



The City of Palm Springs is know throughout the world for its relaxing atmosphere and exciting surroundings. With some of the finest golf, world-class entertainment and restaurants in the country at your fingertips, come join us and experience the City of Palm Springs.

A wide variety of special events and activities have chosen to make Palm Springs their home due to the fantastic year-round weather and event-friendly atmosphere of the City. Annual events in Palm Springs include several parades, festivals, sportings events, racing events, golf tournaments and literally hundreds of community-based events. Each of these events helps to contribute to the distinct atmosphere found only in the City of Palm Springs.

Welcome to Palm Springs

MAILING ADDRESS:

Special Events Division 401 S. Pavilion Way Palm Springs, CA 92262

PHONE:

(760) 323-8276

FAX:

(760) 416-3799

TDD:

(760) 864-9527

WEBSITE:

www.palmspringsca.gov

The following pages include the City of Palm Springs' Special Events Application and Permit. The accompanying instructions for each section were developed to guide your organization through the process and assist you in producing a successful event.

Please complete the application fully and return it to the Parks and Recreation Division of the City of Palm Springs. You will then be contacted by a member of our special events staff to review your request and schedule an interview with an events coordinator. At that time, specific issues will be discussed to assist you in proceeding with your request. While many public agencies joined together to make this application simple and complete, please be aware that in some cases you may have to contact federal, state or county agencies, in addition to the City of Palm Springs, to complete the required application. Please do so in a timely fashion to avoid possible delays in processing your application.

On behalf of the City of Palm Springs, we thank you for contributing to the spirit and vitality of our fair City. Best wishes for a successful event and by all means – experience the City of Palm Springs.

To apply for a Special Event Permit, please read the instructions and submit your completed application, including required attachments, no later than six (6) months before your event, with the required non-refundable application fee of \$229.

Special Event Permit Application Instructions



INTRODUCTION

A complete permit application may be filed as early as *two (2) years* before the event, but it **must be received no later than six (6) months** before the actual event date. Any organized activity involving the use of, or having impact upon, public property, facilities, public parks, sidewalks or street areas requires a permit. Applicants requesting a waiver of fees or services must submit their applications a *minimum of eighteen (18) months* in advance.

It is our goal to assist event organizers in planning safe and successful events that create a minimal impact on the communities surrounding the events. We hope that you find these instructions helpful in completing the Social Event Permit Application.

PROCEDURE

The permit application process begins when you submit a complete Special Event Permit Application. Keep in mind that acceptance of your application should in no way be construed as final approval or confirmation of your request. Upon receipt of your application, the City assigns a liaison to help guide you through the permit process. Copies of the application are forwarded and reviewed by all affected departments and/or agencies. During the review process, you will be notified if your event requires any additional information, permits, licenses or certificates. During our initial application screening process, you will be allowed time to provide us with all pending documents. We must receive these items before issuing a Special Event Permit (i.e., certificates of insurance, secondary permits, etc.). Delays in providing these items often delay our ability to finish our review and approve your application in a timely manner.

INTERNET/WORLD WIDE WEB

The City of Palm Springs provides a calendar of upcoming special events on the Internet. When we issue a Special Event Permit, we often post the name, date, time, location, contact person and media referral information pertaining to the even on the calendar of events in the Palm Springs Home Page on the Internet. The City of Palm Springs Home Page can be accessed on the Internet at www.palmspringsca.gov.

Sponsoring Organization and Applicant Information





CHIEF OFFICER OR ORGANIZATION

This is the person who has overall authority of the Sponsoring Organization.

APPLICANT

This may be the Chief Officer or a member of the Sponsoring Organization who has been authorized by the Chief Officer to apply for the permit to plan the event. This person must be available to work closely with the City's event planning staff throughout the permitting process and be available at all planning meetings with staff to organize event procedures in the absence of a Professional Event Organizer.

PROFESSIONAL EVENT ORGANIZER

The Chief Officer may contract with a Professional Event Organizer to represent the Sponsoring Organization. This person maybe authorized to plan the event and work with City planners in implementing the plan. This person must be available to work closely with City planners throughout the planning process. A letter from the Chief Officer of the Sponsoring Organization, which authorizes the Applicant or Professional Event Organizer to apply for this Special Event Permit on its behalf, is required and must be attached as a cover letter to the submitted application.

