# CITY OF SHERWOOD

## Special Event Permit

(For Use of Public Property or in City Right-of-Way)

## Application Packet and Guidelines

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*Please refer to the Special Event Resource Guide and Special Athletic Guide for more detailed information.*

## INSTRUCTIONS FOR COMPLETING THE SPECIAL EVENT PERMIT APPLICATION

Careful completion of the form will help to avoid delays in processing. It is important to follow the instructions and provide clear and accurate information. Submit all necessary documents with the application.

1. **Review the *Special Event Resource Guide/Athletic Guide***
2. Complete Special Event Permit Application (see Application Checklist)
3. Obtain a Certificate of Insurance from your insurer. The Certificate must:
   a) List the name and date(s) of the event
   b) State the limits of liability are as follows:
   General Liability of $2,000,000 for death or bodily injury and property damage;
   Personal of $2,000,000
   Per Occurrence of $2,000,000
   Fire Insurance of $50,000
   c) Name the City of Sherwood, its Elected and Appointed Officials, Officers, Agents, Employees, and Volunteers as Additional Insured. If event occurs at a Sherwood School District field, gym or track, the Certificate of Insurance and Endorsement must name the City of Sherwood and the Sherwood School District as additionally insured.

**THE CITY WILL NOT ACCEPT ANY CERTIFICATE OF INSURANCE WITHOUT THE ADDITIONAL INSURED LANGUAGE.**

4. Submit **completed** Special Event Permit Application, all additional required materials, and the event application fee **at least 45 days** prior to the event to:

City of Sherwood Community Services Department
ATTN: Mary Weggeland
22689 SW Pine Street
Sherwood, OR 97140
Phone (503) 625-4207

**Please make a copy of all submitted materials for your records**

**INCOMPLETE APPLICATIONS WILL BE RETURNED TO THE APPLICANT FOR COMPLETION AND A NEW 45 DAY TIMELINE BEGINS ONCE IT IS RESUBMITTED. All APPLICATIONS MUST BE COMPLETE AND SUPPORTING DOCUMENTS MUST BE RECEIVED AT LEAST FOURTEEN (14) DAYs PRIOR TO THE SPECIAL EVENT. APPLICANTS MAY BE CHARGED FOR EXTRA TIME SPENT ON FOLLOW-UPS FOR INCOMPLETE OR INADEQUATE INSURANCE SUBMISSIONS.**

After submitting all forms, your application will be sent to all departments that will be involved in providing services or permits for the event. You will be notified if the event has been approved. Do not assume that all aspects of the event will be approved; you may be asked to make some changes to your plan based on the availability of services and scheduling of other events. Therefore, you are encouraged not to make any other arrangements for your event until approval from the City has been received.

## APPLICATION CHECKLIST

To apply for a Special Event Permit, please complete and submit the following **at least 45 days in advance of your scheduled event date. All supporting documents must be received within 14 days of the event.** Please see review the Special Event Resource Guide for more information on these materials.

**The following sections MUST be completed by the event coordinator for ALL EVENTS:**

- ❒ General Event Information and Event Details
- ❒ Attached Site Plan
- ❒ Attached Sanitation Plan
- ❒ Certificate of Liability Insurance
- ❒ **All applications must be signed and dated**
- ❒ **If this event is an athletic event, parade, requires a street closure, exceeds parking capacity, or requires crowd control or security the application MUST include:**
  - ❒ Attached Traffic Control Plan/Athletic Event Plan
  - ❒ Event Street and Sidewalk Use Section
- ❒ **If this event is requesting a street closure the application must have an:**
  - ❒ Attached Property Owner Notification form
- ❒ **If this event is required to obtain a Noise Ordinance Variance the application must have an:**
  - ❒ Attached map showing the exact location of the sound origin and the surrounding areas
  - ❒ Attached Property Owner Notification form
  - ❒ Attached list of addresses notified
- ❒ **Some events may require an:**
  - ❒ Attached Security Plan

**Other City of Sherwood permits, licenses, fees and requests that may apply and are available online at** *www.sherwoodoregon.gov/special-event-permit:*

- ❒ *City of Sherwood Park Reservation Form* – Public Works Department (503) 625-5722
- ❒ *City of Sherwood Facility Use Agreement* for Snyder Park Fields – Recreation Coordinator (503) 925-2332
- ❒ *OLCC Temporary Sales License (TSL) Permit* – If alcohol use is planned in the public right-of-way for any event, submit all Oregon Liquor Control Commission (OLCC) permits with your application. The City of Sherwood (local government as stated on the application) will process the first portion and then contact you to take the City approved application to OLCC (503) 872-5000. Police Department

