

# CITY OF TITUSVILLE

## Special Event Application Form (rev 8/25/2020)

**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. This application does not guarantee a reservation. 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.
- Serving and/or sale of alcoholic beverages.
- Span the course of one or more days.

### Special Events Process

1. File the completed application at the Office of the City Manager in City Hall no later than 2 weeks prior to event.
2. The application will be added on to the next available City Council Work Session for presentation by the requestor and/or discussion.
3. Final approval will be issued by City Council at the next scheduled vote meeting.

**ALL LOADING/UNLOADING IS TO BE FROM THE STREET ONLY. NO MOTOR VEHICLES ARE PERMITTED TO DRIVE OR PARK IN ANY PUBLIC PARK IN AREAS NOT SPECIFICALLY DESIGNATED FOR PARKING.**

**Illegally parked vehicles are prohibited and such vehicles will be removed by the City at the owner's expense and any vehicle violating this ordinance will be subject to citation by the police. Emergency, police enforcement, and City light utility vehicles are excluded from this restriction.**

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

**PARK AREA / RIGHT OF WAY  
TO BE USED**

**SPECIFIC AREAS TO BE USED**

**RAIN PLAN CONTINGENCY**

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**SET UP**

**EVENT**

**CLEAN UP**

**PROJECTED PARTICIPATION**

Date _____	Date _____	Date _____	Minimum number of participants: _____
Time _____	Time _____	Time _____	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**

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 POLICY INFORMATION**

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](http://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:

- Water  
 Drinking Water  
 Spigot  
 Hydrant

Electric  
 Type of service:

Restrooms

- Safety vests \_\_\_\_\_  
 Cones \_\_\_\_\_  
 Picnic tables \_\_\_\_\_  
 Traffic flags \_\_\_\_\_  
 Trash barrels \_\_\_\_\_  
 Barricades \_\_\_\_\_

\* Indicate the number of items your event requires.

\* Indicate on the map where barrels and tables are to be delivered.

**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 incurrence 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 Council Approval** \_\_\_\_\_ Date \_\_\_\_\_

Special Event Name : \_\_\_\_\_

Please use this map to indicate requested road closures, event layout, entrance and exit routes, main parking area, and overflow parking. Indicate on the map where barrels and tables are to be delivered.

**NOTE:** To prevent a delay of your application, include the completed map with your completed special event/parade application form.