CONTACT PERSON "ON SITE" DAY OF EVENT

A person representing the Sponsoring Organization must be immediately available, on the site, with authority over all elements of the event. This person will usually be the Applicant or the authorized Professional Event Organizer. The Contact Person should provide the City with a cellular phone number, pager number, or designate some other way to contact him/her during the event. The Contact Person on the day of the event will have full authority to act on behalf and make decisions for the Sponsoring Organization.

Sponsoring Organization and Applicant Information

| | Commercial (For-profit organization) | oncommercial (Nonprofit organization) | |
|---|---|---------------------------------------|------------------------|
| • | Sponsoring organization: | | |
| • | Chief officer of organization (name): | | |
| • | Sponsoring organization's address: | | |
| | | STREET | |
| | CITY | STATE | ZIP |
| • | Sponsoring organizations business phone number: (|) | |
| | | | |
| • | Applicant (name): | | |
| • | Applicant's address: | STREET | |
| | | , <u>.</u> . | |
| | CITY | STATE | ZIP |
| • | Business phone number: () | Evening phone number: (|) |
| • | Cell phone number: () | Fax number: () | |
| • | Web address: | | |
| • | Email address: | | |
| | any Professional Event Organizer or Event Service Providence work on behalf of the Sponsoring Organization to produce Name: | e this event. * | |
| • | Address: | | |
| | | STREET | |
| | СІТУ | STATE | ZIP |
| • | Phone number: () | Fax number: () | |
| • | State license number: | Expirati | on date: |
| • | Contact person "on site" day of event:(NOTE: This person must be in attendance for the durate | | le to City officials.) |
| | Cell phone number: () | Pager number: () | |

^{*} REQUIRED: Obtain a written communication from the Chief Officer of the Sponsoring Organization, which authorizes the Applicant or Professional Event Organizer to apply for the Special Event Permit on its behalf.

Event Information

TYPE OF EVENT

If your proposed event is not listed in this section, please check "Other" and attach a written description of the event.

PARADE POLICY

The City of Palm Springs does not permit the throwing of candy or any other items from parade entries. The blowing of vehicular horns and sirens is not permitted in parades for public safety reasons. Motorized vehicles in parades may be required to have parade escorts to separate vehicular and pedestrian traffic. Forward motion must be maintained at all times.

| Type of Event: | Run Other (spec | ☐ Walk | Street Festival | ☐ Bike Tour | Parade |
|-------------------|-------------------|-------------------|---------------------------|-------------|--------|
| Event Title:_ | | | | | |
| Eventl location | on: | | | | |
| | | | | | e: |
| | | | | • | rs: |
| | | | | · | rs: |
| Website add | rocc: | | | · | |
| | | | | | |
| | | | | | |
| Actual hours ope | • | | | | |
| • Date: | | | | | AM/PM |
| • Date: | | | Time: | AM/PM to | AM/PM |
| • Date: | | | Time: | AM/PM to | AM/PM |
| • Date: | | | Time: | AM/PM to | AM/PM |
| History | | | | | |
| Has this event ta | ken place before | ? 🗌 Yes 🔲 | No | | |
| If yes, Where | e? | | | | |
| When | ? | | | | |
| | | | | | |
| • | | | ber regarding the prior e | | |
| | reference nume | | | | |
| | | | | | |
| What change | es ao you anticip | ate with this eve | ent? | | |
| | | | | | |

Promotion – Advertising – Marketing – Internet

PROMOTION - ADVERTISING - MARKETING - INTERNET

Please assure approval of your event before you promote, market or advertise it. Conditional approval will be made after the event organizer submits the application and it is initially screened by your City liaison. Acceptance of your Special Event Application by the City is not a guarantee of the date, location or an automatic approval of your event. Before the City will issue a Special Event Permit, the event organizer must complete the application requirements entirely.

| • | Will this event be promoted, advertised or marketed in any manner? \square Yes \square No If yes, | |
|---|---|-------------|
| • | What is the total dollar amount to be spent on: Print \$ | Radio \$ |
| | Television \$ | Internet \$ |
| • | Will there be any live media coverage during the event? \square Yes \square No If yes, | |
| • | Please explain: | |
| | | |
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Fees – Proceeds – Reporting

TAX EXEMPT, NONPROFIT

This refers to an organization that has been recognized as tax exempt by the Internal Revenue Service at least six (6) months prior to application. Please attach a copy of the IRS501C tax exemption letter to your application.

ESTIMATED GROSS RECEIPTS

The Applicant may attach a projected event budget in lieu of completing this section.

SALES TAX

An Applicant applying for a seller's permit to sell food or beverages should indicate Palm Springs as the origin of sales. This will ensure that the City receives its share of these taxes.