**Other agency permits that may apply (please submit these to the appropriate agencies):**

- ❒ TVF&R Tent and Canopy Permit – Tents and canopies in excess of 10,000 sq. ft. require a permit. For more information call (503) 259-1419.
- ❒ Washington County Temporary Road Closure Permit – for closure of any county road associated with an event. For more information call (503) 846-7950
- ❒ Washington County Temporary Restaurant License & Food Handler Certificate – for any food service establishment which operates at the same location in conjunction with a fair, carnival, or similar public event. For more information call (503) 846-8722 or visit www.co.washington.or.us

City of Sherwood

# Special Event Permit Application

| | | |
|---|---|---|
| **APPLICATION FEE** | DATE RCV'D _____ ❒ON TIME ❒LATE ($50) ❒COMPLETE ❒INCOMPLETE | |
| | ❒NON-PROFIT RESIDENT* $75 | ❒ NON-PROFIT NON-RESIDENT $125 |
| | ❒FOR-PROFIT RESIDENT* $150 | ❒ FOR-PROFIT NON-RESIDENT $200 |

**Residents are defined as the **sponsoring organization whose official address is in the Sherwood City Limits.** Event coordinators who live in Sherwood and are representing organizations outside of Sherwood City Limits do not qualify for resident status.*

**THIS FORM MUST BE COMPLETED IN FULL & SUBMITTED 45 DAYS PRIOR TO THE EVENT. FORMS SUBMITTED AFTER 45 DAYS WILL SUBJECT TO A $50 LATE FEE.**

*Please type or print legibly. Incomplete applications will not be processed. Submit the completed application with all of the applicable items on the materials checklist. Applicants are encouraged to use Sherwood maps or another electronic mapping tool for the plan.*

## GENERAL EVENT INFORMATION

Event Type (check ***all*** that apply)

- ❒ Concert/Performance
- ❒ Wedding
- ❒ Party/Reception
- ❒ Festival
- ❒ Fair
- ❒ Car Show
- ❒ Farmers/Street Market
- ❒ Other _____
- ❒ 5K
- ❒ 10K
- ❒ Half Marathon
- ❒ Walk
- ❒ Bike Ride/Race
- ❒ Parade/Procession
- ❒ Street Closure
- ❒ One Day Event
- ❒ Multiple Day Event
- ❒ Small Community Event (100-500 people)
- ❒ Large Community Event (500+ people)

| | |
|---|---|
| Name of Event | New event? ❒ Return Event? ❒<br>Route/Plan change? ❒ Yes ❒ No |
| Exact Address of Event | |
| Event Date(s) | Total Number of Consecutive Days |

| | | |
|---|---|---|
| Hours of Event<br>to | Step-off Time *(For athletic events only)* | |
| Set Up/Assembly Date and Time | Break Down Date and Time | |
| Phone Number/Website for Public Information | Estimated Attendance *(participants & spectators)*<br># /day | Last year's Actual Attendance *(If applicable)* |
| Describe the Event's Community and/or Cultural Benefit | | |
| Name of Sponsoring Organization | Contact Person from Sponsoring Organization | |

| | | |
|---|---|---|
| Sponsoring Organization's Physical Address | City | Zip |
| Sponsoring Organization Type<br>❒ Individual ❒ Commercial ❒ Govt. ❒Non-Profit | Tax ID Number (501 (c) 3/Federal Employee ID or Social Security #) | |

## GENERAL EVENT INFORMATION (Continued)

| | | |
|---|---|---|
| Name of Organizer/Coordinator (Responsible Party) | Email Address | |
| Phone Number | Cell Number | FAX Number |
| Responsible Person "onsite" Day of Event<br>***The person listed above must be in attendance for the duration of the event and immediately available to City officials.*** | Cell Number Day of Event | |
| Professional Organizer or Event Planner Hired By You to Produce this Event – Name/Company | | |
| Professional Organizer Address | City | Zip |
| Phone | Email | |

