

**CITY OF GONZALES RECREATION DEPARTMENT  
SPECIAL EVENT APPLICATION (updated 8/31/2010)**

Complete applications must be received by the City no less than 30 days prior to the date of the event. Applications that are not complete will not be accepted.

**APPLICANT INFORMATION**

Name \_\_\_\_\_ CDL or ID # \_\_\_\_\_  
Physical Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Primary Phone # \_\_\_\_\_ Alternate Phone # \_\_\_\_\_  
2nd Contact Name \_\_\_\_\_ Phone # \_\_\_\_\_

**ORGANIZATION INFORMATION (If Applicable)**

Organization Name \_\_\_\_\_  Non Profit  For Profit  
Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Phone # \_\_\_\_\_ Federal or Tax ID # \_\_\_\_\_  
 For Profit  Non profit  501 c (3) IRS Certificate Submitted

**EVENT INFORMATION**

Event Title \_\_\_\_\_  
Event Location \_\_\_\_\_  
Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Day of Week \_\_\_\_\_  
Set Up Time \_\_\_\_ AM PM to \_\_\_\_ AM PM  
Event Time \_\_\_\_ AM PM to \_\_\_\_ AM PM Total Event Hours   
Clean Up \_\_\_\_ AM PM to \_\_\_\_ AM PM

If your event requires a street closure(s), your event will be billed for street closure notification signs. Each sign is \$1.00 and the number of signs needed will be determined by the Public Works Dept.

Street Closure Time \_\_\_\_ AM PM to \_\_\_\_ AM PM  
Streets to be closed \_\_\_\_\_

Anticipated Attendance \_\_\_\_\_ Admission Charge  Yes  No \$

Brief Description of Event \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FOOD/ BEVERAGE SERVICE (Not including alcohol)**

***Food Vendors MUST HAVE A FOOD VENDING PERMIT from the Health Department***

Food Vendors  Pre-Packaged Food  Prepared on Site

For food prepared on site, what will the cooking methods be?

Gas  Electric  Charcoal  Deep Frier  Other \_\_\_\_\_

Beverage Sales (non-alcoholic) No glass containers allowed

\* Cooking may not be done under canopy tents unless the tents are fire rated (Most are not)

\* A fire extinguisher must be present in any tent that is cooking.

\* If cooking with gas, the gas tank must be at least 5 feet away the cooking device.

**ALCOHOL SERVICE**

Will alcohol be served at this event?  Yes  No (if no, skip this section)

City approval is required for consumption only. In order to sell alcohol you must obtain an ABC Permit

Name of Person and/or group applying for ABC permit: \_\_\_\_\_

Drink Limit per Person \_\_\_\_\_

How will the drink limit be controlled? \_\_\_\_\_

How will you prevent service to minors? \_\_\_\_\_

Your pricing policy must discourage over consumption. What is the price per drink? \_\_\_\_\_

**EVENT ACTIVITIES**

Please check each activity that will occur during the event. List all other activities not already listed.

Retail Sales Type \_\_\_\_\_

\* A list of all Retail Vendors (Businesses) must be submitted to the City of Gonzales no less than 7 days prior to the event.

\* All Retail Vendors must have a valid City of Gonzales Business License.

\* Please use the attached Business License Authorization Form to list all event vendors

Non-Profit Fundraising  Carnival Games  Car Show  
 Dancing  Live Music  Disc Jockey  
 Amplified Sound  Recorded Music  Other \_\_\_\_\_

Activities requiring physical activity must have a certificate of insurance from the company providing the activity

Inflatables Company \_\_\_\_\_ Quantity \_\_\_\_\_

Carnival Rides (inc Bull) Company \_\_\_\_\_ Quantity \_\_\_\_\_

\* All activities requiring a generator greater than or equal to 50 KW will require an electrical permit and inspection prior to use

Please check all equipment items you will be using during the event (not supplied by the City of Gonzales)

Generators qty \_\_\_\_\_

Pop up Tents qty \_\_\_\_\_ (All pop up tents and canopies must be secured to the ground)

Extension Cords qty \_\_\_\_\_ (Use of extension cords may not cause a tripping hazard)

Stages or platforms \_\_\_\_\_

Other \_\_\_\_\_

Other \_\_\_\_\_

**ENVIRONMENTAL**

\*The City does not provide porta potties. One (1) porta potty and (1) hand washing facility is required for every 200 people and at least one (1) porta potty per 500 people must be ADA compliant.