Fees – Proceeds – Reporting

| yes, | | ant fees required? LYes No | |
|-----------------------------|---------------------|--|--|
| ublic admission fee | es: \$ | per person | |
| endor fees: | \$ | per person | Number of vendors: |
| | | How many of these vendors a | re for profit? |
| | | How many of these vendors are | e nonprofit"? |
| | | (Nonprofit vendors are required | to have proof of 501C3 exemption) |
| articipant entry fees | s: \$ | per person | |
| re there hotel room yes, | ı nights associated | with the event? Yes No | |
| otal number of roor | m nights allocated: | : | |
| | | | |
| | | | |
| | | | |
| articipating hotel(s) |): | | |
| | | | |
| | | | |
| | | | |
| | | gross receipts, including tickets, product a amount was computed, Indicate amount | · |
| | | Admission fees | t per nem. |
| | | Product fees | |
| | | Sponsorship | |
| | | Participant entry fees | |
| | | Other (please specify): | |
| | | expenses for this event. | |
| | | Advertising | |
| | | Lodging cost | |
| | | Lodging cost Wages, salaries | |
| | | City service (police, fire, street of | closures etc.) |
| | | city service (police, inc, street t | |
| | | Business license fee | |
| | | Other (please specify): | |
| | | · _ · / | |
| | | profit" organization? | rtifying your current tax-exempt, nonprofit statu |
| RS501C tax-exempti | ion letter obtained | l: | |
| | Projected amou | nt of revenue the nonprofit sponsoring or | ganization(s) will receive as a result of this eve |
| | i iojected airiou. | | gamzation(3) will receive as a result of this eve |

MOVING ROUTES

When planning a moving route, the Traffic & Special Events Division of the Palm Springs Police Department is available to assist you in planning your route. Consider the following in your planning:

- Impedance of emergency fire, police or paramedic vehicles.
- Conflict with public transportation, such as buses.
- Interference with people trying to reach hotels, the airport, their own residences, businesses, places of worship and public facilities.

If your event involves street closures, you may be required to obtain traffic safety equipment, and a certified traffic control plan. Depending on the type of event, barricades, traffic cones, signs, etc., may be required. Depending on the type of event and after evaluating roadway conditions, you may be required to properly place this equipment prior to commencing the event. If the closure creates a potential hazard, your organization will be required to contract traffic service from the Palm Springs Police Department and/or Street Division.

SETUP - ASSEMBLY - CONSTRUCTION

Some events may require more than one day to set up or the construction plan my be too complex to describe on the application. In these cases, attach a detailed plan with a time line that lists various times and locations where streets or public property will be impacted and when dismantling will be completed.



| Description of the scope of the setup/assembly work: If yes, Dismantle day/date: Completion time: AM/PN List street(s) requiring closure as a result of this event. Include street name(s), day, date and time of closing and time of reopening: Indicate how this closing/reopening will be handled: City of Palm Springs to handle (cost to be specified) Event to handle per CalTrans standards | • | Will a staging/setup/assembly location be required? \square Yes | s No | |
|--|---|---|--|-------|
| Description of the scope of the setup/assembly work: If yes, Dismantle day/date: Completion time: AM/PN List street(s) requiring closure as a result of this event. Include street name(s), day, date and time of closing and time of reopening: Indicate how this closing/reopening will be handled: City of Palm Springs to handle (cost to be specified) Event to handle per CalTrans standards List street(s) requiring the posting of "No Parking" signs. Indicate days, dates, and times needed and | • | Begin day/date: | Start time: | AM/PM |
| If yes, Dismantle day/date: Completion time:AM/PN List street(s) requiring closure as a result of this event. Include street name(s), day, date and time of closing and time of reopening: | • | Location: | | |
| Dismantle day/date: Completion time:AM/PN List street(s) requiring closure as a result of this event. Include street name(s), day, date and time of closing and time of reopening: | • | Description of the scope of the setup/assembly work: | | |
| Dismantle day/date: Completion time:AM/PN List street(s) requiring closure as a result of this event. Include street name(s), day, date and time of closing and time of reopening: | | | | |
| Dismantle day/date: Completion time:AM/PN List street(s) requiring closure as a result of this event. Include street name(s), day, date and time of closing and time of reopening: | | | | |
| List street(s) requiring closure as a result of this event. Include street name(s), day, date and time of closing and time of reopening: Indicate how this closing/reopening will be handled: City of Palm Springs to handle (cost to be specified) Event to handle per CalTrans standards List street(s) requiring the posting of "No Parking" signs. Indicate days, dates, and times needed and | | If yes, | | |
| • Indicate how this closing/reopening will be handled: □ City of Palm Springs to handle (cost to be specified) □ List street(s) requiring the posting of "No Parking" signs. Indicate days, dates, and times needed and | • | Dismantle day/date: | Completion time: | AM/PM |
| City of Palm Springs to handle (cost to be specified) Event to handle per CalTrans standards List street(s) requiring the posting of "No Parking" signs. Indicate days, dates, and times needed and | • | ` ' ' | | |
| City of Palm Springs to handle (cost to be specified) Event to handle per CalTrans standards List street(s) requiring the posting of "No Parking" signs. Indicate days, dates, and times needed and | | | | |
| • List street(s) requiring the posting of "No Parking" signs. Indicate days, dates, and times needed and | • | Indicate how this closing/reopening will be handled: | | |
| | | ☐ City of Palm Springs to handle (cost to be specified) | Event to handle per CalTrans standards | |
| | • | | cate days, dates, and times needed and | |
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(NOTE: "No Parking" signs will be posted twenty-four (24) hours in advance of required days, dates and times. Cost for the posting of "No Parking" signs will be specified upon review of the application by City staff.)

