

INSTRUCTIONS SPECIAL EVENT PERMIT APPLICATION

City of Cleveland Department of Public Works Office of Special Events 500 Lakeside Avenue, First Floor Cleveland, Ohio 44114

Phone: 216.664.2484 Hours of Operation: 9:00 am to 5:00 pm Weekdays <u>Specialevents@clevelandohio.gov</u>

When do you need an Event Permit?

Any person, or entity, planning to conduct a Special Event on City of Cleveland parks and/or properties are required to obtain a permit by completing the enclosed application and filing it with Office of Special Events. Special Event Permits are issued under Cleveland Codified Ordinance § 131.07. Applicants should review this Code Section before applying for a permit.

Special events would include, but not be limited to, races, walks, marathons, festivals, farmer's markets, resource fairs, concerts, motorcycle runs, carnivals and council-matic events.

a. "Special Event" means a preplanned event or series of events of less than a week's duration, sponsored by a public or private person or entity, which is: (1) located wholly or partially on property which is owned or maintained by the City of Cleveland; or (2) located on any other property and requires for its successful execution, the provision and coordination of municipal services to a degree significantly over and above that which the City of Cleveland routinely provides under ordinary everyday circumstances. Every person or entity sponsoring a special event involving sale of items or Alcohol (F Permit required), admission for which a charge or ticket is required or limited to invitation only, or closure of more than (250 linear feet) one-half (1/2) linear mile of City streets shall obtain a permit under the Cleveland Codified Ordinance §131.07. Applicants should review this Code Section before applying for a permit.

Activities under Cleveland Codified Ordinance § 131.07 must go through the Special Events Committee process prior to the issuance of the permit. This is a single event permit, which expires immediately following the permitted end time of the event.

Applicants are responsible for all additional permits, signatures, and fees that may be required for the Special Event.

Obstruction/Closures held with a Special Event must be submitted to the Division of Assessments & Licenses at least fourteen (14) days before the proposed activity is to commence. Please note, this timeframe does not include the additional reviews and timeline for the Special Events Committee process.

How to File an Event application

In Person: Office of Special Events, 500 Lakeside Avenue – First Floor, Cleveland, OH 44114.

Applications are accepted Monday-Friday, 9:00 am - 5:00 pm

Fax: 1-216-420-8122

Email: Complete application and submit documents to specialevents@clevelandohio.gov.

What to Bring or Submit to the Office of Special Events

- 1) Fully complete and signed application;
- 2) Certificate of Insurance General Liability and Property Casualty, in the amount of \$1 million or greater (City of Cleveland must be listed as an Additional Insured and Certificate Holder):
- 3) Site Map of the Event location.
 - a. An aerial street map on 8 ½ x 11 sheet that clearly shows the type of equipment and activities that will be on-site.

Approved Permits are obtained at the Office of Special Events

Once the permit application is submitted, the applicant will be scheduled to present their logistics to the City of Cleveland's Special Events Steering Committee. Questions and information concerning the Special Events Committee process should go to the Office of Special Events at 216-664-2484 or specialevents@clevelandohio.gov.

Applicants are responsible for all additional permits, signatures, and fees that may be required for the Special Event. Copies of additional permits must be submitted to the Office of Special Events prior to receiving approval from the special events office.

Documents can be submitted by email (specialevents@clevelandohio.gov), or mail (500 Lakeside Ave, First Floor - Cleveland, OH 44114).

Note: City of Cleveland employees may not provide legal advice to the public. The information provided is for informational purposes only and is not legal advice. For questions regarding the application of a city ordinance or regulation, you should consult an attorney regarding your specific situation.

