



EVENT PERMIT APPLICATION

Return completed application to:

102 Willow Street
New Richmond, Ohio 45157
(513) 553-4146 or Fax (513) 553-7699

* This application with payment must be received in this office no later than 15 days prior to the event date.

APPLICANT INFORMATION

Event Name: _____

Event Producer: _____

PRIMARY CONTACT INFORMATION (This primary Contact is the person who is to be contacted regarding the application or event.)

Name: _____

E-mail Address: _____

Mailing Address: _____
_____ Street _____ City _____ State _____ Zip Code

Phone number(s): Day: _____ Night: _____ cell: _____

DAY(S) and TIME(S) OF EVENT: Includes Site Preparation and Dismantling & Clean-up

Starting Date: ___/___/___ Time: ____:____ am / pm

Ending Date: ___/___/___ Time: ____:____ am / pm

Total Attendance Expected: _____

Most People at Any One Time: _____

Rain/Cancellation Policy: _____

EVENT TYPE (check all that apply):

Block Party _____ Rally _____ Other _____
Walk/Run/Footrace _____ Parade _____
Festival/Special Event _____ Concert _____

Describe your event: _____

Where will the event be held? (see Village map enclosed): _____

STREET CLOSURE

If applicable, list the name(s) of street(s) to be closed: _____

Note: Also illustrate street closures on map included in this packet.

Street closure to begin on: Starting Date: ___/___/___ Time: ___:___ am / pm

Street re-opening on: Ending Date: ___/___/___ Time: ___:___ am / pm

SPECIAL PARKING RESTRICTIONS

“No Parking” signs needed? Yes _____ No _____

If yes; where: _____

SPECIAL TRAFFIC CONTROL ASSISTANCE (describe here):

ADDITIONAL REOUESTS (describe here):

ADDITIONAL EVENT FEATURES (Check all that apply)

___ Alcoholic Beverages ___ Restroom Facilities ___ Security
___ Rides/Inflatables ___ Cleaning if Village assisted ___ Fireworks
___ Street Closings ___ Electric Service ___ Venders
___ Emergency Services ___ Signs/Banners ___ Tents
___ Bandstand Usage ___ Public Address (PA) System

INSURANCE REQUIREMENT:

Proof of insurance is required of applicant/event producer, and subcontractors of the applicant/event producer if estimated attendance of event is 500 or more people or if the event will include carnival rides, fireworks, or selling/serving alcoholic beverages, **at least 30 days prior to the event**. The enclosed list of Insurance Requirements and Certificate of Insurance should be reviewed immediately with your insurance agent in order to comply. Please have your insurance agent complete this Insurance Certificate form, (or the Accord form) and return it with your application and obtain and forward required Certificates of Insurance from all subcontractors referenced above.

HOLD HARMLESS AND INDEMNIFICATION CLAUSE

In consideration of the use of the designated village property, park or facility for the specified date, in the Village of New Richmond, the undersigned hereby releases and forever discharges, acquits, defends, indemnifies, covenants and holds the Village of New Richmond, employees, agents, officers, volunteers, successors, elected and appointed officials, harmless against any and all claims, cause of action, demands, damages, loss of services and all liability for personal injury or property damage of any kind sustained in any manner arising from the use of the Village property, park or facility, cost and expense, including reasonable attorney fees for the defense thereof, arising from the conduct or management of the undersigned's usage, whether verbal or in writing, or from any act of negligence of the undersigned his/her/its agents, employees, volunteers, invites of licensees in or about the designated property, park or facility, and in the event that event holder should obtain public liability insurance against the foregoing occurrences, the Village of New Richmond, employees, agents, officers, volunteers, successors, elected and appointed officials shall be entitled to claim protection under said insurance.

