



**CITY OF GRAND HAVEN
SPECIAL EVENT APPLICATION**

Non-refundable application fee must accompany application
City of Grand Haven Resident-\$100.00
Non-Profit-\$100.00
Non-Resident/Business Rate-\$150.00

The application will be reviewed by city staff to determine the following criteria:

- Availability of space requested
- Compliance with City Ordinances
- Special permits required
- Charges the organization will incur when City assistance and/or services are required
- Security requirements
- Environmental issues/effects on surrounding areas

OFFICE USE ONLY
Received by: _____
Date Received: _____
Application Fee Paid:
<input type="checkbox"/> \$100.00
<input type="checkbox"/> \$150.00

Today's Date: _____

Host Organization/Applicant Information

Primary Event Host Organization/Applicant:

Name: _____

Company Name: _____

Address: _____

City _____ State: _____ Zip: _____

Phone (____) _____ Cell (____) _____ Fax (____) _____

Email: _____

Host Website (if applicable): _____

EIN #: _____

Primary Organization Status

____ Non-Profit or Charity (attach 501 c3 form) ____ For Profit or Other _____

Secondary Event Host Organization/Applicant:

Name: _____

Company Name: _____

Address: _____

City _____ State: _____ Zip: _____

Phone (____) _____ Cell (____) _____ Fax (____) _____

Email: _____

Host Website (if applicable): _____

EIN #: _____

Secondary Organization Status

____ Non-Profit or Charity (attach 501 c3 form) ____ For Profit or Other _____

Event Information:

Name of Event: _____

Has this event been held in the past? Yes No

Type of Event (check more than one if applicable):

- Festival Celebration Parade Carnival Private Party Concert Walk Run
 Performance Cycling Race Community Event Fireworks Fundraiser Athletics
 Other (please specify) _____

Event Location (check more than one if multi-venue event):

City Beach City Park Parking Lot Street Other, please specify _____

Name of Park/Parking Lot/Street (s): _____

Event Description and Goals:

Date(s) of Event:

Set-Up

Day 1 _____ Start Time _____ End Time _____

Day 2 _____ Start Time _____ End Time _____

Event Dates:

Day 1 _____ Start Time _____ End Time _____

Day 2 _____ Start Time _____ End Time _____

Move-out/break-down

Day 1 _____ Start Time _____ End Time _____

Day 2 _____ Start Time _____ End Time _____

Event Components

As applicable, the Event Organizer is responsible for obtaining any and all applicable event permits, inspections, licenses and certification through the appropriate City Departments and/or county/state agencies.

Please check all that apply to the proposed event:

(Note: additional permits/inspections may be required)

- | | | |
|---|---|--|
| <input type="checkbox"/> Ticketing | <input type="checkbox"/> Food Trucks | <input type="checkbox"/> Video Screens |
| <input type="checkbox"/> Stage | <input type="checkbox"/> Fencing | <input type="checkbox"/> Media Stations |
| <input type="checkbox"/> Live Entertainment | <input type="checkbox"/> Amusement Rides | <input type="checkbox"/> Parking/Shuttle |
| <input type="checkbox"/> Bands | <input type="checkbox"/> Fireworks/Pyrotechnics | <input type="checkbox"/> Other, please specify |
| <input type="checkbox"/> Sound System | <input type="checkbox"/> Tents/canopies | _____ |
| <input type="checkbox"/> Food | <input type="checkbox"/> Sanitation | _____ |
| <input type="checkbox"/> Alcohol | <input type="checkbox"/> Portable Toilets | _____ |
| <input type="checkbox"/> Food Vendors | <input type="checkbox"/> Media Stations | |

ADMISSION & ATTENDANCE:

Is the event Open to the public Private Invitation Only

Is there an admission/entry fee: Yes No (please provide amount) \$ _____

Estimated attendance per day:

Day 1 _____ Day 2 _____ Day 3 _____

ENTERTAINMENT

Are there musical entertainment features related to your event? Yes No

If yes, what type of music will be performed or played?