\* If event is a multi-day event all portable toilets must be pumped and cleaned nightly.

Porta Potties # ADA compliant \_\_\_\_\_ # regular \_\_\_\_\_

Hand Washing Facilities # \_\_\_\_\_

**Recycling of recyclable material is mandatory at all special events (G<sup>3</sup>)**

Plan A **My organization would like to profit from collection of CRV** (California Redemption Value)

My organization will contact G3 Sustainable Initiative for containers to collect cans and plastic bottles. The G3 Initiative will not collect the collected items. My organization will collect and remove the items from the location of the event and will be responsible for taking the collected items for redemption.

\*G3 Initiative will require a \$100 deposit for rental of these containers

Plan B **My organization would like to let Tri-Cities handle all Recycling responsibilities**

My organization will contact Tri-Cities disposal to make arrangements for all recyclables.

A confirmation from Tri Cities must accompany this application.

The City does not provide trash containers or trash pick up. Please indicate how trash will be disposed of?

\_\_\_\_\_  
\_\_\_\_\_

**EVENT SECURITY & MEDICAL RESPONSE**

I will be using the Gonzales Police Department for event security and medical response.

You must contact the Gonzales Police Department to coordinate this response.

I will NOT be using the Gonzales Police Department for event security and medical response.

Please describe in detail, your security plan, including crowd control: This plan must be approved by the Gonzales PD at least 10 days before your event.

Please describe, in detail, your emergency/medical plan, including your communication procedure.

**CITY OF GONZALES CO-SPONSORSHIP REQUEST**

If you will be requesting City Co-Sponsorship for your event, you must attach a letter addressed to the City Council requesting co-sponsorship. Your co-sponsorship is not guaranteed simply by request. City staff will make a recommendation to the City Council as to the degree of co-sponsorship and the City Council will make the final approval.

Will you be seeking City of Gonzales Co-Sponsorship  Yes  No

**THE CITY MAY REQUIRE CITY STAFF AT YOUR EVENT. IN THE EVENT THAT STAFF IS NOT SPONSORED BY THE CITY, HOURLY FEES WILL APPLY.**

Please check all areas you are interested in having the City of Gonzales help with:(based on level of co-sponsorship & availability)

- |  |  |
|--|--|
| <input type="checkbox"/> Event Insurance                         | <input type="checkbox"/> Street Barricades                                     |
| <input type="checkbox"/> Public Works Staff      how many? _____ | <input type="checkbox"/> Street Closure Signs <i>(required for st.closure)</i> |
| <input type="checkbox"/> Police Officers                         | <input type="checkbox"/> Bleachers   |
| <input type="checkbox"/> Trash Containers      how many? _____   | <input type="checkbox"/> Fencing   |
| <input type="checkbox"/> Temporary Electrical Power              | <input type="checkbox"/> Other _____   |
| <input type="checkbox"/> Access to Electrical Outlets            | <input type="checkbox"/> Other _____   |
| <input type="checkbox"/> Junction Box                            | <input type="checkbox"/> Other _____   |
| <input type="checkbox"/> Generator      how many? _____          | <input type="checkbox"/> Other _____   |

Please give a description of any other requests you have:

**SITE MAPS/ PARADE ROUTES**

Please provide a detailed site map on an additional piece of paper. Please include:

- Names of streets in the event area.
- All street or lane closures
- The location of fences, barriers or barricades (include dimensions for fenced in areas)
- Locations of first Aid Facilities
- Location of all stages, platforms, booths, cooking areas, trash & recycling containers
- Location of Generator and or electricity
- Placement of vehicles or trailers used for the event
- Placement of portable toilets/restroom facilities

\* If a parade is included in your event, please attach a city map with the route highlighted.

