



Special Event Application

DESCRIPTION

Event Title: _____

Description :

Will you charge admission? If so, what amount? :

Anticipated Attendance: _____

DATE/TIME

Setup Date: _____ Time: _____ Day of Week: _____

Event Starts: Date: _____ Time: _____ Day of Week: _____

Event Ends: Date: _____ Time: _____ Day of Week: _____

Dismantle: Date: _____ Time: _____ Day of Week: _____

LOCATION

Location Description:

CONTACTS

Host Organization: _____

Host Organization Primary Contact & Phone: _____

SITE PLAN

Please submit a detailed site plan identifying Street Names, parking spaces to be closed, location of barriers/barricades, location of all vendor booths/shade canopies, beer gardens or wine tasting areas, and locations of generators and food preparation equipment.

ENTERTAINMENT AND RELATED ACTIVITIES

Performer/Band Name & Type of Music:

Will amplified sound be used? _____

Provide rated output of amplifier in watts: _____

Number of speakers: _____

ALCOHOL

Does your event involve the use of alcohol? _____

Circle One: Free/Host Alcohol Alcohol Sales Host & Sale Alcohol Beer
 Beer & Wine Beer, Wine & Spirits

Please describe your plan to ensure the safe sale or distribution of alcohol at your event.

FOOD & GOODS VENDORS

Does your event include food concession and/or preparation areas?

How do you intend to cook food in the event area?

Will items or services be sold at your event? _____

If yes please attach a complete list of vendors and include a description of the types of goods/food/services that the vendor provides.

COMMUNITY OUTREACH

Please attach a copy of your community outreach notice and signature sheet that you provided to the businesses/residents in your event vicinity.

INSURANCE

Please attach Commercial General Liability Insurance and a separate additional Insured Endorsement for the Host Organization and all vendors. If your event features alcohol, Liquor Liability Insurance is also required.

CERTIFICATION

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 agree to abide by the rules and regulations governing the proposed Special Event. Applicant agrees to comply with all other requirements of the City, County, State, Federal Government, and any other applicable entity which may pertain to the use of the Event venue and the conduct of the Event. I agree to abide by these rules, and further certify that I, on behalf of the Host Organization, am also authorized to commit that organization, and therefore agree to be financially responsible for any costs and fees that may be incurred by or on behalf of the Event to the City of Winters.

Name of Host Organization: _____

Title: _____

Signature: _____

Date: _____

INDEMNIFICATION

The undersigned agrees by their signature that they are an authorized agent/representative for the requesting agency, and further agrees the rules and regulations will be complied with in full. I further agree that I am responsible to the City of Winters for the use and care of City property. I further agree that the nature of the activity will conform to that stated in this application. I agree to indemnify and hold harmless the City of Winters, its officers, agents, and employees against any and all loss, damage and/or liability that may be suffered or incurred by the City of Winters, its officers, agents, and employees.

Signature: _____ Date: _____

FEES

Encroachment of Public Right-of-Way	\$54.00 per Event
Business License Fees (per vendor)	\$86.00 annual or \$10.00 one-day