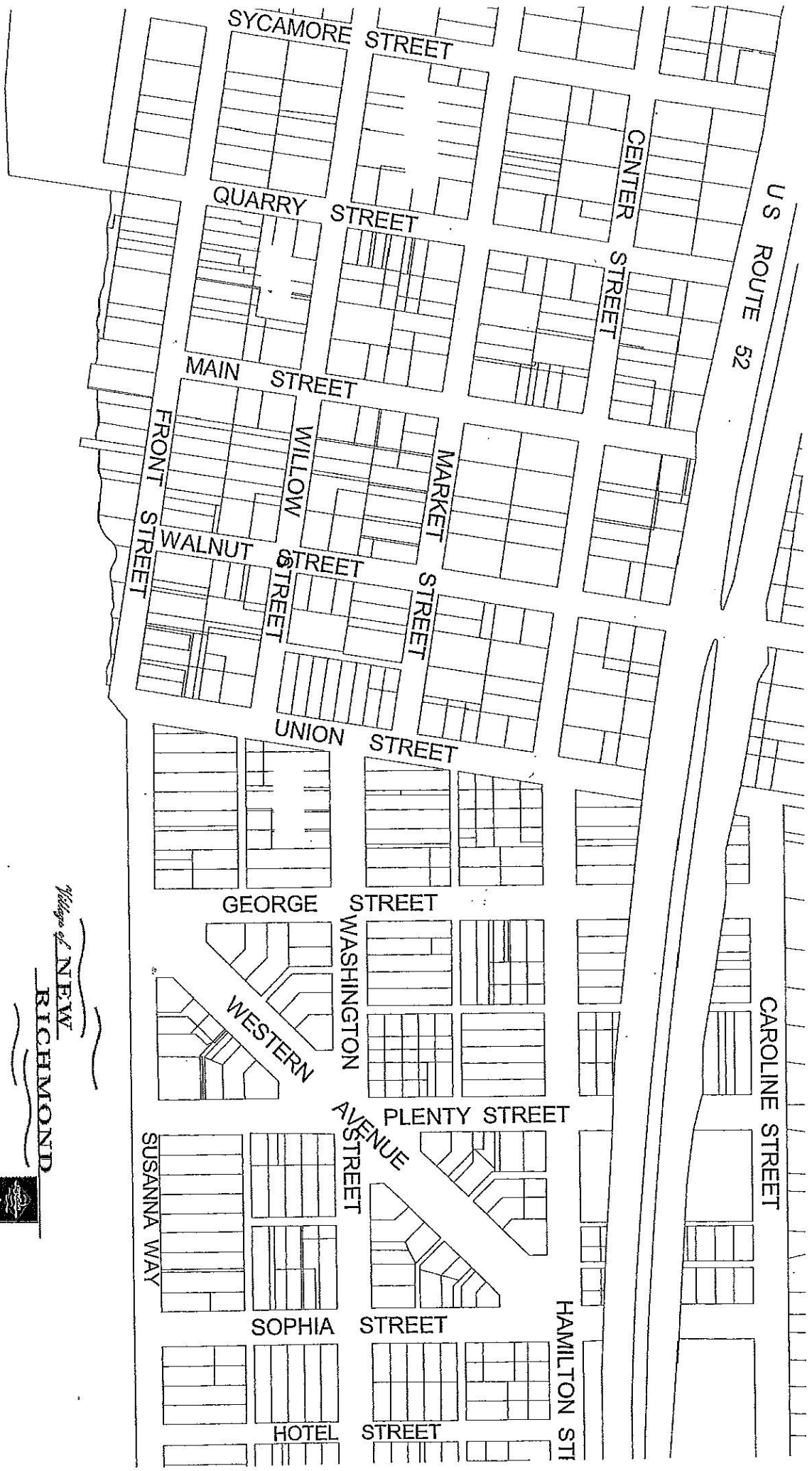
The event holder is being held responsible for the cleaning up and properly disposing of any litter or debris that occurs as a result of the scheduled usage.

I have read the above, and verify its accuracy, and agree to all terms stated. Any misrepresentation in this application or deviation from the final approved specifications and activities described herein may result in the immediate revocation of the approved permit.

X _____

Signature of the agent duly authorized by the event applicant to bind it

Date



Please indicate on the map the location of barricades required to block streets for your event.



EVENT: _____

DATES: _____

COMMENTS: _____

Approved _____ Date _____
Office Use Only

EVENT FEATURE INFORMATION FORM

ALCOHOLIC BEVERAGES

If you are selling alcoholic beverages all state of Ohio Liquor Licenses must be obtained and provided prior to the approval of this application.

Alcoholic Beverage Provider: _____

Contact: _____ Phone: _____

DORA (Designated Outdoor Refreshment Area)

Beverages sold under a special Ohio Liquor License (i.e. "F" Permit) may not be brought beyond the approved area and into the designated Outdoor Refreshment Area (DORA). Contact Village Administrator for details.

CLEAN-UP PLANS AND PROCEDURES

Any event producer holding an event on a Village Street, or any business, or residential right-of-way is responsible for clean-up and removal of debris from affected property owners' sidewalks, steps, and alcoves.

Clean Up Coordinator: _____ Phone: (____) _____ - _____

Who will Clean Up: _____

Number of Dumpsters provided: _____ Pick Up Date: _____

ELECTRICAL SERVICE

How will electrical service be supplied? _____ Generator _____ Public Utilities _____ Both

NOTE: An electrical permit may be required for temporary electrical service. If using a generator, contact the fire district in which your event is being held.

EMERGENCY MEDICAL ASSISTANCE

Do you want to request dedicated Emergency Medical Assistant Unit(s) from New Richmond EMS? _____ Yes _____ No

If yes, how many Units? _____

NOTE: There will be a fee incurred for dedicated units.

BANDSTAND/STAGE USAGE

If available, dates Bandstand/Stage will be needed: _____

RESTROOM FACILITIES

Number of Portable Facilities being provided: _____

Request usage of Susanna Park Restroom Facilities: Y/N

Name of Company Supplying Portable Facilities: _____

Contact: _____

Phone: _____

SECURITY

It is the responsibility of an event producer to provide adequate security for an event, and to ensure that an adequate number of security personnel are present to manage the expected size of the event's crowd. Security must include proper crowd control.

Total number of private security or off-duty law-enforcement officers being provided: _____

Organization providing security: _____

Briefly describe your security plan:

SIGNS/BANNERS

Number of Signs: _____

Number of Banners: _____

Location of Signs/Banners to be Hung: _____