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Phone: 216.664.2484 Hours of Operation: 9:00 am to 5:00 pm Weekdays Specialevents@clevelandohio.gov APPLICATION DATE: ACTIVITY TYPE ☐ FARMER'S/FLEA MARKET ☐ ATHLETIC EVENT/RACE/RECREATION \Box Concert/Performance $\quad\Box$ Cultural Event $\hfill \square$ Media/Political Event CHECK ALL THAT ☐ FAIR/FESTIVAL ☐ FIRST AMENDMENT ACTIVITY/RALLY ☐ MARKETING/PROMOTION ☐ PRIVATE EVENT ☐ COUNCIL-MATIC EVENT ☐ OTHER (DESCRIBE): APPLIES: SECTION A - APPLICANT INFORMATION Activity Name: **Installation Start Date Installation Time** Start Time Activity Start Date Activity Date(s): Teardown Start Date Teardown Time **End Time** Activity End Date Applicant/Authorized Agent/Permit Holder Name: Organization/Business Name: Organization/ Business Type: □For Profit \square Non Profit – Tax ID #: Organization/ Business Street Address: State: Zip: City: SECTION B - ONSITE CONTACT Primary Name: Mobile Phone: Email: Secondary Name: Mobile Phone: Email: Event Hotline Number for Public Information: Event Website for Public Information: SECTION C - ACTIVITY INFORMATION Is this Please list the proposed activity location and attach a map showing the logistical location a City layout for your activity. Activity of Cleveland Location: Park? $\square Yes$ \square No Describe the scope of your activity (attach detailed proposal – for larger scale events). Activity Description: Admission Fee required to enter your event? $\Box Yes$ Pre-Sale Tickets: □Yes \square No Cost: \square No If yes to any Admission/ Ticket questions, you must complete an On-Site Ticket Sales: □Yes \square No Cost: Admission Tax Registration form the Division of Assessments &

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Will your event be marketed, promoted, or advertised? $\square Yes$

of Staff and/or Volunteers Per Day:

Licenses located at 601 Lakeside Avenue, Room 122, Cleveland, OH

Activity Size:

Activity Promotion: # of Participants Per Day:

Will you be accepting donations on the premises? $\square Yes$

 \square No

TOTAL Number of Attendees Per

Day:

 \square No If Yes, please describe:



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Phone: 216.66	4.2484 Hours of Operation: 9:00 am to 5:00 pm We	ekdays <u>Specialevent</u>	s@clevelandohio.gov	
Activity Components (Check all that applies): Utilities (Check all that applies):		□Drone(s) Use □ Fencin □ Live Animal Attractions ling* □ Stage(s)* □ ' " " " " " " " " " "	ng* □ Merchandise Sales Table(s) □ Tent(s) *	
Sanitation Plan:	Portable Toilets:	Hand Hygiene Stations/	Sanitizer:	
	Describe your clean-up, disinfection, and recycling plans for your activity (attach detailed proposal – for larger scale events).			
Event Gathering Readiness:	Applicants are strongly encouraged to help prevent the spread of COVID-19 with facial coverings/masks, social/physical distance, sanitizing, and messaging.			
Food/Beverage (Check all that applies):	□ Sale of Food/Beverages* □ Distribution of Food/Beverages* □ Sale of Alcoholic Beverages* □ Distribution of Alcoholic Beverages* □ Onsite Food Preparation* □ Other (Describe): *Additional City of Cleveland Permitting will apply.			
Medical Plan:	A Medical Plan is to ensure proper and adequate medical services are in place to protect the health and safety of the participants and/or attendees at an event function. It is required to have a basic first aid kit and a CPR trained personnel onsite during all times of your activity. Cleveland Emergency Medical Services (EMS) provides medical coverage for events within the City of Cleveland and may be available for a fee. The use of Cleveland EMS is optional. If you are interested in hiring Cleveland EMS for your event, a Two (2) weeks' notice is requested to ensure medical coverage; medical coverage with less notice than two (2) weeks cannot be guaranteed. Inquiries for Cleveland EMS services, please contact 216-664-6023.			
Insurance:	All activities are required to provide proof of liability insurance. General liability and property & casualty coverage amount must be no less than \$1 million dollars (\$1,000,000.00); naming the City of Cleveland as an additional insured for all activity dates including installation and teardown. Insurance Provider Name:			
	Street Address:			
	City:	State:	Zip:	
	Name of Agent/Contact:			
	Telephone/Mobile Phone:	Email:		
	Limits of Liability/Property Damage Coverage:	Limits of Liquor Liability	y (if applicable):	
Activity Notification:	All activities are required to serve notices to resider the event will be conducted and to furnish evidence Please note: If your event space is located on prapproval/notification letters from the property application.	thereof to the Office of Spe rivate property, you must	cial Events. t submit a written	

