

**CLAREMONT HUMAN SERVICES DEPARTMENT**  
1700 DANBURY RD.  
CLAREMONT, CA 91711  
(909) 399-5490  
www.claremontca.org  
specialevents@ci.claremont.ca.us



## **Special Event Permit Application**

Please submit this application to begin the special event permit process. Throughout the process, you will be notified if your event permit requires any additional information, clarifications, alterations, permits, etc. Delays in providing the requested items could delay the ability to complete the permit application process and approve a permit in a timely manner and could result in denial of the application.

### **Organization Contact Information**

Organization: \_\_\_\_\_ Office Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Non-Profit #: \_\_\_\_\_ Website: \_\_\_\_\_

### **Event Organizer Contact Information**

Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Cell: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

### **Alternate Event Organizer Contact Information**

Contact #1: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Cell: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

### **Event Information**

Event Title: \_\_\_\_\_  
Type of Event: \_\_\_\_\_  
Address/Location: \_\_\_\_\_  
Day of the Week: \_\_\_\_\_ Date: \_\_\_\_\_  
Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_  
Anticipated Attendance: \_\_\_\_\_ Admission Charged: \_\_\_\_\_

#### **Set-Up**

Day of the Week: \_\_\_\_\_ Date: \_\_\_\_\_  
Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

#### **Clean-Up**

Day of the Week: \_\_\_\_\_ Date: \_\_\_\_\_  
Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

### Event Type

| Event            |                          | Event        |                          |
|------------------|--------------------------|--------------|--------------------------|
| Concert          | <input type="checkbox"/> | Presentation | <input type="checkbox"/> |
| Festival         | <input type="checkbox"/> | Rally        | <input type="checkbox"/> |
| March/Procession | <input type="checkbox"/> | Run/Walk     | <input type="checkbox"/> |
| Parade           | <input type="checkbox"/> | Street Fair  | <input type="checkbox"/> |
| Performance      | <input type="checkbox"/> | Tournament   | <input type="checkbox"/> |

### Event Check List

| Item                       | Yes/No  | Quantity<br>(If Applicable) | Describe All Items<br>Checked Yes |
|----------------------------|---|-----------------------------|-----------------------------------|
| Animals                    | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Alcoholic Beverages        | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Amplified Sound/Equipment  | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Automobiles/Trucks         | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Booths                     | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Food Served or Sold        | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Electrical/Plumbing        | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Guest Speakers             | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Inflatables                | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Lighting/Illumination      | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Medical/First Aid Stations | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Open Flame                 | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Open to the Public         | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Parking                    | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Security Guards            | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Pyrotechnics               | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Restrooms/Sinks            | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Retail Sales               | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Rides                      | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Signs/Banners/Balloons     | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Stages                     | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Street/Lane Closures       | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Tents                      | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |
| Waste Receptacles          | <input type="checkbox"/> Y <input type="checkbox"/> N |                             |                                   |

**Private Property**

Will any portion of the event occur on private property within the City of Claremont? Y N

If yes, please provide address: \_\_\_\_\_

Have You Obtained Written Approval from The Owner's for The Use of The Property? Y N

If YES, attach a copy of the written approval with property owner's signature.

If NO, you must file written approval before a permit will be processed.

**Street or Right-Of-Way Closure**

If your event involves any activity which will obstruct a city street or right-of-way, please complete the following section. Please note that this does not constitute a street closure permit application and is for information purposes only. A separate street closure permit must be submitted to the engineering department for processing.

Name of streets to be closed: \_\_\_\_\_  
\_\_\_\_\_

Portion (i.e. north side, entrance side, parking lane, etc.):  
\_\_\_\_\_  
\_\_\_\_\_

Limits (i.e. between which cross streets):  
\_\_\_\_\_  
\_\_\_\_\_

**Closure Time Frame**

Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Written narrative of route to be traveled (if applicable):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Equipment and personnel that will be utilized to close streets (if applicable):  
\_\_\_\_\_  
\_\_\_\_\_

## Additional Event Details

## Event Map

Please include a site map of your event and clearly plot the following that apply to your event.

Check all that apply:

- |  |  |
|--|--|
| <input type="checkbox"/> Route (run, walk, cycling, parades, etc.) | <input type="checkbox"/> Traffic Control Plan for Street/Lane closures requested |
| <input type="checkbox"/> Entertainment/ stage location(s)          | <input type="checkbox"/> Speaker location(s)                                     |
| <input type="checkbox"/> Concession area(s)                        | <input type="checkbox"/> Cooking area(s)   |
| <input type="checkbox"/> Vendor(s)                                 | <input type="checkbox"/> First Aid station(s)                                    |
| <input type="checkbox"/> Portable Toilet(s)/Sinks                  | <input type="checkbox"/> Participant staging area(s)                             |
| <input type="checkbox"/> Spectator area(s)                         | <input type="checkbox"/> Event Coordinator command post                          |
| <input type="checkbox"/> Trash container area(s)                   | <input type="checkbox"/> Access & Parking for Disabled                           |
| <input type="checkbox"/> Site of fireworks or pyrotechnics         | <input type="checkbox"/> Utility Connection locations (i.e. power & water)       |
| <input type="checkbox"/> Parking area(s)                           | <input type="checkbox"/> Other (please describe) _____                           |

**Application Indemnification and Agreement**

I, the undersigned, in consideration of my organization’s participation in this activity, and intending to be legally bound for its members, their heirs, executors and administrators, do hereby release and discharge the City of Claremont and their respective officers, directors, employees, volunteers, partners and contractors, jointly and severally, from any and all liability from personal injury, accident, illness, death, property damage or other occurrence which members of my organization may suffer in any manner whatsoever arising out of or resulting from our participation in the above mentioned program(s), and I expressly assume ALL risks of our participation in this activity, including, without limitation, injury as a result of the acts of omission of the above parties or some defect in or on their property of any of them, whether caused by negligence or otherwise, except for illness and injury resulting directly from solely gross negligence of willful misconduct on the part of the City or its employees and I agree to indemnify, save, hold harmless and defend each and every one of the above parties of and from any and all loss, damages, expenses, costs, and attorney’s fees arising out of or resulting from my organization’s participation in this activity. I certify that I have read and understand this waiver and release.

Please read each statement. Initialing next to each statement indicates your understanding and agreement with the statement.

Applicant is an authorized agent of the organization submitting the application.

Applicant agrees to abide by the City of Claremont Insurance Requirements.

Applicant agrees to pay all City department service charges incurred as a result of the event.

Applicant agrees to pay to the City of Claremont all costs the City may incur as a result of any failure to fully comply with all of these conditions.

Applicant agrees to abide by all of the terms and conditions contained in this application, any permit(s) issued in connection with the special event and Chapters 11 and 12.42 of the Claremont Municipal Code.

Applicant understands and agrees to abide by the terms and conditions of the Noise Ordinance pursuant to Chapter 16.154.010 of the Claremont Municipal Code. Applicant is still subject to California Penal Code 1415 PC.

Applicant declares under penalty of perjury under the laws of the State of California that the information provided in this special event application is true and correct to the best of applicant’s knowledge. Applicant further acknowledges that the special event may be cancelled if this application contains any intentional misrepresentations.

Issuance of a Special Event Permit does not absolve the applicant from obtaining additional local, state or federal approvals or permits.

Applicant’s signature below signifies that applicant has read and understands ALL the rules and regulations outlined in the Special Event Permit Application, and the Claremont Municipal Code.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date