



SPECIAL EVENTS APPLICATION

SPECIAL EVENTS APPLICATION		
PERMIT NUMBER:	PERMIT FEE: \$50	APPLICATION DATE:
APPLICANT INFORMATION:		
Organization Name:		Phone:
Email or Website:		
Type of Organization:	<input type="checkbox"/> Charitable <input type="checkbox"/> For Profit <input type="checkbox"/> Government <input type="checkbox"/> Political <input type="checkbox"/> Non-Profit	Tax ID#:
Applicant Name:		Applicant Phone:
Applicant Address:		
Additional Point of Contact:		Phone:
EVENT INFORMATION:		
Official Event Name:		Event Location and Address:
Property Owner:		
Property Owner Address:		
Property Owner Phone:		Property Owner Email:
Event Purpose:		
Event Set-up Date:		Set-up Time:
Day 1 Event Date:		Start Time: End Time:
Day 2 Event Date:		Start Time: End Time:
Day 3 Event Date:		Start Time: End Time:
Event Tear-down Date:		End Time:
Type of Event:		
<input type="checkbox"/> Bicycle	<input type="checkbox"/> Carnival	<input type="checkbox"/> Concert
<input type="checkbox"/> Fundraiser	<input type="checkbox"/> Parade	<input type="checkbox"/> Festival
<input type="checkbox"/> Timed Race	<input type="checkbox"/> Sporting Event	<input type="checkbox"/> Reception
<input type="checkbox"/> Other (please describe)		<input type="checkbox"/> School Event
		<input type="checkbox"/> Rally/Walk/Run
		<input type="checkbox"/> Private Gathering
Is this a first time event?		<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, were you the chairman of the last event?		<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, has this event been held in Celina in the past?		<input type="checkbox"/> Yes <input type="checkbox"/> No
If this event has been held in Celina in the past, when was the last event?		
Est. total number in attendance:		Est. peak number in attendance:
Attach site plan with location of booths, stages, other structures, and parking		
Attach route plan, if applicable		
EVENT OPERATIONS – TRAFFIC CONTROL:		
Describe the areas of uses (open land, streets, alleys, etc.)		
Will you be requesting that roads be closed?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Will you be requesting the use of golf carts, gators or ATVs on public roadways?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Notes:		
<ul style="list-style-type: none"> All events that require a lane or road closure must submit an engineered traffic control plan 		

<ul style="list-style-type: none"> • TXDot controlled roadways require a separate approval from TXDot and it is the responsibility of the event coordinator to obtain this approval • The event coordinator is responsible for the rental (or purchase) of any traffic control devices that will be used, such as cones or barricades • The event coordinator is responsible for acquiring any additional permits or permissions 		
EVENT OPERATIONS – PARKING:		
Indicate on site plan the location of parking and the number of spaces provided		
Provide an entry and exit plan to the parking area		
Describe the area to be used for parking, including any modifications to the site		
Describe the process of parking, moving to registration area or gate, and entering the event		
Provide verification from the property owner that parking is allowed on the site		
EVENT OPERATIONS – PUBLIC SAFETY:		
Event criteria may warrant the need for police personnel to be on site to be used for security and traffic control. The rate for off-duty police officers is \$45/hour per officer. Events with more than 3 officers per shift will require 1 supervisor to be present at the rate of \$50/hour.		
Does the event coordinator agree to pay the costs of police services, if needed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Event criteria may warrant the need for fire and EMS personnel to be on site to be used in emergencies. The rate for off-duty fire/EMS personnel is \$45/hour per officer. Events with more than 3 fire/EMS personnel per shift will require 1 supervisor to be present at the rate of \$50/hour.		
Does the event coordinator agree to pay the costs of fire/EMS personnel, if needed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
EVENT OPERATIONS – RESTROOMS:		
Identify the number of permanent restroom facilities at the event location	Males:	Females:
Identify the number of portable restroom facilities being provided at the event location		
Portable Restroom Contractor: Contractor contact information:		
Indicate the location of restrooms (permanent and/or portable) on the site plan		
Indicate the number of staff per shift provided to clean and restock restrooms		
Will water supply be needed for restrooms or any other non-concession facility?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
EVENT OPERATIONS – TRASH REMOVAL:		
Number of dumpsters/trash containers needed:	Delivery date:	Pick-up date:
The City of Celina may provide the use of a dumpster or trash container at the event. Does the event coordinator wish to secure a City-provided dumpster?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Indicate the number of staff who will be responsible for trash removal per shift:		
HEALTH/FOOD SAFETY/CONCESSIONS/ALCOHOLIC BEVERAGES:		
Will food be prepared at the event?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Will alcohol be served at the event?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Notes:		
<ul style="list-style-type: none"> • No food or food products shall be stored or prepared at home or at an off-site location and brought to the event and served • No alcoholic beverages will be distributed, consumed, or possessed in City parks or on City streets in accordance with City ordinances (contact City Secretary at 972-382-2682 for the process to allow alcoholic beverages at these locations) • A special event permit for alcohol on private property could be permitted with a TABC license • Food vendor applications and concessions information concerning temporary event health permits may be obtained from the Permits Department at City Hall 		

