



Special Event Permit Application

CALL FOR A PRE-APPLICATION CONSULTATION

1055 South Grady Way-Renton, WA 98057

Phone: 425-430-6600 Fax: 425-430-6603

www.rentonwa.gov

Note:

Permit application and non-refundable \$50 fee to be submitted at the 6th floor front counter Monday - Friday, 8am - 4 pm. *

Permit application needs to be received a minimum of 90 days prior to event.

Special Event Committee pre-event meeting(s) may be required.

Final permit will be issued when all conditions are met.

APPLICANT INFORMATION

Applicant name/Responsible person/s:		Unified Business Identifier: (UBI)	
<input type="text"/>		#	<input type="text"/>
Title:		Renton Business License:	
<input type="text"/>		#	<input type="text"/>
Mailing Address:	Street Address:	501(c)(3) <input type="radio"/> Yes <input type="radio"/> No	
	<input type="text"/>		
	City, State, Zip		
	<input type="text"/>		
Daytime phone number:	Cell phone:	Fax:	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Email:			
<input type="text"/>			
Secondary contact person and title:		Phone number:	
<input type="text"/>		<input type="text"/>	
		Email:	
		<input type="text"/>	
Day-of-event emergency contact name(s) and number(s) if different than above:			
<input type="text"/>			
Authorization of property use: Please attach proof of authorization of land use from property owner/copy of rental agreement.			

EVENT INFORMATION:

Sponsoring/non-profit organization(s):		
Event name:	Proposed event date(s):	
Event website address:		
Hours of operation:	Set-up date/time:	Dismantling date/time:
Event location: (Describe in detail areas to be used. Attach additional documents if necessary)		
Will roads need to be closed as a result of your event? <input type="radio"/> Yes <input type="radio"/> No (Attach maps/routes and traffic control plan with a written narrative of the route).		
Size of event: (Estimated number of participants/spectators)		
Has this event occurred in the past? If yes, specify dates and locations:	Is this intended to be annual?	
	<input type="radio"/> Yes <input type="radio"/> No	
Is this event co-sponsored by the City? If yes, who is the staff contact and department?		
Activities planned: (Describe event - concert, dance, exhibition, festival, parade, race, ride, run, walk, protest, other). Attach additional documents if necessary).		

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EVENT NAME:

Please mark boxes where applicable to your event (additional permits and fees may be required):

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> Alcohol | <input type="checkbox"/> Admission Fee | <input type="checkbox"/> Amplified Sound | <input type="checkbox"/> Animals |
| <input type="checkbox"/> Booths/Vendors | <input type="checkbox"/> Carnival Rides | <input type="checkbox"/> Electricity Source | <input type="checkbox"/> Fireworks |
| <input type="checkbox"/> Food Service | <input type="checkbox"/> Floats | <input type="checkbox"/> Gambling | <input type="checkbox"/> Generators |
| <input type="checkbox"/> Heating Devices | <input type="checkbox"/> inflatables | <input type="checkbox"/> Motorized Vehicles | <input type="checkbox"/> Marching Units |
| <input type="checkbox"/> Open Flame | <input type="checkbox"/> Portable Restrooms | <input type="checkbox"/> Parking | <input type="checkbox"/> Stage/Scaffolding |
| <input type="checkbox"/> Tents/Canopies | <input type="checkbox"/> Water | <input type="checkbox"/> Signage | <input type="checkbox"/> Other |

For each checked box, please provide a brief description and additional information using the back or additional pages if needed, and attach a legible map/site plan with location of the items indicated above and any other details you think may be helpful:

Describe your medical/security or emergency plans:

Discuss your parking plans for participants, spectators, and vendors/staff (attach additional documents if necessary):

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EVENT NAME:

Indemnification—Hold Harmless

Applicant shall defend, indemnify and hold harmless the City of Renton, its officers, officials, employees and volunteers, from and against any and all claims, suits, actions, or liabilities for injury or death of any person, or for loss or damage to property, that arises out of the event or from any activity, work or thing done, permitted, or suffered by applicant during the event, except only such injury or damage as shall have been occasioned by the sole negligence of the City.

Insurance *

The applicant may be required to procure and maintain for the duration of the event, one million dollars (\$1,000,000) commercial general liability insurance per occurrence; combined single limits, two million dollars (\$2,000,000) aggregate, and provide written proof of such insurance prior to permit issuance. The insurance policy shall be written on an occurrence basis, shall name the City of Renton as a Primary and Non-contributory Additional Insured, shall be written for a period not less than twenty-four (24) hours prior to the event and extending for a period not less than twenty-four (24) hours following the completion of the event.

The City reserves the right to require other forms of insurance in addition to the commercial general liability, if the City Risk Manager determines that such additional form of insurance is necessary for the particular type of event.

Revocation of Permits

The permit may be revoked by the City at any time if, by reason of disaster, public calamity, riot or other emergency or exigent circumstances, the City determines the safety of the public or property requires such immediate revocation. The City may also revoke permit issued if the Special Event Committee finds that the permit has been issued based upon materially false information or if the event exceeds the scope of the permit or fails to comply with any condition of the permit.

Applicant Signature

I, (print name) declare under penalty of perjury under the laws of the State of Washington that I am the authorized representative to act for above mentioned event organization and that the foregoing statements and answers herein contained and the information herewith are in all respects true and correct to the best of my knowledge and belief.

Applicant Signature

Dated this _____ day of _____ 20____

City of Renton Approval

City of Renton Community Services Department Designee

Dated this _____ day of _____ 20____

*The fee and insurance may be waived for certain qualifying First Amendment activities.