



Special Event Permit Application

Fill out entire form and email to megan.foster@adaok.com

Date: _____

Permit # _____

This application is to be completed by the person or organization wishing to hold the special event. Completed Special Events Permit applications must be received by the City Clerk no later than sixty (60) days prior to the event start date.

The City will distribute, for review, copies of your Permit Application to all City Departments affected by your event. You may be contacted individually by these departments, if they have specific questions or concerns about your event. You will be notified if your event requires any additional information, permits, licenses, or certificates.

Date of Event: _____ **Time:** _____ through **Date:** _____ **Time:** _____

GENERAL EVENT INFORMATION

Applicant Name	Name of Organization	Address	Phone Number
Alternate Contact	Name of Organization	Address	Phone Number

Exact address and location of event _____

PLEASE ATTACH A DETAILED MAP OF THE AREA/LOCATION OF THE SPECIAL EVENT. The map must show the locations of the following items, if applicable. Please check all that apply.

- Alcohol Sales
- Carnival Rides
- Emergency Access Points
- Event headquarters
- Fencing
- First Aid Tent
- Parking Areas
- Public Entry Points
- Restrooms
- Security Tent
- Sign/banner placement
- Stages/Production Area
- Street Closure
- Trash Receptacles
- Vendor Booths/ Tents
- Other Pertinent Details
- Generators/Electrical Supply
- Food Handlers
- Firework Display

This event will be:

- Parade
- Festival
- Carnival
- Walk/Run
- Concert
- Competition
- For Profit
- Non-Profit
- Other

Nature of Event _____

Expected number of people and/or vehicles involved: People _____ Vehicles _____

Is this a public event? _____ Is there an admission fee? _____ If so, how much? _____

Will there be music at this event? _____

Will there be live entertainment, or loud speakers used? _____ If yes, indicate location on map.

Event organizer must obtain health permits from all food handlers. If alcoholic beverages will be sold at the event, a beverage garden permit must be obtained. You must present all required licenses prior to permit approval.

Will there be any street closures? _____ If so, list streets and close and open times. All Affected residents and businesses must concur with the closing.

Street: _____ Closed Date: _____ Time: _____

Street: _____ Closed Date: _____ Time: _____

Street: _____ Closed Date: _____ Time: _____

Please describe the parking arrangements (if needed) and indicate on map:

Will your event require portable restroom facilities? _____ If yes, indicate location on map.

Will you need barricades? _____ If so, how many? _____

All barricaded entries and exits need to be manned by assigned personnel 21 years or older.

Depending upon event and expected attendance, security may be required. Off-duty Ada Police may be used as security for a fee.

Depending upon type and size of event, a first aid station on-site may be required.

If public services will be required, applicant will need to make necessary arrangements with the proper department after department signature is obtained.

OTHER CITY DEPARTMENT REQUIREMENTS (if any):

Police: _____

Fire: _____

Public Works:

Parks and Recreation/Public Facilities:

INSURANCE INFORMATION

An applicant shall maintain in full force and effect during the full period of the event, public liability insurance in an amount sufficient to cover potential claims for any bodily injury, death, or disability and for property damage, which may arise from or be related to the special event. The insurance policy shall name the City of Ada as an additional insured; apply as primary insurance regardless of any insurance which the City of Ada may carry; and obligate the insurance company to give notice to the authorizing official at least thirty days before any cancellation of the policy. The authorizing official may establish the amount of such insurance, subject to review or reconsideration. The proof of insurance must be provided prior to allowing the special event to take place. This section does NOT apply to governmental bodies applying for a permit.

Insurance Company: _____

Type/Risk: _____

Amount: _____

Policy Number: _____

SIGNATURE

The information provided in this application and its attachments is complete and accurate to the best of my knowledge. I understand that I am under a continuing obligation to update any information supplied, and/or supply any new information as it becomes available.

Signature of Authorized Agent: _____ Date: _____

Event: _____

Event Date: _____

APPROVAL:

City Clerk _____

Date: _____

Chief of Police _____

Date: _____

Fire Chief _____

Date: _____

Public Works Director _____

Date: _____

Public Facilities Director _____

Date: _____

City Manager _____

Date: _____

Please submit your completed application to the City of Ada City Clerk at 231 S. Townsend.

If you have additional questions, please call (580) 436-6300.