

## **Application for Special Event Permit**

P.O. Box 156, 15 North Church Street, Eureka, Utah 84628 Phone (435) 433-6915 Fax (435) 433-6891 www.eurekautah.org

An application must be completed and submitted no less than 30 days in advance of the special event. Failure to submit a complete application and/or submission of that application outside of the required submission time frame may delay approval. Application submission does not guarantee approval. A Special Event Permit may be revoked upon failure to comply with conditions to the original approval of the permit.

#### SUBMITTAL REQUIRMENTS:

If the event will take place in any city facility or park, the event needs to be scheduled with the Eureka City Office.

City Park Pavilion Reservation

\$100.00 Use Fee includes Restrooms

Completed and signed Special Event Application Form.

Attach Site Plan of the event and Map of Proposed Route (if applicable).

Attach Proof of Insurance (certificate must list Eureka City as an additional insured).

Attach Proof of Non-Profit Status (For Non-Profit or Charitable Organizations)

All other applicable items requested on Special Event Application.

Pay Special Event Fee of \$100.00

Pay Deposit (refundable) of \$500.00

# **APPLICATION INFORMATION:**

Applicant Name:			
Street Name:			
Mailing Address: (If different from above)	City:	State	Zip
Phone:	Email:		
EVENT INFORMATION:			
Name of event:			
Type of event:			
Sponsor(s) of Event (if any):			

Location of Event:				_
Date of event:	_Event hours:(Start)	(End)		
Estimated Attendance:	Estimated Staff on Hand fo	or Event:		
Yes D No D Proposed Route: (enclose ma	, has a reservation been made for sch ap of proposed route if applicable)	eduled time c	of event?	
<b>EVENT PARKING:</b> (must be i	included on site planj			
Will Off-street parking at loca (if no, additional parking may no	ation be sufficient for the event? eed to be arranged)	Yes □	No 🗆	
Will event parking be on private property? (if yes, written permission from owner of private parking area is required)		Yes □ 1)	No 🗆	
Will there be transportation	services to and from the parking lots	? Yes □	No 🗆	

**STREET CLOSURES:** (must be included on map of proposed route, City roads need approval of the Mayor and Council, anything involving closure of Highway 6 will need approval from U.D.O.T. This can be done by requesting a permit from the following website: www.udot.utah.gov

Name of Streets to be closed and type of road closure (Full Street, Rolling Street Lane):

Description of reason for closure:			
Time of closure:(Start Time)	(End	Time)	
AMPLIFIED SOUND:			
Will amplified sound be used for the event? (if yes, use of loud speakers must be approved by the Ma	Yes □ ayor and Council)	No 🗆	
RESTROOM FACILITIES:			
Will portable restroom facilities be needed? (2 chemical toilets for every 250 people)	Yes □	No 🗆	

#### FOOD AND VENDOR BOOTHS: (must be included on site plan)

A business license is required to sell, expose for sale, or offer for sale any goods, wares, or merchandise in Eureka City. The event coordinator must contact the City Office to obtain a business license prior to the event and provide a Temporary Utah Sales Tax number, if applicable.

Will the event have vendor booths?	Yes □	No □	If yes, how many?	
Will the event have food booths?	Yes □	No 🗆	If yes, how many?	
TRASH DISPOSAL:				
What measures will be taken to clean up after the event?				

### **INSURANCE:**

Insurance must be submitted at least 10 days prior to the event. Eureka City requires proof of liability insurance in the minimum amount of one million dollars (\$1,000,000) and the applicant shall name Eureka City, 15 North Church Street, Eureka, UT 84628 as additionally insured.

#### NON-PROFIT or CHARITABLE ORGANIZATIONS:

All Non-Profit or Charitable Organizations may request a waiver of fees, but must do so by attending a regular Council Meeting and submitting proof of the 501(c)3 status prior to the event.

### AGREEMENT AND SIGNATURE:

I, the undersigned representative have read and do understand the Special Event guidelines and application. I agree to follow the guidelines and necessary conditions. The information contained herein, including supporting documentation, is complete and accurate.

Applicant name (printed):	Date:			
Applicant signature:				
City approval granted for the special eve	<b>FOR CITY USE ONLY</b> ont permit based on conditions:	Yes □	No	
Conditions:				
City Recorder	Mayor			