| | | | |
|---|---|---|---|
| Are you serving/selling food at your Event? | ❒ No | ❒ Yes | If yes, how many vendors? _____ ❒ Served ❒ Sold<br>*If yes, contact Washington County for Temporary Restaurant License* |
| Are you serving/selling alcohol at your Event? | ❒ No | ❒ Yes | If yes, how many vendors? _____ ❒ Served ❒ Sold<br>*If yes, you must submit an OLCC TSL Application with the Special Event Permit Application* |
| Are you selling merchandise at your Event? | ❒ No | ❒ Yes | If yes, how many vendors? _____ |
| Are you erecting a tent over 10,000 square feet? | ❒ No | ❒ Yes | *If yes, contact Tualatin Valley Fire and Rescue for a Tent and Canopy Permit* |
| Is your event a parade/procession, athletic event or require a street closure? | ❒ No | ❒ Yes | *If yes, you must complete the Event Street & Sidewalk Use Section <u>and</u> attach a Traffic Control Plan. Please refer to the Special Event Resource Guide for More Information.* |
| Will there be sound amplification? | ❒ No | ❒ Yes | If yes, you must complete the Noise Variance Application with the *Special Event Permit Application and include the origin of the sound on the required Site Plan. After review by the City Manager you may be required to notify the public within 400ft.* |
| Will your event require electricity/generators? | ❒ No | ❒ Yes | *If yes, include generator locations, source of electricity, and all electrical needs on the required Site Plan* |
| Are you interested in posting temporary signs in the City right-of-way to promote your event? | ❒ No | ❒ Yes | *If yes, review the Temporary Portable Sign Regulations on the City's website.* |
| Has the event already been publicized or are the promotional materials created? | ❒ No | ❒ Yes | *If yes, include a copy of flyer/signs/mailing or description of efforts* |
| Are you planning on requesting space on the City of Sherwood Reader Board or Old Town Monuments? | ❒ No | ❒ Yes | *If yes, include the Reader Board and/or Old Town Request Forms with this application* |

## EVENT DETAILS

### SECURITY/SAFETY

Are you requesting Sherwood police services at intersections and/or for crowd control? ❒ Yes ❒ No

***THE EVENT HOLDER SHALL BE LIABLE FOR THE COST OF POLICE ASSISTANCE***

❒ The rate for Police services is $100 per officer/per hour **# of officers** _____ **# of hours** _____ **Total** _____

Will you be hiring security personnel? ❒ Yes ❒ No
If yes, list company name _____

Please describe your procedures for crowd control and internal security.
*(attach additional sheets as needed)*

### VOLUNTEERS

How many volunteers are working the event? _____
*If this is a Public Safety Run/Walk/Bike event, please refer to the Traffic Control/Special Athletic Plan.*

What will the volunteers wear to identify themselves as volunteers?

### CONSENT AND LIABILITY

I, THE UNDERSIGNED, ACKNOWLEDGE AND UNDERSTAND THAT I AM RESPONSIBLE TO COMPLY WITH THE INFORMATION, RESTRICTIONS AND CONDITIONS OF THE PERMIT WHEN ISSUED. I HEREBY ACKNOWLEDGE RESPONSIBILITY FOR PENALTIES ASSOCIATED WITH NON-COMPLIANCE WITH THE PERMIT CONDITIONS, WHETHER OR NOT I AM PRESENT AT THE TIME OF THE VIOLATION**.** _____ **(INITIALS)**

I hereby certify the foregoing statements to be true and correct, and agree to defend, indemnify and hold harmless the City of Sherwood, its City Council, officers, agents, employees and volunteers from and against any and all loss, claims, damages, liability, such claim or suit arising from or in any manner connected to the requested activity. I also agree, if approved, to comply with all permit conditions, and understand that failure to comply with any condition, or any violation of law, may result in the immediate cancellation of the event, revocation of the permit, forfeiture of deposit, denial of future events, criminal prosecution and/or administrative citation (s), fines.

Print Your Name _____

Signature_____Date_____

Please submit your completed form and all additional required materials to:
City of Sherwood Community Services Department
ATTN: Event Coordinator
22689 SW Pine Street
Sherwood, OR 97140
Phone (503) 625-4207

**Please make a copy of all submitted materials for your records**

## SITE PLAN

To ensure proper review of your event, it is required that you attach a site plan. Based on your event site plan and components, the Fire Department may require an inspection of your venue at your cost before or during the event.

**INSTRUCTIONS:** A detailed narrative is required. A map may also be submitted, but will not serve as a substitute to the written narrative. Hand drawn maps will not be accepted for required plans. Sherwood maps are available at www.sherwoodoregon.gov. Other electronic mapping tools include Google Maps, PowerPoint files etc.

