

**Office Use Only:**

Date Stamp:

Received by: _____

On Time: ☐ Late: ☐

Applicant and Sponsoring Organization Information

Sponsoring Organization Name:

Organization Street Address:

Organization Phone:

Primary Contact from Sponsoring Organization:

Contact Phone: _____ Email: _____

Name of contact person on-site day of the event:

On-site contact cell phone number:

Event Information

Event Name:

Event type:

Street Location (Check all that Apply): ☐ Sidewalk ☐ Street ☐ Park

City Location(s):

Requested Date(s):

Event Hours:

Is this an annual event? ☐ Yes ☐ No

Estimated number of participants:

Event Details

Does your event involve the sale or consumption of alcoholic beverages? ☐ Yes ☐ No

If yes, contact Oregon Liquor Control: (503) 872-5000

Will items or services be sold at your event? ☐ Yes ☐ No

If food items will be served, contact Grant County Health: (541) 575-0429

Overall Event Description

[illegible]

Street Closure Information (if Applicable)		
Are you requesting a complete or rolling street closure?		
Names of streets to be closed:		
	Between	And
	Between	And
	Between	And
	Between	And
	Between	And
In the case of a parade event, please include a detailed map that includes your event route, start point, end point, and direction of travel.		
Please provide details about parade vehicles, bands, floats, and other entries:		
Time of street closure	Start:	End:
Parking restrictions requested:		
If you wish to close a state highway, contact ODOT: (541) 823-4016		
Active Street monitoring requested?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Describe:
Will the proposed route cross a bridge? If yes, which bridge(s)?		

Noise
Will the event have amplified sound? <input type="checkbox"/> Yes <input type="checkbox"/> No Describe:
Will music or sound be amplified between the hours of 10:00 PM and 7:00 AM on weekdays or 10:00 PM and 10:00 AM on weekends and holidays? <input type="checkbox"/> Yes <input type="checkbox"/> No
<i>*Applications for noise permits must be submitted at least 45 days in advance of the event.</i>
Cleanup and Security
Please describe your clean-up plans:
Please describe your procedures for crowd control and internal security:
Are you requesting City services at intersections and/or for crowd control? Yes <input type="checkbox"/> No <input type="checkbox"/>

Public Notification and Promotional Information

**PLEASE NOTE: You are advised not to announce, advertise or promote your event until you have a signed permit. Describe the marketing and promotional effort planned for the event (advertising, flyers, etc.):*

Affected neighborhoods and businesses must be notified 14 days prior to the event and signage must be posted at and around major intersections 7 days prior. Failure to notify the public will result in the revocation of your special event permit.

Insurance Information

HOLD HARMLESS AGREEMENT: IN CONSIDERATION OF THE CITY OF JOHN DAY CLOSING ONE OR MORE STREETS FOR THE ACTIVITY FOR WHICH THIS PERMIT WAS ISSUED, THE SPONSOR(S) OF THIS EVENT HEREBY AGREES TO SAVE THE CITY, ITS AGENTS, OFFICIALS, AND EMPLOYEES HARMLESS FROM AND AGAINST ALL DAMAGES TO PERSONS OR PROPERTY, ALL EXPENSES, AND OTHER LIABILITY THAT MAY RESULT FROM THIS ACTIVITY. DEPENDING ON THE SIZE AND SCOPE OF THE EVENT A "CERTIFICATE OF INSURANCE" MAY BE REQUIRED.

Signature of Sponsor:

Date:

LIABILITY AGREEMENT: EVENT SPONSORS SHALL HOLD HARMLESS, DEFEND AND INDEMNIFY THE CITY AND THE CITY'S OFFICERS, AGENTS AND EMPLOYEES AGAINST ALL CLAIMS, DEMANDS, ACTIONS AND SUITS (INCLUDING ALL ATTORNEY FEES AND COSTS) BROUGHT AGAINST ANY OF THEM ARISING FROM SPONSOR'S ACTIVITIES AUTHORIZED BY A SPECIAL EVENT PERMIT.

The sponsor shall maintain public liability and property damage insurance that protects the sponsor and the City and its officers, agents and employees from any and all claims, demands, actions and suits for damage to property or personal injury, including death, arising from the sponsor's street and sidewalk use. The insurance shall provide coverage for not less than \$1,000,000 for each occurrence, and \$500,000 for each occurrence involving property damage; or a single limit policy of not less than \$1,000,000 covering all claims per occurrence.

THE CITY OF JOHN DAY DOES NOT PROVIDE SPECIAL EVENT INSURANCE AT THIS TIME.

☐ I have read the hold harmless agreement and liability agreement. I agree to maintain public liability and property damage insurance if the City of John Day determines a liability agreement will be required.

Signature of Sponsor:

Date:

Additional Requirements

If any of these conditions exist you may need an additional permit from the applicable agency.

Event uses a City Park (in any capacity)	John Day Canyon City Parks and Recreation	541-575-0110
Event uses Grant County Fairgrounds	Grant County Fairgrounds Office	541-575-1900
Food will be served	Grant County Health Division	541-575-0429
Event uses address system or amplified music	Noise permit required	541-575-0028
Alcoholic beverages will be sold or served	Oregon Liquor Control	503-872-5000
Event includes regional festivals, indoor events, and/or large gatherings	Oregon Office of State Fire Marshall	541-419-1844

450 EAST MAIN STREET, JOHN DAY, OR 97845

P:541.575.0028 | E:CITYOFJOHNDAY@GRANTCOUNTY-OR.GOV | **CITYOFJOHNDAY.COM**

Publicity and Public Notification of Special Events

Sponsors are advised not to publicize proposed street and sidewalk uses until after receipt of the permit from the City of John Day to avoid publication of misinformation. Sponsors who disregard this precaution shall not receive special consideration in determining approval for the proposed street and sidewalk uses because of advance preparation or the expenditure of money. **A precondition for receipt of a special event permit is public notification and signage.** Sponsors of athletic, large parades, and other uses with a closed course shall notify residential complexes, neighborhood groups, businesses and churches which will be affected by the street and sidewalk use. **The notification shall be made not more than fourteen (14) days and not less than six (6) days before the street and sidewalk use date.** The notification shall be in writing and shall include the name and telephone number of the appropriate City official to contact in case of questions or concerns. All public notifications must be reviewed by the Special Events program prior to distribution. Delivery confirmation/signatures need to be provided no less than 5 days prior to the event date. **Additionally, you may be required to post signage at and around major intersections.**

Affirm and Sign Below

By signing this application, sponsor, or sponsor's authorized representative on behalf of sponsor agrees to all terms and conditions set forth in John Day City Code, Administrative Regulations and any special conditions listed in the permit.

As the sponsor or authorized representative, I certify that the information provided is true to the best of my knowledge and agree to pay the permit/cost recovery fees for this event as determined by the City of John Day, based upon the information provided in this application.

Name of Sponsor or
Authorized Representative

Signature of Sponsor or
Authorized Representative

Date:

**RETURN THIS COMPLETED APPLICATION, APPLICATION FEE, AND ROUTE MAPS
TO JOHN DAY CITY HALL:**

**450 E. Main Street
John Day, Oregon 97845
(541) 575-0028**

Official Use Only

City staff please review and make a recommendation

	Sign and Date	Comments	Approve Y/N
Public Works Dept.			
Fire Dept.			
Administrative Dept.			
Final Decision			
	Sign and Date	Reason for Denial:	
City Planner			