



City of Molalla

# SPECIAL EVENTS PERMIT

*Permit must be submitted at least 60 days prior to the event*

## SUBMISSION OF APPLICATION

To promote success and ensure safety at local events, the City of Molalla often requires event organizers to complete a Special Event Permit. A Special Event Permit must be completed if the event involves a large group of people (compared to the usual occupancy of the site), and:

- Is advertised to the public and does not occur regularly on the site; or
- Impacts use of City streets (including curb or parking lane), sidewalks, and public rights-of-way, or
- Uses City facilities or property (i.e. city buildings, parks, and parking lots.)

Examples of special events include:

- Road Race, Bicycle Race, or Walk
- Parade
- Festival, Carnival, or Market
- Concert
- Automobile or Boat Show

## EVENT DATE, TIME & LOCATION

Event Name: \_\_\_\_\_

Event Date: \_\_\_\_\_  Single Day  Multi-Day Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Type of Event:  Road Race/Bicycle Race/Walk  Parade  Festival/Carnival/Market  Concert  
 Automobile or Boat Show  Other: \_\_\_\_\_

Location: \_\_\_\_\_

## APPLICANT INFORMATION

Organization Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## CONTACT INFORMATION

Contact Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Email: \_\_\_\_\_



### DAY OF EVENT CONTACT INFORMATION

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

### EVENT ATTENDANCE

Participant types and numbers (estimated)

Participants: \_\_\_\_\_ Vendors: \_\_\_\_\_ Staff/Volunteers: \_\_\_\_\_ Bikes: \_\_\_\_\_  
Vehicles: \_\_\_\_\_ Bands: \_\_\_\_\_ Animals (including horses): \_\_\_\_\_ Floats: \_\_\_\_\_

### EVENT PARKING

Locations: a. \_\_\_\_\_ Number of Cars: \_\_\_\_\_  
b. \_\_\_\_\_ Number of Cars: \_\_\_\_\_  
c. \_\_\_\_\_ Number of Cars: \_\_\_\_\_  
d. \_\_\_\_\_ Number of Cars: \_\_\_\_\_

### AGENCY APPROVALS

(if required, attach a copy or explain status of obtaining approval)

- Yes  No Sponsor is site Owner *(If Sponsor is not owner of event site, attach Site Owner approval)*
- Yes  No Does Event also occur outside city limits?
- Yes  No Does Event cross or take place on a State Highway system ie: Hwy 211, Hwy 213, etc.? **(ODOT PERMIT REQUIRED)**
- Yes  No Restrooms on Site? Number: \_\_\_\_\_ |  Yes  No Portable Restrooms? Number: \_\_\_\_\_
- Yes  No Park Use Application *(required if City Park is used for the Event)*
- Yes  No Traffic Control Plan *(required if alters public streets, sidewalks, curb-lane parking, or uses traffic/parking signs)*
- Yes  No City Property Used (Other than right-of-way)? Describe: \_\_\_\_\_
- Yes  No Is food being served and/or prepared at your event? *Food handler's license from Clackamas County required*
- Yes  No Is alcohol being served? *OLCC permit required*

### POLICE DEPARTMENT ASSISTANCE

Yes  No Requested? *If yes, what type of assistance is requested (fees may apply):* \_\_\_\_\_

### STREET MAINTENANCE ASSISTANCE

Yes  No Requested? *If yes, what type of assistance is requested (fees may apply):* \_\_\_\_\_



## CERTIFICATE OF INSURANCE

**Attached?**  Applicant agrees to provide a policy of liability insurance. This insurance shall provide coverage for not less than \$1,000,000 for personal injury to each person, \$1,000,000 for each occurrence involving property damage; or a single limit policy of not less than \$2,000,000 covering all claims per occurrence. The limits of the insurance shall be subject to statutory changes as to maximum limits of liability imposed on municipalities of the State of Oregon. This insurance shall be without prejudice to coverage otherwise existing and shall name as additional insured the City of Molalla and its officers, agents, and employees. The sponsor agrees to maintain continuous coverage for the duration of the permit. City to receive 30 days notice of cancelation or material modification. If alcohol is to be sold, liquor liability coverage is also required (The City reserves the right to increase coverage minimum if event presents extraordinary risk).