**Attach a Site Plan** with the following items clearly shown if applicable:

- ❒ An outline of the entire event venue, including the names of all streets or areas that are part of the venue
- ❒ Location of all platforms, scaffolding, bleachers, grandstands, canopies, tents, and other temporary structures
- ❒ Location and description of sound stages (height and size), description of amplified sound, sound checks (time and date), musical entertainment (number of performers, type of music)
- ❒ Detailed food vendors (FV), cooking area configurations, cooking methods (gas grills, propane etc.)
- ❒ Location and description of beverage vendors both non-alcoholic (NAB), alcoholic beverages/wine and beer gardens (AB) along with number of serving stations at each location
- ❒ Location of retail merchants/vendor booths (V)
- ❒ Location of large tents (200 sq. feet)
- ❒ Location of portable toilets (T)
- ❒ Location of hand washing sinks (HWS)
- ❒ Generator locations, source of electricity, and all requirements (E)
- ❒ Location of public entrances and exits
- ❒ Identification of all event components that meet accessibility standards (ADA)
- ❒ Location of fencing, barriers and/or barricades
- ❒ Location of fire lane (FL)
- ❒ Location of First Aid (+)
- ❒ Location of fire extinguishers (FE)
- ❒ Other related components not listed above (e.g. special equipment etc.)

**DO NOT FILL OUT THIS PAGE. THESE ARE GUIDELINES FOR CREATING A SITE PLAN.**

# Special Event Permit Application

## TRAFFIC CONTROL PLAN OR ATHLETIC EVENT PLAN

To ensure proper review of your event, it is required that you attach a traffic control plan. Events that involve full/partial closure or blockage of City streets (parades, street closures and athletic events) to control traffic flow must also complete an Event Street and Sidewalk Use.

**INSTRUCTIONS:** A detailed narrative is required. A map may also be submitted, but will not serve as a substitute to the written narrative. Hand drawn maps will not be accepted for required plans. Sherwood maps are available at www.sherwoodoregon.gov. Other electronic mapping tools include Google Maps, PowerPoint files etc.

**Attach a Traffic Control/Athletic Plan** with the following items clearly shown if applicable:

- ❒ Set-up/tear down times
- ❒ Staging, loading and assembly areas (all). Please use a Site Plan to show staging area details.
- ❒ All parking and shuttles
- ❒ Certified Flaggers/Course Marshals/Police and volunteer locations
- ❒ How the course(s) will be marked
- ❒ Location of fire lane (FL)
- ❒ Location of First Aid and/or medical personnel (+)
- ❒ Traffic flow. Description of how traffic will be directed
- ❒ Procedures for crowd control

**DO NOT FILL OUT THIS SECTION. THESE ARE GUIDELINES FOR CREATING A TRAFFIC CONTROL/ATHLETIC PLAN.**

## SANITATION PLAN

**INSTRUCTIONS:** Attach a Sanitation Plan with the following items clearly shown if applicable:

- ❒ Location of restrooms and hand washing units. If using existing City facilities, please include service schedule if required
- ❒ Location of garbage cans, dumpsters and recycling collection**
- ❒ If there will be food preparation, include provisions for disposing of cooking waste
- ❒ Post-event clean up, recycling plans and garbage disposal

**DO NOT FILL OUT THIS SECTION. THESE ARE GUIDELINES FOR CREATING A SANITATION PLAN.*****Event coordinators are required to provide garbage dumpsters specifically for their event. Use of existing garbage cans/dumpsters for local residents and business use is prohibited without permission.*

## AMPLIFIED NOISE *(Noise Ordinance Variance Application)*

Areas within 400 feet of the source of the involved sound:

❒ Residential ❒ Commercial ❒ Industrial

| **Date(s) and Time –** When the involved sound will be emitted | | |
|---|---|---|
| | Between (Start Time) | And (End time) |
| | Between (Start Time) | And (End Time) |
| | Between (Start Time) | And (End Time) |

What is the physical characteristic of the involved sound? (*i.e. live band, boom box, microphone, DJ, location of amplification)*
**(ALSO REQUIRED: Include the origin of the sound on the required Site Plan)**

Why is a variance being sought?

**PROCESS:** Within five business days of the submission of an application for a variance, the City Manager (or designee) will determine if the requested variance could have a substantial impact on the surrounding areas and require public notification. If such notification is required, the decision will not be made until ten business days after the completion of the public notice and required documents are submitted to the Event Coordinator. The City Manager must consider such factors as the potential impacts on businesses and noise sensitive properties within four-hundred feet, the time of day, the day of the week, the proposed type and amount of amplification, and any secondary noise consequences.

