

CITY OF TITUSVILLE

Special Event Application Form (rev 11/1/14)

This application is required of any group and/or event that requests use of a City of Titusville park and/or public right of way property under one or more of the following conditions. Please check all those that apply to the event:

- Public use of any facility/park/right of way within the city limits.
- Will exceed the stated capacity for any one facility.
- Use of an open area or public roadway.
- Generation of sound exceeding 80 decibels (i.e. fireworks, speech, music).
- Serving of food to the general public.
- Span the course of one or more days.

Special Events Process

The Process is as follows:

1. File the completed application at the Office of the City Manager in City Hall no later then sixty (60) days prior to event.
2. The City Manager will review and make recommendations, if any, within ten (10) days of application submission.
3. Final approval will be issued by the City Manager.

NAME OF EVENT: _____

EVENT DESCRIPTION

Has this event ever been held before? Yes No If Yes, When and Where?
Briefly describe the event:

ORGANIZATION / SPONSOR IDENTIFICATION

Organization Name		Phone no. ()	
Street address			
City	State	ZIP Code	
Email Address			

CONTACT PERSON (DAY OF THE EVENT)

Name	First	Last	Daytime Phone no. ()
Street address			Evening Phone no. ()
City	State	ZIP Code	
Email Address			

PARK AREA / RIGHT OF WAY TO BE USED	SPECIFIC AREAS TO BE USED	RAIN PLAN CONTINGENCY

SET UP	EVENT	CLEAN UP	PROJECTED PARTICIPATION
Date _____ Time _____	Date _____ Time _____	Date _____ Time _____	Minimum number of participants: _____ Maximum number of participants over the course of the event: _____ Maximum number of participants at one time: _____ Minimum number of motor vehicles: _____ Maximum number of vehicles: _____

CERTIFICATE OF INSURANCE REQUIREMENT**INSURANCE POLICY INFORMATION**

Prior to approval of your event, the submission of a Certificate of Insurance in the amount of \$1,000,000 naming the City of Titusville as "additional insured" is required.

Insurance Carrier: _____

Policy number: _____

LOCATION / EVENT SPECIFIC INFORMATION – please designate the areas listed below on the map provided

On the city map please provide the following information:

- | | |
|--|--|
| <input type="checkbox"/> Event Layout | <input type="checkbox"/> Parade Entrance and Exit Routes |
| <input type="checkbox"/> Locations/area to be closed | <input type="checkbox"/> Main Parking Area |
| <input type="checkbox"/> Overflow Parking | |
| <input type="checkbox"/> Road Closures Time of closure from _____ to _____ | |

(Please note that if the event involves a state roadway, a separate application is necessary as well as a certificate of liability insurance to be provided to the PA Department of Transportation)

Number and type of personnel that will act as parking attendants, event coordinators, security, first-aid/medical personnel. (Note: These individuals must be 18 years of age or older.)

SPECIAL ATTRACTIONS

Must comply with all local ordinances which are available on the City's website at www.cityoftitusvillepa.gov

Are any bus, truck, tractor-trailer or motor home type vehicles expected at the event? If yes, Does this event involve domestic or exotic animals?

Yes No If yes, explain:

Does this event have any special attraction of considerations such as: fireworks, balloon rides or other aerial exhibitions, heavy equipment, amusement rides, or large tents

Yes No If yes, explain:

SERVICES REQUIRED

All services may not be available in all locations and are subject to seasonal closing. Please check the following services your event requires:

<input type="checkbox"/> Water	<input type="checkbox"/> Electric Type of service: _____	<input type="checkbox"/> Restrooms	<input type="checkbox"/> Safety vests _____	* Indicate the number of items your event requires. * Indicate on the map where barrels and tables are to be delivered.
<input type="checkbox"/> Drinking Water			<input type="checkbox"/> Cones _____	
<input type="checkbox"/> Spigot	<input type="checkbox"/> Picnic tables _____			
<input type="checkbox"/> Hydrant	<input type="checkbox"/> Traffic flags _____			
	<input type="checkbox"/> Trash barrels _____			
	<input type="checkbox"/> Barricades _____			

CITY DEPARTMENT SERVICE FEES

Please note that if additional hours are required by City of Titusville personnel (Police, Fire, Public Works etc...) applicant is subject to those fees.

CERTIFICATION STATEMENT / EVENT APPROVAL

I hereby certify that I am authorized to represent the organization noted on this application. I also certify that all information provided on this application is, to the best of my knowledge, truthful and accurate, and that my organization shall be liable for any consequential damages, including the City of Titusville incurrance of any costs and attorney's fee, resulting from misrepresentation or fraudulent information on this application, or in any other written communication with the City of Titusville.

Furthermore, the City of Titusville reserves the right to revoke or amend any issued permits, contracts, or letters of agreement, and to increase any assessed fees for City services and equipment, with the organization in the event the services to be provided, coordinated, or sub-contracted by the organization as stated in this application are reduced or eliminated. The undersigned organization assumes all responsibility for damage to or destruction of City property that occurs during the sponsored event.

Applicant Signature _____ Date _____

City Manager Approval _____ Date _____