FOOD CONCESSIONS OR PREPARATION

Food Facilities: Guidelines are provided by the County of Riverside's Department of Environmental

Health. These should enable you to plan food handling, preparation and distribution

in the most responsible and legal manner.

Health permits may be required by the County of Riverside if food or beverages are sold or given away during special events. Be sure to include your organization's IRS501C identification number to receive a nonprofit classification number by the county's Department of Environmental Health. Different permits, polices and procedures depend on your classification and the number of days in your event. County of Riverside, Environmental Health may be contacted at (760) 320-1048 or www.rivcoeh.org.

ALCOHOL

The sale or furnishing of alcoholic beverages by nonprofit organizations will require an additional permit from the State Department of Alcoholic Beverage Control (ABC). The permittee must obtain and take a Letter of Authorization from the City to the ABC before it will issue an ABC permit. (This requirement may not be applicable in all cases, so please consult with your City permit liaison official.) ABC may be contacted at (760) 324-2027.

In many areas of the City, the public consumption of alcohol is illegal. *The Special Event Permit* from the City will likely prohibit the consumption of alcohol in the event venue outside of a controlled, clearly-designed containment area.

CONCESSIONS

The Special Event Permit can allow you exclusive control and regulation of any concessionaires to be present in conjunction with your event if it takes place on City streets or in City facilities. You will want to provide a plan for regulation and controlling such concessionaires. Park regulations may vary, so contact the City's Special Event Liaison for specific information. These regulations will be discussed with you upon receipt of your application.



| • | runani a anagram (araning mast so to sound), short mg and order may be a sound | | | | |
|--------------------------|--|--|--|--|--|
| | indicate the site for these on your diagram. A Alcoholic and nonalcoholic concession and/or beer garden areas | | | | |
| | A Alcoholic and nonalcoholic concession and/or beer garden areas B First-aid facilities and ambulance locations | | | | |
| | C Tables and chairs | | | | |
| | D Fencing, barriers and/or barricades | | | | |
| | E Generator locations and/or source of electricity | | | | |
| | F Canopies or tent locations | | | | |
| | G Booths, exhibits, displays or enclosures | | | | |
| | H Scaffolding, bleachers, platforms, stages, grandstands and related structures | | | | |
| Vehicles and/or trailers | | | | | |
| | J Other related event components not covered above (describe separately) | | | | |
| | K Trash containers and dumpsters | | | | |
| | L Non-food vendor locations | | | | |
| | M Food concession and/or food preparation areas | | | | |
| | N Potable toilet location(s) | | | | |
| | | | | | |
| • | Please describe how food will be served at the event: | | | | |
| | | | | | |
| • | Will food be cooked in the event area? \square Yes \square No If yes, | | | | |
| • | Specify method: Gas Electric Charcoal Other (specify): | | | | |
| • | Does the event involve the sale or use of alcoholic beverages? \square Yes \square No If yes, | | | | |
| • | Please describe: | | | | |
| • | If alcohol is to be sold, how will the alcohol sales be regulated? | | | | |
| • | Who will be handling the alcohol sales? | | | | |
| • | Will there be items or services sold at the event? \square Yes \square No If yes, | | | | |
| • | Please describe: | | | | |
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| • | Do the vendors have City of Palm Springs business licenses? | | | | |
| • | Are any of the proposed vendors current "VillageFest" vendors? | | | | |

(NOTE: "VillageFest" permit does not constitute a City business license.)

