF OAKDALE
280 NORTH THIRD AVENUE – OAKDALE, CA 95361

Event Name: _____

Organization: _____

Event Date: _____

Event Times: Begin: _____ End: _____

Location: _____

All requests require a minimum of 30 days to review.

1. This Application is made according to the rules set forth in Oakdale Municipal Code ("OMC"). In this Application, the phrase "Special Events Code" shall be used to refer to these Code requirements.
2. If the Applicant has any questions regarding the requirements of the Special Events Code, or this Application, a request for clarification should be made to **Julie Christel, Council Services and Legislative/Records Manager, at 845-3573**. However, no clarification made by the City is binding unless incorporated into the terms of the Special Events Permit.
3. Please provide the information requested in items "A1" through "A6" below. If any portion of the requested information does not apply to this Application, please indicate "N/A" for that item.

A. **The name, address, and telephone numbers of each of the following:**

- A1. The person filing the application:

Name: _____

Address: _____

Phone: _____ Cell: _____

- A2. An alternate person to contact if an emergency arises (someone other than a City employee) and the applicant is unavailable:

Name: _____

Address: _____

Phone: _____ Cell: _____

- A3. The organization sponsoring the event (The "Applicant:"):

Name: _____

Address: _____

Phone: _____ Cell: _____

A4. The president, chair, leader or other head of the organization sponsoring the event:

Name: _____

Title: _____

Address: _____

Phone: _____ Cell: _____

A5. The person who will be present and in charge of the event on the day of the event:

Name: _____

Address: _____

Phone: _____ Cell: _____

A6. Are any monitors being employed for the event? No Yes (list)

4. **Complete and attach the appropriate section for your event.**

- Block Party or Street Closing Event Page 6 & 7
- Park Event Page 8
- Parade or Fun Run on City Streets Pages 9 & 10

5. **Assure the following are attached:**

- A. Map as described in supplemental section. Attached
- B. Flyers describing the event. Attached
- C. Insurance Coverage Documentation Attached
(\$1 million coverage and Endorsement naming the City of Oakdale as Additional Insured.)

- D. Written Documentation of the authority of the applicant in 4.A.1. Being authorized to sign this application on behalf of the organization 4.A.3. By the head of the organization 4.A.4. Attached

- E. If private property is to be used for the event, applicant will provide written authorization of the property to be used, with dates and time from beginning to end. Attached N/A
 - a. \$205 application processing fee **plus** \$130 if street closure equipment required. \$_____ enclosed.

- F. By submitting this Application, the Applicant understands that the City shall review the application under the procedures set forth in the Oakdale Municipal Code. If the City approves the application, the Applicant will be notified by the City.

On behalf of the Applicant, I hereby submit this Application for a Special Events Permit for the event described in this Application.

By signing below, I agree to indemnify hold harmless, and defend the City and its representatives against liability and/or loss arising from activities connected with and/or undertaken pursuant to the Permit. The City is not liable for any business loss, property loss, or other damage that may result from the use of the Permit, or suspension or revocation of the Permit. No vendor shall maintain any claim or action against the City, its officials, officers, employees, or agents on account of any suspension or revocation.

Applicant Name

Applicant Signature

Date

SPECIAL EVENTS PERMIT
BLOCK PARTY OR STREET CLOSING EVENT
(NOT INCLUDING PARADES OR RACES)

Name of Event: _____ Date: _____

1. The specific streets to be closed, indicating closure points: (Include map)

2. Check all included items:

- | | |
|---|---|
| <input type="checkbox"/> Vendors and Booths | <input type="checkbox"/> Electric Generators |
| <input type="checkbox"/> Extra Parking | <input type="checkbox"/> Comfort Stations (water and first aid) |
| <input type="checkbox"/> Sound System | <input type="checkbox"/> Port-a-pots |
| <input type="checkbox"/> Electrical Power Sources | <input type="checkbox"/> City's Mobile Stage |

3. The proposed date(s) of the event: _____

Set-up time of the event: _____

Starting time of the event: _____

Finishing time of the event: _____

Take down and clean-up time: _____

Estimated number of participants: _____

4. Describe and show location and direction of sound amplification equipment proposed.

5. City personnel, service or equipment required for this event. An additional fee may be assessed per OMC §20-22.

6. Are there any unusual activities associated with this event that should be brought to the attention of the City of Oakdale to evaluate this application?

**BLOCK PARTY/STREET CLOSING EVENT
STREET CLOSURE ACKNOWLEDGEMENT FORM**

We, the undersigned residents/business owners, understand and agree that access to our home(s)/businesses will be temporarily blocked for a Block Party on the following date: _____

Please list Subdivision, if applicable, and access points (street names) to be blocked.

Please note: All temporary barricades placed on City property must be lightweight and easily removable for emergency vehicle access. Parked motorized vehicles are not acceptable. A clearance area of 20 feet is required on a city street for emergency vehicle access.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____
13. _____
14. _____
15. _____

Attach additional pages, if necessary, to complete the list of residents.

**SPECIAL EVENTS PERMIT
CITY PARK EVENT¹**

Name of Event: _____ Date: _____

1. Name of park requesting: _____

Indicate what section(s) of the park you will be utilizing:

- BBQ & picnic tables Gazebo Open turf area

Include map to identify all aspects of your event with the general location and name of features:

- Electrical Generators Vendors and Booths
 Mobile Stage Comfort Stations (water and first aid)
 Sound Systems Portable Toilets
 Electrical Power Sources Other

2. If applicable, describe location and direction of sound amplification equipment.

3. Check all applicable items:
 Food Booths² Entertainment
 Alcohol to be sold³ Wedding
 Alcohol to be distributed

4. The proposed Date(s) of the event: _____
Set-up time of the event: _____
Starting time of the event: _____
Finishing time of the event: _____
Take down and clean-up time: _____
Estimated number of participants: _____

5. City personnel, service or equipment required for this event. An additional fee may be assessed per OMC §20-22.

6. Are there any unusual activities associated with this event that should be brought to the attention of the City of Oakdale to evaluate this application?

¹ Kerr Park and Wood Park are the only reservable City parks. All other events held in City parks must be reviewed by the City Council.

² Stanislaus County Temporary Food Facility Permit may be required.

³ Requires a City issued Alcohol Permit and Department of Alcoholic Beverage Control Daily License Application.

**SPECIAL EVENTS PERMIT
PARADE OR FUN RUN ON CITY STREETS**

Name of Event: _____ Date: _____

1. The specific streets to be closed, indicating closure points. (Include map)

Map to show location of:

- The proposed assembly point.

Time: from _____ to _____

- The proposed route.

Time: from _____ to _____

- The proposed end/final assembly point.

Time: from _____ to _____

- Final clean-up time: _____

2. Provide facts concerning a **parade**:

- A. The number, type and size (if extra-large) of floats, vehicles and/or animals.

- B. The interval space to be maintained between units of the parade.

- C. The estimate total length of the parade in yards.

3. Provide facts concerning a **fun run**:

A. Provide a copy of the flyer advertising the fun run.

B. The number of runners/walkers anticipated by category.

C. Estimated spread in runners/walkers (fastest runner vs. slowest walker at the time of maximum spread).

4. Describe and show location of sound amplification equipment proposed. Show direction of amplification on the map.

5. City personnel, service or equipment required for this event. An additional fee may be assessed per OMC §20-22.

6. Are there any unusual activities associated with this event that should be brought to the attention of the City of Oakdale to evaluate this application?