**NOTIFICATION DOCUMENT:** If the City Manager determines that the requested variance may have a substantial impact on the surrounding areas the required public notification document must include the following;

- ❒ The nature and substance of the variance being requested, including the provision(s) of this Ordinance from which the variance is being requested
- ❒ The location, date(s), and time(s) for which the variance is being requested
- ❒ The name of the event to which the variance relates, if applicable
- ❒ The name and contact information of the applicant
- ❒ The name and contact information for the City Manager *(Craig Sheldon, sheldonc@sherwoodoregon.gov)*
- ❒ A statement that all interested persons may file written comments on the application with the City Manager and stating a deadline for such comments which is ten business days after the date of the notice

**NOTIFICATION:** The applicant must;

- ❒ Post notice along the nearest public road at the boundaries of the property containing the sound source so that the notice is visible from the public road
- ❒ **Provide a copy of the notice to the City for publication on the City's website**
- ❒ Deliver written notice to the owner or occupant of each property that is located within three-hundred feet of the property line of the property containing the sound source
- ❒ **Provide a list to the City of the owner or occupant addresses to which the written notice was delivered**

City of Sherwood
**Special Event Permit Application**

## EVENT STREET AND SIDEWALK USE

**CLOSURE** NUMBER OF DAYS CLOSURE IS REQUESTED _____

**FEE** ❒NON-PROFIT RESIDENT $125/$400* ❒ NON-PROFIT NON-RESIDENT $150/$425*
❒FOR-PROFIT RESIDENT $175/$450* ❒FOR-PROFIT NON-RESIDENT $200/$475*
*PER BLOCK PER DAY/MORE THAN FOUR BLOCKS PER DAY

**INSTRUCTIONS:** Events that propose any street closures/blockages (rolling or hard closures) are required to fill out the Event Street and Sidewalk Use and submit a detailed traffic control plan. **This includes parades, processions and athletic events.** Street location:❒ Sidewalk Only ❒ Street Only ❒ Street, Sidewalk and Park

| **Street Use and/or Closure Information -** Name of streets to be impacted *(attach further closures on a separate sheet if needed)* | | |
|---|---|---|
| | Between (Address/Street) | And (Address/Street) |
| | Between (Address/Street) | And (Address/Street) |
| | Between (Address/Street) | And (Address/Street) |
| | Between (Address/Street) | And (Address/Street) |
| | Between (Address/Street) | And (Address/Street) |

Special event route (*i.e. held on sidewalk and/or street, changes to route, where and how you wish to travel)*
**(ALSO REQUIRED: a detailed map that includes the start point, end point, direction of travel, street names, and barricades)**

Are you requesting a complete or rolling street closure?

Why are you requesting this street closure? What activities will occur in the requested closed area?

| Time of Street Closure | Start: | End: |
|---|---|---|

Participant type and number of entries of each type *(check all that apply):*

❒ Participants/Spectators ____ ❒ Animals ____ ❒ Vehicles ____

❒ Floats ____ ❒Bands ____ ❒Bikes ____ ❒Other ____

Please list any additional activities occurring in the requested street closure.

Will the proposed route cross HWY 99? ❒ Yes ❒ No
*(If yes, be prepared to provide an alternative route)*

Will your proposed route cross and/or utilize streets where TriMet operates? ❒ Yes ❒ No

City of Sherwood

# Special Event Permit Application

## PROPERTY OWNER NOTIFICATION FORM - REQUIRED FOR "HARD" CLOSURES

*Applicants shall provide an application and a notification form signed by all residents/businesses within the area to be seriously impacted by any requested temporary street closure or any request which might have significant impact on area tenants. Failure to inform such tenants shall be cause for direct denial. If a house is vacant, indicate that on the notification form. If you event will have amplified sound it may require a Noise Ordinance Variance Permit, which also requires a separate notification form.*

Contact Person _____

Phone number _____ Cell Phone _____

### STREET CLOSURES (NOT ATHLETIC EVENTS WITH ROLLING CLOSURES OR PARADES)

The Undersigned herby petition the City of Sherwood to close _____
(Street)

Between _____ and _____ for an event to be held on
(Street) (Street)

_____ from _____ until _____

By signing below, we abutting residents affected by the proposed closure, acknowledge notification of the above listed street closure.

| | NAME (Signature) | ADDRESS | PHONE |
|---|---|---|---|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
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| 25 | | | |

***You may attach additional sheets, if necessary***
***Do not submit this form until signatures are gathered***