

Special Event Permit Application

City of Irwindale • Community Development Department

5050 Irwindale Avenue • Irwindale, California 91706 • (626) 430-2208; Fax: (626) 962-2018

By completing the information requested, this application will serve as a request for approval of a special event/temporary use permit. Planning Division staff will assist you in completing this application and can be reached at (626) 430-2208. Planning Division counter hours are 8:00 AM to 6:00 PM, Monday through Thursday.

The Planning Department requires that Special Event Permit Applications be completed and submitted for processing at least thirty (30) days prior to the date of the proposed event. Submission of a Special Event Permit Application is not a guarantee that your event can be permitted. It is recommended that you do not promote your event until you've received confirmation from the Community Development Department that your event may proceed.

Event Information

Name of Proposed Event: _____

Location of Event: _____

Event Date(s) and Event Hours: _____

On-site Contact(s): _____

Please give a detailed description of the proposed event. (Attach separate sheets, if necessary.)

Please list all temporary equipment (e.g. tents, fencing, canopies, stages, seating equipment, carnival rides, ticket booths, food booths, vendor booths, etc.) or temporary facilities (e.g. restrooms, etc.) that will be used in conjunction with this event. (Please indicate the location of all temporary equipment and temporary facilities on the site plan.)

Will there be any type of entertainment (live or recorded)? Y N If yes, please provide specific details of the nature of entertainment (e.g. names of entertainers, dates and hours of appearance, etc.) and attach a schedule of events.

Will this event consist of any vendors? Y N If yes, please indicate the total number of vendors and the type of (sales food or merchandise) that will be conducted during this event. In addition, provide a list of all vendor names, including vendor business address, contact person's name and telephone number. (Please indicate vendor locations on site plan.)

Will alcoholic beverages be sold or served during the event? Y N If yes, please indicate the date and hour that alcoholic beverages will be available for consumption. (Please indicate the location of all alcoholic beverage booths on the site plan.) _____

Is there an admission fee to this event? Y N If yes, what is the admission fee? _____ Are tickets being sold in advance? Y N If yes, please indicate source of ticket sales. _____

Special Event Permit Application

Is there a parking fee for this event? Y N If yes, what is the parking fee? _____

(Please, attach a detailed plot plan of the parking site. Plan should include lane access and exits.)

Is this event being advertised? Y N If yes, please indicate the source of advertisement (e.g. radio, television, newspaper, fliers, etc.) _____

Anticipated daily attendance: _____

The City of Irwindale requires private security at all special events. Please submit the company name and the proposed security plan for this event. Plan must include security deployment for the event area, parking site, and traffic control.

Property Owner Certification

I certify that I am presently the legal owner of the above-described property. Further, I acknowledge the filing of this application and certify that all of the above information is true and correct. (If the undersigned is different from the legal property owner, a letter of authorization must accompany this form.)

Print Name and Title

Signature

Address

Phone Number

E-mail Address

Date

Applicant Certification

Any false, misleading or fraudulent statement of material fact in the required application shall be grounds for denial of the application for a special/temporary use permit.

I have used all reasonable diligence in completing this form. I have reviewed the form and to the best of my knowledge the information contained herein is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Print Name and Title

Signature

Address

Phone Number

E-mail Address

Date

INDEMNIFICATION CLAUSE FOR SPECIAL EVENT PERMIT

The Applicant here after "Indemnitor" agrees to the following indemnification clause:

Indemnitor _____ shall indemnify, protect, defend and hold harmless the City of Irwindale (City), its officers, officials, employees, agents and volunteers ("Indemnified Parties") from and against any and all damages to property or injuries to or death of any person or persons, and shall defend, indemnify, save and hold harmless the City, its officers, officials, employees, agents and volunteers from any and all claims, demands, suits, actions or proceedings of any kind or nature, including, but not by way of limitation, all civil claims, workers' compensation claims, and all other claims resulting from or arising out of the acts, errors or omissions of Indemnitor, its officers, agents and/or employees, whether intentional or negligent, (collectively, "Claims") in the performance of this Agreement. In addition to bearing the full cost and expenses of defending the City, the Indemnitor shall indemnify, protect, defend and hold harmless the Indemnified Parties from and against any and all losses, liabilities, damages, costs and expenses, including legal counsel's fees and costs resulting or related to any such Claims.

I HAVE READ AND UNDERSTAND THE ABOVE

DATE

Special Event Permit Application

Minimum Requirement Checklist For SEP Filing

- 1. Completed Special Event Permit Application – Signed by applicant and property owner.
- 2. Attach a detailed site plan of the event; plan should include the following information (if applicable):
 - Location of all temporary equipment
 - Vendor Locations
 - Parking site (Including lane access and exists)
- 3. The applicant shall require all vendors that are expected to make any taxable sales transactions at this Irwindale event to complete form ***BOR-530-B REV. 4 (10-98) LOCAL TAX ALLOCATION FOR TEMPORARY SALES LOCATIONS AND CERTAIN AUCTIONEERS***, and to submit the completed form to the California State Board of Equalization.
- 4. The event organizer and all event vendors are required to obtain a City of Irwindale business license. Business license applications must be filed online and have all fees paid prior to the event. Contact (626)430-2252 for additional information. Apply online at <http://www.irwindaleca.gov/index.aspx?NID=186>.
- 5. The County of Los Angeles Public Health Department requires that the event organizer and all food vendors (including restaurants) participating in the event must obtain a Temporary Food Facility (TFF) permit.
LA County Department of Public Health, Environmental Health Division: <http://www.publichealth.lacounty.gov/eh/>