Number of Non-food Vendors/Booths:	Number of Food Vendors/Booths: <i>Food vendors must obtain a temporary health food permit</i>	
Do the concessionaires require water?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
How will electrical service be supplied?	<input type="checkbox"/> Public utilities	<input type="checkbox"/> Generator
NOISE AND MISCELLANEOUS ISSUES:		
What types of sound amplification will be used at the event?	<input type="checkbox"/> None <input type="checkbox"/> Live music	<input type="checkbox"/> Recorded music <input type="checkbox"/> Other (explain)
Will Celina residents likely be affected by the event? If yes, how will residents be notified of the event?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Will signs or banners be used to advertise your event? <i>Events using signs or banners must obtain a separate permit from Development Services Department.</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Will this event have any pyrotechnic (fireworks) display? <i>If yes, provide the vendor and details of the display</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If this event is a parade, please complete the following information: <ul style="list-style-type: none"> • Assembly location • Number of participants • Number of animals • Number of vehicles 		
Will tents or other structures be used? If yes, list number, type of structure, and sizes	<input type="checkbox"/> Yes	<input type="checkbox"/> No
INSURANCE, SAFETY PLAN, AND DISCLAIMER INFORMATION:		
The event must carry property, bodily injury, and municipal liability insurance of at least \$1,000,000 per occurrence. Proof of these documents must be attached to this application and the City of Celina must be shown as a named insured party on the insurance declaration.		
Proof of insurance must be submitted to the City a minimum of 30 days in advance of the event.		
All event applications must include a site plan and route map.		
The Fire Code requires a public safety plan for all events. The required plan must address how the organizer plans to alert both the attendees and emergency services personnel. It must also show a plan to move attendees to safety and provide police and fire access to the scene. Contact the Celina Fire Department at 972-382-2653 for detailed information regarding the requirements of the safety plan.		
Payment of the \$50 nonrefundable event application fee is required prior to the processing of the application.		
Submit the application and all additional documents and exhibits to the Building Department at City Hall.		
Various City departments will review the application and additional information may be requested.		
The City reserves the right to cancel or shut down the event if: <ul style="list-style-type: none"> • It is in violation of any City ordinance; • The event deviates from this application or site plan; • The event is deemed to be unsafe by public safety personnel. 		
Once the event application is approved, one or more meetings between the event coordinator and City staff will be scheduled		
Parade disclaimer: <ul style="list-style-type: none"> • The same responsibility of litter/trash control applies to the entire staging site and/or the parade route. • Restrooms must be provided for parade participants during float preparation and staging. • Absolutely no objects shall be thrown from floats or vehicles in the parade. 		
Applicant's signature:	Date:	

APPLICATION CHECKLIST

Please use the following checklist to help you plan your special event:

