

City of Myrtle Creek

City Parks Department.

207 NW Pleasant St., Myrtle Creek, Oregon 97457 • Phone (541) 863-3171 Fax (541) 863-6851



SPECIAL EVENT PERMIT APPLICATION

(Please submit 30 days prior to event)

Name of Event & Sponsoring Organization: _____

Contact Person: _____

Address: _____

E-mail Address: _____

Phone: _____

Date(s) and Time(s) of Event: _____

Estimated Attendance: _____

Type of Event Activities:

(Please attach rules governing the event)

Location of Event (Attach site drawing, race or parade route, or floor plan): _____

Describe City services or equipment needed (e.g. street or parking lot closure, traffic control, barricades, security and electrical hookup): _____

Private Security Provided? Yes No If yes, Identify: _____

Number and location of Trash Receptacles:

Current business License: Yes No

*Sale or Consumption of Alcohol: Yes No

OLCC approval? Yes No

*Insurance requirements change if alcohol is served

*Complete agreement of indemnification and insurance.

AGREEMENT OF INDEMNIFICATION AND INSURANCE

_____ agrees to defend, save and hold harmless the City of Myrtle Creek, its officers, agents, volunteers and employees from all claims, suits, or actions of whatsoever nature.

_____ agrees to maintain liability insurance coverage of not less than \$1,000,000 per occurrence for commercial general liability and automobile liability, to cover any liability arising out of or associated with this event, and agrees to name the City of Myrtle Creek, its officers, agents, volunteers and employees as an additional insured on such policy with a copy of the endorsement attached to the certificate of insurance.

_____ further agrees to provide the City of Myrtle Creek with a certificate of liability insurance including additional insured endorsement not less than two weeks prior to the scheduled event and shall amend the notification for cancellation of coverage to 30 days. If _____ fails to provide the certificate of insurance and endorsements within the time required herein, this Special Event Permit will automatically be revoked.

Signature of Authorized Agent/Date

_____ Printed Name of Authorized Agent