Additional Requirements For Irwindale Event Center (aka Irwindale Speedway) Filing

- 6. All Special Events shall be pre-approved by the City and shall take place in City-approved areas within the Irwindale Event Center site.
- 7. Attach a detailed site plan of the event; plan should include the following information (if applicable) :
 - The base for this required site plan shall be the Irwindale Event Center (IEC) Site Plan of Record that was approved by the City or a clear aerial image of the entire site.
 - Description of the parking layout, vehicle circulation details, on-site traffic signage details, and drag strip layout for review and approval by the Planning Department, Public Works/Engineering Department and by the Police Department.
- 8. **Please Note:** If the SEP application for proposed IEC event is submitted less than twenty (20) calendar days before the event, Applicant shall pay an additional fee of \$101.50 for each day the application is late. No SEP applications will be processed if submitted less than ten (10) days in advance.

City Required Accounting For All Admissions And Parking Fees Collected

- 9. In accordance with Irwindale Municipal Code Section 3.04 the City charges an admissions tax upon every person who pays an admission charge to any place located in the City limits. All Special Events that are charging an admissions fee are required to pay, along with other required application fees, an Admissions Tax deposit equal to 3% of the projected gross income for the proposed event.
- 10. On or before the 15th day of the month following the special event, the applicant will give an accounting to the City of all taxable admissions and parking fees collected for the special event by submittal of the completed "Admissions Tax Monthly Report" form. The Admissions Tax deposit received will be credited towards any additional taxes owed. The form can be found online on the City's website under "Planning" at <http://www.irwindaleca.gov/>.

Cancellation Policy

- 1. Should Event Organizer, for any reason, need to cancel their event; they must provide a written notice of cancellation and must be received in our office no later than ten (10) days prior to the event start date. Cancellations must be in written form; verbal cancellations will not be accepted.
- 2. Please keep in mind that Permit Fees are non-refundable. It is also possible that fees related to Police, Security, and/or Crossing Guard Services will still be incurred.

Additional Information

- The City of Irwindale requires a Certificate of Insurance (COI) which must reflect the following.**
 - General liability insurance. Permittee shall maintain commercial general liability insurance with coverage at least as broad as Insurance Services Office form CG 00 01, in an amount not less than \$1,000,000 per occurrence, \$2,000,000 general aggregate, for bodily injury, personal injury, and property damage. The policy must include contractual liability that has not been amended. Any endorsement restricting standard ISO "insured contract" language will not be accepted. The City of Irwindale, its officers, officials, agents, and employees shall be included as additional insureds on the policy.
 - Workers' Compensation with limits of \$1 million (Required if the insured has paid employees)
 - Liquor Liability required if alcohol will be consumed at the event

Special Event Permit Application

- The Description of Operations/Locations, etc. section must include the name of, the location of and the date(s) of the proposed special event.
- The Certificate Holder section must reflect:
City of Irwindale
5050 N. Irwindale Avenue
Irwindale, CA 91706
- **Endorsements:** In addition to the certificate of insurance, the City of Irwindale requires an Additional Insured Endorsement page naming **“The City of Irwindale, its elected officials, representatives, employees and agents”** as additional insured and **“The policy is endorsed with the Waiver of Subrogation in favor of the City of Irwindale, its elected officials, representatives, employees and agents.”** You must provide a copy of the actual endorsement. Listing the City as an additional insured on the COI is not sufficient.
- Policy must be issued by an admitted insurer licensed to transact business in the State of California and by an insurer assigned an A.M. Best Rating “Excellent” or better.

This event may be subject to permits, conditions and requirements imposed by other agencies. The City of Irwindale will not issue a special/temporary permit until all applicable permits from the following agencies have been applied for:

City of Irwindale Building & Safety Department	(626) 430-2205
City of Irwindale Police Department	(626) 430-2244, ext. 241
Los Angeles County Fire Department	(626) 574-0949
Los Angeles County Health Department	(626) 813-3380

Upon review of Applicant's application, the City Manager will impose such fees, terms, conditions and restrictions upon the operation and conduct of the special event or temporary use.

Required Fee With Application Submittal

- \$150 if application is submitted 30 days or more in advance of the event.
- \$203 if the application is submitted less than 30 days in advance of the event (**but in no case less than 10 days**).

This section is for City of Irwindale's Use Only.			
File No(s): _____		Permit No: _____	
Received By: _____		Receipt No.: _____	
Date: _____		Filing Fee: _____	
Departmental Approvals	Date		Date
<input type="checkbox"/> Human Resources/Risk Management	_____	<input type="checkbox"/> Business License	_____
<input type="checkbox"/> Building & Public Safety	_____	<input type="checkbox"/> Police Department	_____
<input type="checkbox"/> Public Works/Engineering	_____	<input type="checkbox"/> Fire Department	_____