<input type="checkbox"/> Master Site Plan <input type="checkbox"/> Emergency Plan <input type="checkbox"/> Radio Communication Plan <input type="checkbox"/> Parking Plan <input type="checkbox"/> Traffic Plan <input type="checkbox"/> Cash Collection and Transfer Plan <input type="checkbox"/> Water Plan for Concessions <input type="checkbox"/> Water Plan for Restrooms <input type="checkbox"/> Electrical Plan for Concessions <input type="checkbox"/> Electrical Plan for Other Items <input type="checkbox"/> Information Tent/Location Plan <input type="checkbox"/> Trash Pick-up Plan <input type="checkbox"/> Lighting Plan <input type="checkbox"/> Vendor List <input type="checkbox"/> Insurance <input type="checkbox"/> Entertainment List and Schedule	<input type="checkbox"/> Event Activity Schedule <input type="checkbox"/> Expected Attendance <input type="checkbox"/> Gators, Golf Carts, ATVs <input type="checkbox"/> Emergency Contact List <input type="checkbox"/> Daytime Security <input type="checkbox"/> Nighttime Security <input type="checkbox"/> Number of Vehicles, animals, pedestrians, and bikes to be used in parade, if applicable <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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Celina's Special Events Ordinance can be found on the City website, www.celina-tx.gov



CITY OF CELINA

AGREEMENT INDEMNIFICATION AND COST REIMBURSEMENT

I, THE UNDERSIGNED APPLICANT, HAVING AUTHORITY TO EXECUTE THIS AGREEMENT ON BEHALF OF MYSELF AND/OR THE ORGANIZATION, AGREE TO INDEMNIFY AND HOLD HARMLESS, THE CITY OF CELINA, ITS OFFICERS, EMPLOYEES, AGENTS, AND REPRESENTATIVES AGAINST ALL CLAIMS OF LIABILITY AND CAUSES OF ACTION RESULTING FROM INJURY OR DAMAGE TO PERSONS OR PROPERTY ARISING OUT OF THE SPECIAL EVENT.

I FURTHERMORE AGREE TO REIMBURSE THE CITY OF CELINA FOR ANY ADDITIONAL COST INCURRED AS A RESULT OF THE SPECIAL EVENT WITHIN TEN (10) DAYS OF NOTICE FROM THE CITY OF SUCH COST.

PRINTED NAME OF APPLICANT

APPLICANT SIGNATURE

DATE

PRINTED NAME OF NOTARY

ACKNOWLEDGED BEFORE ME THIS ____ DAY OF _____, 20__

NOTARY PUBLIC

NOTARY SEAL

EVENT APPROVAL PROCESS

This page for City use only

PERMIT NUMBER:	EVENT NAME:	
PUBLIC WORKS DEPARTMENT		
<input type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	<input type="checkbox"/> PENDING ADDITIONAL DOCUMENTS
Describe additional documents needed:		
Supervisor approving the Public Works portion of application:		
Signature:	Date:	
POLICE DEPARTMENT		
Officers required at event?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Number of Officers required per day:		
Police vehicles required?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	<input type="checkbox"/> PENDING ADDITIONAL DOCUMENTS
Describe additional documents needed:		
Supervisor approving the Police Department portion of application:		
Signature:	Date:	
FIRE/EMS DEPARTMENT		
Fire/EMS personnel required at event?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Number of Fire/EMS personnel required per day:		
Ambulances required?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	<input type="checkbox"/> PENDING ADDITIONAL DOCUMENTS
Describe additional documents needed:		
Supervisor approving the Fire Department portion of application:		
Signature:	Date:	
ENGINEERING DEPARTMENT		
<input type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	<input type="checkbox"/> PENDING ADDITIONAL DOCUMENTS
Describe additional documents needed:		
Supervisor approving Engineering Department portion of application:		
Signature:	Date:	
PARKS DEPARTMENT		
<input type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	<input type="checkbox"/> PENDING ADDITIONAL DOCUMENTS
Describe additional documents needed:		
Supervisor approving the Parks Department portion of application:		
Signature:	Date:	
OVERALL EVENT APPLICATION IS:		
<input type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	Date:
Reason for denial:		
Permits Department Signature:	Date:	
City Manager Signature:	Date:	