## RELEASE & INDEMNITY AGREEMENT

The undersigned Sponsor, by signature below, shall defend, indemnify, and hold the City, its officers, agents and employees, harmless against all liability, loss, or expenses, including attorney's fees, and against all claims, actions or judgments based upon or arising out of damage or injury (including death) to persons or property caused by any act or omission of an act sustained in any way in connections with the performance of this event or by conditions created thereby, or based upon violation of any statute, ordinance or regulation. This contractual indemnity provision does not abrogate common law or statutory liability and indemnification to the City, but is in addition to such common law or statutory provisions.

## APPLICANT'S/SPONSOR'S SIGNATURE

I do affirm that the foregoing statements and representations are binding upon me, or if executed on behalf of a Sponsoring Entity, are binding upon the Sponsor and are executed pursuant to authority. The information submitted is true to the best knowledge of the undersigned, and the undersigned shall notify City in writing at any time as additional information is known or the plans for the event are revised which would alter the information and statements given.

Signature of Person Signing: \_\_\_\_\_

Name of Person Signing: \_\_\_\_\_

Title of Office: \_\_\_\_\_

Date: \_\_\_\_\_

**PLEASE SUBMIT THIS PERMIT TO THE CITY OF MOLALLA PARKS DEPARTMENT NO  
LATER THAN 60 DAYS PRIOR TO THE EVENT.**

*A copy of this permit will be sent to the applicant upon approval*



### APPLICANT RESPONSIBILITY

Applicant is responsible for obtaining all additional permits, licenses, and insurance certificates required upon the issuance of this Event Permit. Please fulfill all of the obligations listed below before submitting this application. Once all of these obligations are complete you must place your initials in all of the designated areas marked with parentheses ( ).

( ) **CLEAN UP:** Applicant agrees to promptly clean up all paper or debris caused by applicant's use of the area and understands that if such cleanup is not promptly undertaken the City reserves the right to do the cleaning itself and to charge the applicant for the actual time and expense incurred.

( ) **CITY CODES/PERMITS:** Applicant agrees to obtain all City permits and licenses that may be required, and shall comply with all other City laws and other conditions that the City Manager determines necessary.

- Food Handler's License – Clackamas County (503) 742-5300 or [online here](#)
- Oregon Liquor Control Commission (OLCC) (503) 872-5000 or [online here](#)
- Oregon Department of Transportation (ODOT) (503) 653-3086 or [online here](#)
- Clackamas County Department of Transportation (503) 742-4400 or [online here](#)

( ) **CONDUCT/NUISANCES:** Applicant understands that if the outdoor activity is conducted in such a way as to create a nuisance for any business or resident of the area, future permits may be denied for that reason alone. Applicant will be notified as soon as practical that the activity engaged in created a nuisance and may ask for a review of such determination.

( ) **SITE MAP:** **This application will not be processed unless a site map is included.** Site map must indicate location of tents, stages, portable restrooms, fencing, food booths, alcoholic and non-alcoholic beverage booths, etc.

( ) **TRANSPORTATION PLAN MAP:** **This application will not be processed unless a transportation plan map is included.** Indicate where streets will be blocked and how they will be blocked including fencing, barricades, stages, tents, etc.

#### For Official Use Only

**Police Department:**

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Approved  Denied Conditions of approval: \_\_\_\_\_

**Public Works/ Street Department:**

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Approved  Denied Conditions of approval: \_\_\_\_\_

**Fire Department/ Emergency Management:**

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Approved  Denied Conditions of approval: \_\_\_\_\_

**South Clackamas Transportation (if applicable):**

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Approved  Denied Conditions of approval: \_\_\_\_\_

**City Administration Approval:**

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Approved  Denied Conditions of approval: \_\_\_\_\_