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	Installation and Teardown Dates:			
Parking Plan	Activity Participants (Production Trailers, Media Vehicles, Vendor Vehicles, Staff and/or Volunteers):			
(Describe parking arrangements):	Activity Attendees/Spectators:			
ı	Are your requesting the use of parking lanes	s for your event? \square Yes \square No		
	Please note, if you are requesting street parking for your event, additional City of Cleveland permitting will apply.			
	IVITY SECURITY INFORMATION			
A written Security Plan must be submitted to the Cleveland Police Special Events Coordinator no later than 60 days prior to the date of your event and must be approved by the City of Cleveland, Chief of Police or his/her designee.				
Once the written security plan has been submitted, the Cleveland Division of Police will review the plan and retains the final authority to require a minimum number of licensed private security guards, volunteers, staff positions as well as police officers and traffic controllers necessary to staff your proposed event.				
The Cleveland Division of Police has final authority over your event's safety requirements. If the number of Private Security & Law Enforcement Professionals approved by the Police Department is not provided, and/or proves inadequate, the Cleveland Division of Police maintains the right to shut down any or all components of your event, including the authority to conclude alcohol sales, and/or to provide additional police services that will be billed directly to the event sponsor at the contractual rates for staffing and equipment.				
	r venue which have a likelihood of motor vehi sing / deflecting motor vehicles.	icle intrusion are required to be protected with a barrier		
Private Security				
Name of Contact:				
Mobile Phone:	Email A	Address:		
SECTION E - ACKNOWLEDGEMENT				
By signing, Applicant acknowledges that they have read and understand Codified Ordinance §131.07, Special Event Permits. I certify that the above information contained in the application is true and correct to the best of my knowledge and I agree to inform the Office of Special Events of any changes in this application at least (30) days prior to the date of the event. Applicant agrees to comply with all other requirements of the City if Cleveland, Cuyahoga County, State of Ohio and any other applicable entity which may pertain to the use of the Event Venue and the conduct of the Event. If during the course of any event or activity for which the Department of Public Works has granted a permit, the activities of any participant(s) or spectators has become abusive or destructive to City of Cleveland property or equipment, or have become adverse to the intent for which the permit has been granted, the Department of Public Works reserves the right to immediately adjourn such event or activity. I have read and agree to abide by all the rules and regulations stated above.				
APPLICANT SIGNATURE				
APPLICANT PRINT		TITLE OF APPLICANT:		
APPLICANT SIGNAT	TURE:	DATE:		

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COUNCIL-MATIC EVENT EQUIPMENT REQUEST FORM (COUNCIL SPONSORED EVENTS ONLY)						
Name of Council Sponsor						
Ward	Main Phone					
Below is a list of equipment that is provided through the Division of Parks. Please list the number of equipment you are requesting. Please note: City Equipment will be distributed based on request, and evenly amongst Council-Designated Events occurring within the same timeframe.						
Equipment	Type and Description	Amount Requested				
Tables	Heavy Duty Aluminum (MAX 15) Plastic (MAX 8)	Number Requested:				
Chairs	Plastic Folding (MAX 250)	Number Requested:				
Portable Toilets	Regular Units (MAX 9) ADA Unit (1)	Number Requested:				
Trash Cans	Yellow Plastic-33 Gal (MAX 30)	Number Requested:				
Generators (Please Note: Refill of Fuel is responsibility of Permit Holder)	Small Unit-Used for Show Wagon (MAX 1) Large Units (MAX 4)	Number Requested:				
, , , , , , , , , , , , , , , , , , ,	15'x15'- Red, White & Blue (MAX 1)	Number Requested:				
Tents	20'x30'- Green & White (MAX 1)	Number Requested:				
	20'x40' – Blue & White (MAX 1)	Number Requested:				
	4'x8' Platforms w/ Grey Carpet (MAX 6)	Number Requested:				
4'x8' Platforms	4'x8' Platforms (MAX 24)	Number Requested:				
	Steps for Platforms (MAX 6)	Number Requested:				
Mobile Stage w/ Generator	8ft. 6' wide, 34' long, 13ft. 6" clearance, open stage area of 28ft wide X 14ft deep. Canopy extends 2ft beyond stage (GENERATOR INCLUDED) (MAX 1)	Number Requested:				
Show Wagon Stage (Please note: Show Wagon performance must be scheduled through Division of Recreation)	(8ft wide 33' ½" long short side 22' ½" long)	Number Requested:				

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