TOILET FACILITIES, SANITATION AND RECYCLING

The Riverside County Department of Health Services recommends one (1) chemical toilet for every two hundred fifty (250) people or portion thereof. This figure is based upon the maximum number at your event during peak time. The total number of toilets will be determined on a case-by-case basis.

You must properly dispose of waste and garbage throughout the term of your event, and the area must be returned to a clean condition immediately upon conclusion of the event. It you, as the Event Organizer, set a standard of leaving it better than you found it, you can have a highly beneficial impact on the Palm Springs community. Should you fail to perform adequate cleanup or damage occurs to City property and facilities, you will be billed at full cost recovery rates plus overhead for cleanup and repair. In addition, such failure may result in denial of future approval for a Special Events Permit or the requirement of a cash deposit or surety bond for future events. (Authorized placement locations for portable toilets and trash receptacles will be determined by the City for each event.)

State law requires Palm Springs to recycle fifty percent (50%) of the waste. Recyclables generated at your event (i.e., aluminum cans, glass, cardboard, etc.) need to be recycled. Several organizations provide collection of recyclables at special events. For more information or assistance, please contact the City's Office of Sustainability at (760) 323-8214.



| ortable and/or permanent toilet facilities: | |
|---|--|
| Number of portable toilets: | (Recommended: 1 for every 250 people or portion thereof) |
| Number of ADA-accessible toilets: | (Recommended: 10% of total portable toilets) |
| he immediate area of the site, the above is ı | the availability of both accessible and non-accessible toilet facilities in required. Portable toilet facilities must be in place twenty-four (24) hours ag the event, and must be removed by 8:00 a.m. next business day following must be pre-approved prior to installation.) |
| Number of trash receptacles: | |
| Number of dumpsters with lids: | (Recommended: 1 per 400 people) |
| Number of recycling containers: | (Voluntary) |
| Describe the plan for cleanup and removal of | f waste and garbage during and after the event. |
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(NOTE: It is the event organizer's responsibility to dispose of waste and garbage daily throughout the term of the event, unless otherwise contracted with City staff, which will require a fee. Immediately upon conclusion of the event, the venue must be returned to a clean condition. Street sweeping can be arranged with City crews for an additional fee.)

RESTROOM FACILITY DETAILS

Some events will require the presence of portable restrooms and/or hand-washing stations. Use of these items may require the Event Organizer to meet ADA regulations. Please indicate location(s) on your Site Palm/Map. Will Event Organizer provide portable restroom facilities? \square Yes \square No If yes, please provide the following information. Please also indicate location(s) on Site Plan/Map. Company (name): ___ Contact (name): Mailing address: STATE Physical address: IF DIFFERENT STREET STATE ZIP Primary phone number: _____ Cell phone number: _____ Fax number: Email address: **WASTE REMOVAL DETAILS** Event Organizer is responsible for arranging for the removal of all waste related to the event. This includes but is not limited to emptying of trash bins and the removal of waste from the event site and other affected areas. A copy of the sanitation company's Business Tax Certificate must be attached to Permit Application. If <u>not</u> hiring a professional sanitation company, please provide the following information for the person(s) responsible for waste removal. Contact name & title: Primary phone number: _____ Cell phone number: _____ Email address:___ If hiring a professional sanitation company, please provide the following information. Company (name): _____ Contact name: Mailing address: STREET CITY STATE Physical address: IF DIFFERENT STREET CITY STATE Primary phone number: _____ Cell phone number:_____ Email address:___

Parking Plan – Shuttle Plan – Mitigation of Impact

If an event involves closing a street for three (3) hours or more, the organizer will be required to provide temporary disabled parking outside the closed venue area. One (1) space will be required for each block closed plus an additional space must be provided for each permanent disabled parking space displaced. For specific disabled parking requirements, contact the Palm Springs Police Department's Special Events Unit.

In some situations when sufficient parking is not available, the event organizer may be required to provide a shuttle plan.