- | | |
|---|---|
| <input type="checkbox"/> Live Acoustic | <input type="checkbox"/> Other, please specify: |
| <input type="checkbox"/> Live Amplified | _____ |
| <input type="checkbox"/> D.J. only | _____ |

Organizer is required to provide all power needed for event through a licensed electrical contractor and such work approved through electrical permit.

Please list all bands, emcees, speakers that are scheduled to appear:

Also, include event schedule/program with details on artist line-up

FOOD/BEVERAGE/ALCOHOL

Will cooked food be sold or given away? Yes No

If yes, please describe how food will be cooked and/or prepared on site:

Please specify method:

Gas

Electric

Grill/Charcoal

Fryers

Other, please specify: _____

*Please note that no pre-cooked food is allowed to be distributed. Organizer must provide name and contact information for all food vendors no later than 30 days prior to the event, as well as a copy of the Ottawa County Health Department Food License, which must also be available on site on the dates of the event.
Fire extinguishers are required at each cooking site.*

Will alcoholic beverages be served? Yes No

NOTE: Per city ordinance, sale and consumption of alcohol on City of Grand Haven property requires the approval of City Council.

If yes, check all that apply: Beer Wine Spirits

Please describe your security plan to ensure the safe sale or distribution of alcohol at your event:

A State of Michigan permit will be required if selling alcoholic beverages; a copy of the permit must be submitted to the Special Events/Community Affairs Manager. No glass bottles are allowed to be sold or given for any beverage. Liquid must be poured into plastic cups.

The Organizer is responsible for ensuring that event staff is properly trained to serve alcohol and that alcohol service will be refused to individuals who appear intoxicated and that all sales of alcohol will be ceased one hour before the official end of the event.

Signs shall be posted on site that indicate that persons must be at least 21 years of age to purchase and/or consume alcoholic beverages at this event. Alcohol sales and consumption is strictly prohibited for all events involving youth groups.

Will there be food trucks at the event? Yes No

FOOD SERVICE INFORMATION

As the applicant, you are responsible to assure that each vendor has obtained the required food service license. List all invited food service vendors, or the source of the food product.

Contact the Ottawa County Health Department for information regarding food licensing regulations.

Food Vendor:

Contact Person: _____

Contact Phone: _____

Sales Tax License Number: _____

Description of food and preparation of food:

Food Vendor:

Contact Person: _____

Contact Phone: _____

Sales Tax License Number: _____

Description of food and preparation of food:

Food Vendor:

Contact Person: _____

Contact Phone: _____

Sales Tax License Number: _____

Description of food and preparation of food:

Food Vendor:

Contact Person: _____

Contact Phone: _____

Sales Tax License Number: _____

Description of food and preparation of food:

WATER & RESTROOMS

Will your event require potable water? Yes No

Will your event require portable toilets? Yes No

If yes, total number of toilets _____

Number of ADA accessible toilets: _____ (10% of restrooms must be ADA accessible)

Restroom Company: _____

Equipment Setup Date: _____ Time: _____

Equipment Pickup Date: _____ Time: _____

PARKING, SHUTTLING & ROUTING

Please explain the parking, shuttle bus and/or pedestrian routing plans for your event:

Harbor Transit can be contacted for shuttle services: 616.842.3220 (Fees will apply)

ACCESSIBILITY PLAN

Please describe your plan for people with special needs participation, parking, and viewing:

EVENT STAFFING

Please describe your plan for staff and volunteer management at the event:

Upon application review, City Departments may determine that additional staffing is required to support the event.

RACE ROUTES

Will you be using one of the City's approved race routes for 5k or 10k runs? Yes No

If not, please describe the race route that you are requesting:

Upon application review, City Departments will determine appropriate route for individual events. Requested routes may not be possible based on other events, road construction or safety concerns.

