

Special Event Application

<u>Applicant Information</u>		Re-occurring Event: <input type="checkbox"/> Yes <input type="checkbox"/> No	
		If yes, changes from previous year(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Organization Name:			
Contact Name:		E-mail Address:	
Street Address:		City and Province:	Postal Code:
Business phone number:		Alternative phone number:	
On-Site Contact Name:		E-mail Address:	
Street Address:		City and Province:	Postal Code:
Cell phone number:		Alternate phone number:	

<u>Event Information</u>			
Event Name:		Event Date(s):	
Beneficiaries of event:		Are admission fees charged? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Location(s):		Site Map/Plan Attached (if applicable): Yes <input type="checkbox"/> No <input type="checkbox"/> <small>(Must be a clearly presented site plan and/or route map to scale)</small>	
Event Category: <input type="checkbox"/> Race/Walk/Cycling <input type="checkbox"/> Concert/Performance <input type="checkbox"/> Festival/Celebration <input type="checkbox"/> Block Party <input type="checkbox"/> Parade <input type="checkbox"/> Outdoor Market <input type="checkbox"/> Fundraiser/Charity <input type="checkbox"/> Other		Estimated Attendance: No. of Participants: No. of Spectators: No. of Staff: No. of Volunteers:	
Event/Purpose Description: (Please describe your event or attach a summary in letter format)			

Event Schedule (list times for each day):

Date:	Set Up Starts:	Event Start:	Event End:	Clean Up Ends:
Date:	Set Up Starts:	Event Start:	Event End:	Clean Up Ends:
Date:	Set Up Starts:	Event Start:	Event End:	Clean Up Ends:
Date:	Set Up Starts:	Event Start:	Event End:	Clean Up Ends:

Notification Plan

It is necessary that all residents and businesses not participating in your event are aware of the activity and are minimally impacted by it. Notice should include contact information, type, time and date of event. Notice should be given at least 2 weeks prior to event.

Written notification to be provided to all businesses and residents attached: Yes No

Traffic Control

(Events requiring road closures must be received at least 12 weeks prior to the event and will require the approval of a traffic safety and management plan, including a route map)

Have you attached your *approved Traffic Safety Plan, including marshaling information for street occupancy? Yes No
*Approval of your Traffic Safety Plan must be obtained from the Director of Operations and/or the Ministry of Transportation and Infrastructure prior to submission of application, if applicable.

Does your event require road closures or roadways and/or sidewalks blocked off? Yes No

Do you require assistance of Law Enforcement to manage traffic? If so, contact the RCMP directly. Yes No

Will *Certified Traffic Control Persons be utilized during your event? Yes No

Please describe your plan for emergency vehicle access to and during the event:

Parking

Please provide a brief description of how event parking will be coordinated:

Will a shuttle bus be used if parking is not available or contained with the available parking area? Yes No

Equipment /Activities

Use of Amplified Public Address System: <input type="checkbox"/> Yes <input type="checkbox"/> No	Access to electrical power source required: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Will generators be used: <input type="checkbox"/> Yes <input type="checkbox"/> No	Access to electrical power source required: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Will stage(s) be used: <input type="checkbox"/> Yes <input type="checkbox"/> No	Will portable fences be set up: <input type="checkbox"/> Yes <input type="checkbox"/> No
Will bleacher(s) be used: <input type="checkbox"/> Yes <input type="checkbox"/> No	Will portable toilets be set up: <input type="checkbox"/> Yes <input type="checkbox"/> No
Will tent(s) be used: <input type="checkbox"/> Yes <input type="checkbox"/> No	Will any other structures be used: <input type="checkbox"/> Yes <input type="checkbox"/> No
Will any goods or services be sold at event: <input type="checkbox"/> Yes <input type="checkbox"/> No	Will food/concession be available during event: <input type="checkbox"/> Yes <input type="checkbox"/> No
Will barbecue(s) be used: <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Charcoal	Will *alcohol be served during event: <input type="checkbox"/> Yes <input type="checkbox"/> No
	<i>*If yes, subject to approval of Municipality (Special Occasion Licence is required from the BC Liquor Control and Licensing Branch, if approved)</i>

Safety/Security

First Aid Provisions (incl. # of attendants, level of training): Yes No

Description:

Security Provisions: (what arrangements have been made to ensure safety of participants at event?): Yes No

Description:

Insurance:

All applications must include proof of liability insurance coverage satisfactory to the Municipality in the amount of not less than \$5,000,000.00, inclusive per occurrence for bodily injury, death and property damage including loss of use thereof, with both the event organizer and the Town of Oliver being named as insureds. The event organizer agrees that the provision of the insurance shall in no way limit the release and indemnification which obligations shall survive the termination of this Agreement and the Event. The required insurance coverage must be provided to the Municipality within three (3) days prior to the event.

I have read & understand the Insurance requirements: Initials

Indemnity Agreement:

If the special event is approved by the Town of Oliver, the event organizer hereby absolves, releases and forever discharges the Municipality, its officers, servants, agents and employees, from any and all claims, causes of action, actions, suits, proceedings and demands of any nature whatsoever which the event organizer can or may have for any loss, damage, death or injury sustained by it, arising directly or indirectly out of the event. The event organizer agrees to indemnify and save harmless the Municipality, its officers, servants, agents and employees, from and against any and all claims, causes of action, actions, suits, proceedings and demands of any nature whatsoever that any person, including but not limited to participants in the event and volunteers for the event organizer, has, might have or will have for any loss, damage, death or injury arising directly or indirectly out of the event..

I have read & understand the Indemnity Agreement: Initials

Signature:

Date:

Print Name:

Submit Applications

Town of Oliver
PO Box 638, 6150 Main Street,
Oliver, BC V0H 1T0

E-mail to admin@oliver.ca
Fax to 250-498-4466

Should you have any questions or require further information please contact the Corporate Officer at 250-485-6207.

The information on this form, collected under the authority of the Freedom of Information and Protection of Privacy Act (Section 27) is used to record information about applicants and as a basis for determining volunteer service suitability. In the case of successful applicants, the Corporate Officer will retain this information. Should you have any questions about the collection and use of this information, please contact the Corporate Officer.

FOR OFFICE USE ONLY:

Reviewed by Bylaw Enforcement	<input type="checkbox"/>	Bylaw Enforcement Assistance	<input type="checkbox"/> Yes <input type="checkbox"/> No
Reviewed by Fire Department:	<input type="checkbox"/>	Certified Traffic Control Persons	<input type="checkbox"/> Yes <input type="checkbox"/> No
Reviewed by Public Works	<input type="checkbox"/>	Date Received:	