You are required to include mitigation measures for negative consequences imposed on others by your event. We require that notices be sent or hand delivered two (2) weeks before each special event to businesses, residences, churches, etc. It would be helpful for you to get signatures in support of your event from those affected, which will help show cooperation for the continuation of such events. Mitigation may include a notice in local community newsletters, flyers in business windows, local press releases, including radio and television, and social media postings. Notices must reflect the date(s), day(s), time(s), location(s) and types of activities taking place during your event. The notice must give detour or alternate route information if normal access is affected or if transportation systems are impacted. Please attach a draft sample of the notice and a proposed list of recipients with your application.

Provide copies of notices that have been approved by SunLine Transit and others as appropriate. If your event impacts City lessees, provide a signed letter of acknowledgment from all affected lessees.

You may be required by the City's Traffic Division to provide advisory signs, placed a minimum of two (2) weeks prior to the event, if your event impacts a major-use roadway. Advisory signs are intended to provide advanced notice to the regular users of a roadway of the scheduled closure.

* Any event taking place on a State Highway will require a separate permit from CALTRANS.

ACCESSIBILITY PLAN

"Accessible" describes a site, building, facility or portion thereof that can be approached, entered and used by persons with disabilities.

It is the Applicant's responsibility to comply with all city, county, state and federal disability access requirements that are applicable to the event.

All indoor and outdoor sites for special events must be accessible to persons with disabilities. If a portion of the area is inaccessible, an alternate area must be provided with the same activities that are in the inaccessible area. If cannot, however, be offered only to patrons with disabilities.

Disabled access may include parking, restrooms, telephones, clear paths of travel, transportation, accessible vendors and booths. If all areas are not accessible, a map or program must be provided to attendees, indicating the accessible restrooms, parking, phones, drinking fountains, etc.

MOVING ROUTE - FIXED VENUE - LAYOUT MAPS

It is recommended that these maps be put on standard 8.5"x11" paper. If larger sized paper is necessary to accommodate the map or diagram, this is acceptable.

Parking Plan – Shuttle Plan – Mitigation of Impact

* PROVIDE A MAP WITH ROUTE AND/OR IMPACTED AREA

All site pans/maps must be submitted using 8 $\frac{1}{2}$ " x 11" or 8 $\frac{1}{2}$ " x 14" white paper. All applicants are required to submit a detailed Site Plan/Map.

Site plan/maps must include a directional sign showing N-S-E and W. Site plan/maps must also include a key showing the use of symbols for people, vehicles, first aid station(s), cooking station(s), food tables, stage(s), platform(s), barricades, etc.

If using a Computer Assisted Generation (CAG) for the site plan/map please ensure the use of Arial Fonts no smaller than size 10.



Parking Plan – Shuttle Plan – Mitigation of Impact

| escribe plan | to notify those residents, businesses, churches, etc., that will be impacted by this event. |
|----------------|--|
| | |
| | |
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| | |
| yes, | |
| ighlight your | proposed route on the enclosed map, indicating the direction of travel, and provide a written narrative to oute and its impact. |
| ighlight your | |
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• Highlight the site on the enclosed map, showing all the streets impacted by the event.

Safety – Security – Emergency Services

CROWD CONTROL AND INTERNAL SECURITY

Event organizers are required to provide a safe and secure environment for their event. This is accomplished through sound pre-planning by anticipating potential problems and concerns. The size, type, time of day, and location of the event, as well as the overall activities, are all areas that need to be analyzed in depth. Events having the potential to draw a large crowd, such as street fairs or concerts, are of particular concern. Most events require the services of a professional licensed security company. A representative of this company, commonly known as a security consultant, will work closely with you to review and analyze your proposed event. The security consultant will determine points of concern and anticipate potential problems. The consultant will make recommendations to rectify the concerns and/or problems and, when appropriate, recommend the number of private security guards needed. The Palm Springs Police Department may require a minimum number of licensed private security guards and police officers to adequately staff the event.



Safety – Security – Emergency Services

| Priv | Private Security: | | | | | |
|------|--|--|--|--|--|--|
| • | Is there a professional security organization hired to handle security arrangements for this event? \Box Yes \Box No If yes, | | | | | |
| • | Please list: | | | | | |
| • | Security company: | | | | | |
| • | Security company's address: | | | | | |
| | STREET | | | | | |
| | CITY STATE ZIP | | | | | |
| • | Security director (name): | | | | | |
| • | Security director's phone number: | | | | | |
| • | Security company's state license number: | | | | | |
| • | Interior venue (private security): | | | | | |
| • | On-site contact person (security supervisor): | | | | | |
| • | Any searches prior to entering? | | | | | |
| • | Bottle and can check? | | | | | |
| • | Metal detectors? Yes No | | | | | |
| • | Now many security guards at each entrance? | | | | | |
| • | Number of identifiable security guards inside the venue: | | | | | |
| Par | king Lot Patrol (private security): | | | | | |
| • | Security company: | | | | | |
| • | Contact person (security supervisor): | | | | | |
| • | Number of security guards patrolling the parking lot: | | | | | |
| Ligl | hting | | | | | |
| • | If this is an evening event, please state how the event and surrounding areas will be illuminated to ensure the safety of the participants and spectators. (If required, show a separate site map which details street lights, portable lights, and other illuminating devices.) | | | | | |
| Me | dical | | | | | |
| • | Indicate what arrangements have been made for providing first-aid staffing: | | | | | |