VENDORS

Are you planning on having any type of merchandise/novelty item vending at your event? Yes No

If yes, please describe:

AMUSEMENT RIDES

Are you planning any type of amusement rides as part of this event? Yes No

Inflatable Yes No Mechanical Yes No

If yes, please provide the name of your contractor: _____

Describe rides for event:

FIREWORK/PYROTECHNIC DISPLAY- Use of fireworks/pyrotechnics requires the approval of City Council

Will your event include fireworks or other pyrotechnics? Yes No

If yes, please provide name of company: _____

Describe the display for the event:

Grand Haven Fire Marshall Approval required ensuring display event is conducted safely

TENTS/CANOPIES

Are there tents or canopies planned for this event? Yes No

If yes, please provide name of company: _____

Tents (enclosed) Size _____ How many _____

Size _____ How many _____

Canopies Size _____ How many _____

Size _____ How many _____

Tents over 20' x 20' require a tent permit and must be inspected by the Fire Marshall the day of event

SANITATION

Organizer is responsible for leaving the venue clean and clear of debris (trash, gray water, grease disposal). Please describe your plan for cleanup and removal of waste, recyclable goods and garbage during and after your event:

Sanitation/Recycling Company Name: _____

Contact Person: _____

Equipment Setup Date: _____ Time: _____

Equipment Pickup Date: _____ Time: _____

Dumpsters/roll-offs can only be ordered from the Department of Public Works and will be billed to the event coordinator

CITY SUPPORT SERVICES REQUESTED

Are you requesting any City services for the event, including staff and equipment? Yes No

If yes, please describe:

Please check boxes to request services:

- | | | |
|--|---|---|
| <input type="checkbox"/> Electric Hook-Up-\$50 | <input type="checkbox"/> Water Hook Up-\$50 | <input type="checkbox"/> Banner Placement-\$100-\$150 |
| <input type="checkbox"/> Parking Lot-\$200 | <input type="checkbox"/> Barricades-\$5 each | <input type="checkbox"/> Portable Stage-\$400 |
| <input type="checkbox"/> Sound System (Waterfront Stadium Only)-\$75 | <input type="checkbox"/> Cardboard Trash Boxes-\$6 each /#_____ | |

Additional Permits/Fees that may be required:

Park Use: See City Fee Schedule

- Park/Beach/Public Use Permit Application Fee-\$25.00

- Tent Permit Application & Inspection Fee: \$125.00

Affidavit of Applicant & Hold-Harmless Acknowledgement

By signing this application, you are certifying that you understand the information in this application to be true and correct to the best of your knowledge, and that you agree to comply with the City of Grand Haven Code of Ordinances and all City rules, regulations and policies. Should the City grant approval and a Special Event Permit be issued, you also agree to comply with any other rules and requirements provided by law under the condition that the responsibilities of the applicant shall not be transferred, assigned or conveyed without the written consent of the City. Non-compliance may result in the revocation of permit.

In consideration of the privileges that may be granted in issuance of a Special Event Permit, the Host Organization shall, to the fullest extent permitted by law, indemnify, defend and hold harmless the City, and all officials, agents and employees of the City, from and against all claims which may result from allowing Organizer to utilize the public right-of-way or City owned property. "Claim" as used in this agreement means any financial loss, claim, suit, action, damage, or expense, including but not limit to attorney's fees, attributable for bodily injury, sickness, disease or death, or injury to or destruction of tangible property including loss of use resulting there from.

The Host Organization's obligation to indemnify, defend, and hold harmless includes any claim by Host Organization's agents, employees, volunteers, representatives or any subcontractor or its employees. Said indemnification shall not include claims resulting solely from the act, omission, negligence, or other fault on the part of the City, its official, agents, or employees. The City of Grand Haven assumes no liability for the selection, background screening on non-City event management, staff, volunteers, and others.

I further certify that I, on behalf of the Host Organization, am also authorized to commit that organization, and therefore agree to be financially responsible for any costs and fees that may be incurred by or on behalf of the event to the City of Grand Haven.

SIGNATURE

PRINTED NAME/TITLE

DATE

Thank you for completing your Special Event Application.

Please submit your completed application (including any additional forms, tent permits, park permit application) and applicable fee along with the detailed site plan to the City of Grand Haven, Community Affairs Manager (Community Center 421 Columbus Ave.) during the hours of Monday through Friday 8:00 a.m.-5:00 p.m. or via email to cseise@grandhaven.org

Submission of a Special Event Application constitutes a request to use City property for the purpose of an event and does not guarantee event approval.