**ATTACHMENTS (Due 10 Days before event)**

| mark if applicable   | Received                 | Date  | Staff |
|--|--------------------------|-------|-------|
| <input type="checkbox"/> 501c 3 Certificate                      | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> Certificate of Event Insurance          | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> Inflatable Co. Business License         | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> Inflatable Co. Certificate of Insurance | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> Carnival Rides Certificate of Insurance | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> ABC Permit                              | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> Liquor Liability Insurance              | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> Letter to Business & Residence          | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> Building/ Fire Permit                   | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> Recycling Contract                      | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> Copy of Health Dept. Food Permit        | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> Retail Sales Business License Approval  | <input type="checkbox"/> | _____ | _____ |

**FOOT NOTES**

| Section  | Notes  |
|--|--|
| <b>Event Information</b> 1                     | If your event requires a street closure(s), your event will be billed for street closure notification signs. Each sign is \$1.00 and the number of signs needed will be determined by the Public Works Dept.   |
| <b>Food and Beverage</b> *                     | Food Vendors <b>MUST HAVE A FOOD VENDING PERMIT</b> from the Health Department   |
|  | * Cooking may not be done under canopy tents unless the tents are fire rated.  |
|  | * A fire extinguisher must be present in any tent that is cooking.   |
|  | If cooking with gas, the gas tank must be at least 5 feet away the cooking device.   |
|  | * Absolutely no glass containers   |
| <b>Alcohol Service</b> *                       | * City approval is required for consumption only.  |
|  | * In order to sell alcohol you must obtain an ABC permit.  |
| <b>Event Activities</b> *                      | * Activities requiring physical activity must have a certificate of insurance from the company providing the activity.   |
| <b>Vendors</b> *                               | * A list of all For Profit Vendors (Businesses) must be submitted to the City of Gonzales no less than 7 days prior to the event   |
|  | * All For Profit Vendors must have a valid City of Gonzales Business License.  |
|  | * Please use the attached Business License Authorization Form to list all event vendors  |
| <b>Environmental</b> *                         | * The City does not provide porta potties. One (1) porta potty and (1)hand washing facility is required for every 200 people and at least one (1)porta potty per 500 people must be ADA compliant.   |
|  | * If event is a multi-day event, portable toilets must be pumped and cleaned nightly.  |
|  | * The City requires mandatory recycling at all events.   |
|  | * The City does not provide trash containers or trash pick up.   |
| <b>Event Security &amp; Medical Response</b> * | * Event security must be approved or provided by the Gonzales Police Department  |
| <b>City of Gonzales Co-Sponsorship</b> *       | * If you will be requesting City Co-Sponsorship for your event, you must attach a letter addressed to the City Council requesting co-sponsorship. Your co-sponsorship is not guaranteed simply by request. City staff will make a recommendation to the City Council as to the degree of co-sponsorship and the City Council will make the final approval. |
| <b>Maps</b> *                                  | * Your group must provide site maps and or parade maps with this application   |
| <b>Attachments</b> *                           | * All relative attachments must be provided to the City at least one week prior to your event.   |
|  | * If a parade is included in your event, attach a city map with the route highlighted.   |
| <b>Conditions</b> *                            | * The City Staff may provide your group with a list of conditions for your event. These conditions must be discussed prior to the event with City Staff.   |

## Retail Vendors Business License Verification

Full Business Name as listed on Business License Application \_\_\_\_\_

Business License Number \_\_\_\_\_

1

Verified

Not Licensed

Comment \_\_\_\_\_

2

Verified

Not Licensed

Comment \_\_\_\_\_

3

Verified

Not Licensed

Comment \_\_\_\_\_

4

Verified

Not Licensed

Comment \_\_\_\_\_

5

Verified

Not Licensed

Comment \_\_\_\_\_

6

Verified

Not Licensed

Comment \_\_\_\_\_

7

Verified

Not Licensed

Comment \_\_\_\_\_

8

Verified

Not Licensed

Comment \_\_\_\_\_

9

Verified

Not Licensed

Comment \_\_\_\_\_

10

Verified

Not Licensed

Comment \_\_\_\_\_

11

Verified

Not Licensed

Comment \_\_\_\_\_

12

Verified

Not Licensed

Comment \_\_\_\_\_

13

Verified

Not Licensed

Comment \_\_\_\_\_

14

Verified

Not Licensed

Comment \_\_\_\_\_

15

Verified

Not Licensed

Comment \_\_\_\_\_

16

Verified

Not Licensed

Comment \_\_\_\_\_

17

Verified

Not Licensed

Comment \_\_\_\_\_