Emergency Services

MEDICAL PLAN

All events are required to have a First Aid Station on-site. Please indicate the location on the Site Plan/Map.

- If necessary, in the case of an emergency, the On-Site Contact will call 9-1-1.
- Event Organizer will provide an ambulance company to be on site.
- Event Organizer will provide a medical doctor, registered nurse, and/or EMT Staff to be on-site.

If providing an ambulance company, please provide the following information and attach copies of their Business Tax Certificate, Liability Insurance Certificate and California State License.

| • | Company (name): | | |
|---|-----------------------|---|---------------------------|
| • | Contact (name): | | |
| • | Mailing address: | | |
| | _ | STREET | |
| | CITY | STATE | ZIP |
| • | Physical address: | | |
| | IF DIFFERENT | STREET | |
| | CITY | STATE | ZIP |
| • | Primary phone number: | Cell phone number: | |
| • | Fax number: | Email address: | |
| | edentials. | Staff, please provide the following information and attach a co | ppy or aren racrianeation |
| • | Contact (name): | | |
| | Mailing address: | | |
| | Maning address. | STREET | |
| | CITY | STATE | ZIP |
| • | Physical address: | | |
| | IF DIFFERENT | STREET | |
| | СІТУ | STATE | ZIP |
| • | Primary phone number: | Cell phone number: | |
| | Fay number | Email addross: | |

Entertainment – Attractions – Related Event Activities

Event organizers must be certain that all event activities comply with local laws applicable to noise abatement. Please be aware that loud and unreasonable noise (including music) is a violation of state law. A police officer who determines that noise from you event is offensive to others may require you to stop the noise. Also, the police may order musical entertainment to end if it incites a crowd to become unruly and risks injury.

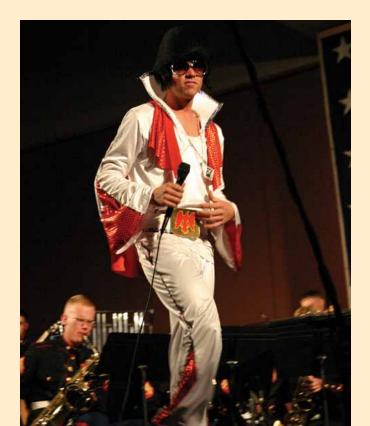
Banners, pennants, flags, signs, streamers, inflatable displays and similar devices are regulated by local ordinance. The number and location for these items will be determined by the City. In certain areas and under certain conditions, these items are prohibited. Please contact our office for specific applications.

FIRE DEPARTMENT REQUIREMENTS

The Palm Springs Fire Department must review and approve the following: your plans for first-aid and/or emergency medical services; your route for emergency vehicle access; parade floats use of an open flame, use of fireworks or pyrotechnics; handling of vehicle fuel; cooking facilities; the location of power sources; the availability and location of on-site fire suppression equipment; the occupancy and spacing of tables or enclosures; and the use of tent, air-supported structures, canopies or any fabric shelters. The Fire Department may require an inspection at your cost before and/or during the event. For more information or assistance, please contact the City's Fire Prevention Division at (760) 322-8364, Ext. 8605. These plans will be reviewed with you upon receipt of your application.

BUILDING PERMITS

Review by the City's Building & Safety Division may be required before your event. You will be notified if your event requires a review, depending on the components of your event.





Entertainment – Attractions – Related Event Activities

| • | Are there any musical entertainment features related to your event? \square Yes \square No If yes, | | | | |
|---|--|----------------------|-----|-------|--|
| • | Name of act: | | | | |
| • | Contact person's name: | Phone number: (|) | | |
| | Contact person's address: | | | | |
| | s | TREET | | | |
| | СПҮ | STATE | ZIF |) | |
| • | How many stages? | Number of bands? | | | |
| • | What is the type of music? | | | | |
| • | Will sound amplification be used? \square Yes \square No | | | | |
| | If yes, Start time:AM/PM | F <u>inish time:</u> | | AM/PM | |
| | Will sound checks be conducted prior to the event? \square Yes \square No | | | | |
| | If yes, Start time:AM/PM | F <u>inish time:</u> | | AM/PM | |
| • | Describe the sound equipment that will be used: | | | | |
| • | Will any inflatable, hot air balloons or similar devices be used? | s 🗌 No | | | |
| | If yes, please describe: | | | | |
| • | Has the FAA been advised? \square Yes \square No | | | | |
| | Will fireworks, rockets or other pyrotechnics be used? \square Yes \square No | | | | |
| | If yes, pyrotechnic company name: | | | | |
| | pyrotechnic phone number: (| | | | |
| • | Describe (indicate dates, times and locations for launching and fallout | areas): | | | |
| | | | | | |
| | | | | | |
| • | Has a permit been issued? | | | | |
| • | Will there be any type of open flames used (i.e., bonfires, etc.)? \square Y | es 🗌 No | | | |
| | If yes, describe: | | | | |
| • | Has a permit been issued? | | | | |
| • | Will any signs, banners, decorations or special lighting be used? \Box Y | ′es 🔲 No | | | |
| | If yes, describe: | | | | |
| • | Will any lasers be used? \square Yes \square No | | | | |
| | If yes, have you obtained a variance letter for operation? | l _{No} | | | |

(NOTE: Additional permits may be required as indicated by staff. These include, but are not limited to, Conditional Use Permit, Land Use Permit, and Fire Department permits.)
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Insurance Requirements

Insurance requirements depend upon the risk level of the event. If your event will include alcohol, liquor liability coverage must be included on your certificates of insurance.

Before final permit approval, you will need commercial general liability insurance that names as an additional insured: "the City of Palm Springs, its officers, employees and agents" and any other public entities (i.e., county, CalTrans, etc.) impacted by this event. The endorsement page must be included. Auto liability, workers compensation insurance and waivers of subrogation may be required. Insurance coverage must be maintained for the duration of the event. To determine the necessary amount of coverage required, please contact the City's Risk Management office at (760) 323-8276.

INSURANCE

HOLD HARMLESS

The Applicant will, at its sole expense, provide the City with evidence of insurance for general liability and Worker's Compensation benefits for accidents or injuries which occur or are sustained in the course of carrying out this contract. The Applicant agrees to indemnify, defend and save City harmless from any and all liability, claims, damages or injuries to any person, including injury to Applicant's employees, and all claims which arise from or are connected with the negligent performance of or failure to perform work or other obligations of this contract, or are caused or claim to be caused by the negligent acts of the City, its agents or employees, and all expenses of investigating and defending against same.

| • | Name of Applicant (PRINT): | |
|---|----------------------------|-------|
| • | | Date: |
| | SIGNATURE OF APPLICANT | |

Affidavit of Applicant

The Applicant and, if applicable, the Professional Organizer must complete, sign and date the application before returning it to the Palm Springs Special Events Coordinator at 401 S. Pavilion Way, Palm Springs, CA 92262. Please be certain to include all required attachments before submitting your Special Event Permit Application.

ADVANCED CANCELLATION NOTICE REQUIRED

If this event is cancelled, notify the Special Events Coordinator at (760) 323-8276.

I certify that the information contained in the foregoing application is true and correct to the best of my knowledge and belief, that I have read, understand and a free to abide by the rules and regulations governing the special event under Palm Springs Municipal Code, and that I understand that this application is made subject to the rules and regulations established by the City Council and/or the City Manager or the City Manager's designee. I agree to comply with all other requirements of the city, county, state and federal governments and any other applicable entity which may pertain to the use of the event premises and the conduct of the event. I agree to abide by these rules and further certify that I, on behalf of the organization, am also authorized to commit that organization and, therefore, agree to be financially responsible for any cost and fees that may be incurred by or on behalf of the event to the City of Palm Springs.

| • | Name of Applicant (PRINT): | |
|---|--|-------|
| • | Title: | |
| • | SIGNATURE OF APPLICANT/SPONSORING ORGANIZATION | Date: |
| • | | Date: |

SIGNATURE OF PROFESSIONAL EVENT ORGANIZER



Thank you for choosing the City of Palm Springs as the location for your event!





City of Palm Springs

Special Events Division 401 S. Pavilion Way Palm Springs, CA 92262

(760) 323-8276