

**City of Washington**  
**COMMUNITY PAVILION**  
**SPECIAL EVENT APPLICATION**  
**2019**



**Thank you for your interest in the City of Washington's Community Pavilion**

**[The Rental Fee for the Community Pavilion is \\$350 per day and a Security Deposit of \\$200 is required.](#)**

**[A reduced rate of \\$200 per day is available for non-profit organizations based on availability.](#)**

Please complete the attached Special Events Application and return it to my office. You will be notified within 7 to 10 working days as to whether your application has been approved or denied.

Christy Bean Rowing  
Director, City of Washington Citywide Development Corporation  
273 South Main Street, Washington PA 15301  
Crowing@pcrg.org

# Community Pavilion

## SPECIAL EVENT APPLICATION FORM

Please complete the following information completely and legibly. Contact information should be for the contact person for the Applicant in the event additional information or instruction is needed.

### A. **EVENT INFORMATION**

1. Event Name

2. Event Type:      Parade                      Festival                      Musical Event      Exhibition  
                           Run/Walk                      Bike Race/Ride            Dance  
  
   Other: \_\_\_\_\_

3. Event Date(s): \_\_\_\_\_ Day(s) of the week: \_\_\_\_\_

4. Facilities to be used:    Pavilion    Parking Lot    Sidewalk

5. Event times:   Set-Up Time:         \_\_\_\_\_ am/pm  
                      Event Start Time:     \_\_\_\_\_ am/pm  
                      Event End Time:         \_\_\_\_\_ am/pm  
                      Tear-Down Time:        \_\_\_\_\_ am/pm

6. Estimated crowd:    Estimated participants / registrants: \_\_\_\_\_  
\_\_\_\_\_

**B.**

**APPLICANT INFORMATION**

7. Name of Individual or Organization Applying to use the Community Pavilion (“Applicant”. Also, as used in this Application, the word “you” and “your” refers to the Applicant.)

Is the Applicant an IRS 501(c)(3) not-for-profit organization? Yes \_\_\_ No\_\_\_

Contact Name: \_\_\_\_\_ Contact Title: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Numbers: Office: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

8. Billing Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

9. Event On-Site Contact Person (Name & Title): \_\_\_\_\_

Phone Numbers: Office: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

**C.**

**EVENT DESCRIPTION & HISTORY**

10. Please describe the event to be held in as much detail as possible. Attach additional sheets if necessary.

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11. Has this Event been held in Washington or any other city previously?  Washington  Other

Recent History:

<u>Date</u>	<u>Event Name</u>	<u>Neighborhood</u>	<u>City</u>	<u>Attendance</u>
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#### **D. PUBLIC SAFETY REQUIREMENTS**

*All services for Police, Fire, and EMS are at an additional costs and not included in the rental fee*

12. **Washington Police:** What services are requested from the Washington Police?

Road Closures  Security

What Service are requested: \_\_\_\_\_  
\_\_\_\_\_

What are your security plans for the event?  Hiring Off-Duty Washington Police  
 Private Security Firm  
 Other:

14. **Washington Fire Department:** Some aspects of an event may require additional permits from the Washington Fire Department.

13. **Emergency Medical Services:** Are you using EMS for your event?

Yes  No

If Yes what Services will you be using Whatever services that will be on hand for the parade.\_\_\_\_  
*EMS coverage is required at all 5K and larger races. EMS is also required for any events with over 5,000 combined participants & spectators*

**E.**

**DEPARTMENT OF PUBLIC WORKS**

*All services for the Department of Public Works, whether or not identified or requested in this application, are at an additional cost and are not in rental fee.*

15. Barricades, Fencing, and other services:

a. Are you closing any roadways for your event:     Yes                       No

If Yes, please list the exact location and number of barricades or fencing needed at each location. Attach additional sheets if necessary.

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16. Clean Up Plan: Please list your clean-up plans below

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17. Recycling:            Events that expect 200 or more individual guests per day are encouraged to recycle beverage containers such as glass, plastics, aluminum & steel cans (co-mingled material), and corrugated cardboard

a. How will recycling be provided at your event? (Check ONE only)

We do not expect to have more than 200 individual guests per day

Private/hauler contractor

Contractor name: \_\_\_\_\_

Self-collection with own or rented containers

Location/Company where materials will be taken: \_\_\_\_\_

Self-collection with City-owned containers

18. Banners and Signs: Are you requesting to display banners or signs at your event?

Yes                       No

Signs are not permitted on trees, light poles and permanent sign posts.



**G. MISCELLANEOUS INFORMATION**

22. Restrooms: Please list the location of restrooms you will be providing

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Please list the number of portable restrooms you will be providing. At least one (1) handicap accessible restroom is required. One (1) portable restroom per 250 people is recommended. The Applicant is responsible for renting any required portable restrooms.

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23. Electrical: Depending on the electrical requirements for the Event, and additional electrical usage charge of (\$35.00/day may be charged

Do you need electrical power for your event ?  Yes  No

24. Decorations  Yes  No

Tape, nails, screws or any fasteners that will mar the Community Pavilion may NOT be used to fasten decorations. Applicant is responsible for removal of all decorations, and failure to remove decorations by 8:00 am the following day of the event may result in forfeiture of the security deposit.

**H. VENDING / SALES / ALCOHOL**

25. Vending & Sales: Are you having anything for sale or distributed at your event?

Yes  No

a. If Yes, please list items: \_\_\_\_\_

26. Is alcohol (beer/wine/liquor) being served, sold, distribute, or consumed at your event?

Yes  No

a. If Yes, check all that apply:  Beer  Wine  Liquor

To Purchase an Alcohol Permit from the City of Washington, you must complete an application form at least 30 days before your event. The person who purchased the permit must be at least 21 years old and take full responsibility that participants adhere to State and Local laws with regard to the consumption of alcohol. The Alcohol Permit is \$50.00 and ID is required. See the City of Washington website for more information regarding the Alcohol Permit.

*A copy of your Pennsylvania liquor license must be attached to this application. Extension of premises permits are required through the Liquor Control Board. All requests must be submitted to the LCB at least 30 days in advance.*

## INSURANCE & INDEMNIFICATION

Due to the increased risk of personal injury and/or property damage under certain circumstances, insurance will be required under the following conditions:

1. All Athletic Competition Events.
2. Any Special Event involving animal (s), fireworks, automobile (s) or other vehicle (s), including but not limited to, or motorcycles, or the sale of food.
3. Where required, the Applicant shall maintain insurance in the amount specified below to cover the entire duration of the Event. The Applicant shall attach a certificate of insurance duly executed by the officers or authorized representatives of a responsible and non-assessable insurance company, evidencing the following minimum coverage(s) and specifically identifying The City of Washington as an additional insured, which insurance shall be non-cancelable, except upon thirty (30) days prior written notice to the City of Washington:

<b>General Liability</b>	<b>Individual Occurrence</b>	<b>Aggregate</b>
Bodily injury, including death	\$500,000.00	\$1,000,000.00
Property damage	\$ 50,000.00	\$ 100,000.00

All policies must be made on an occurrence basis. Claims-made policies are not acceptable.

- a. Liquor Liability. Where the Applicant seeks to hold an event involving the sale of alcoholic beverages and has otherwise been granted all necessary permits for such purpose, he/she/it shall provide and maintain a policy or policies of Liquor Liability Protection with limits of not less than \$1,000,000. Such insurance shall be evidenced on the certificate of insurance provided to the Mayor's designee with this Application.

**Is insurance required for this event?**      Yes      No

### **Indemnification statement:**

Where insurance is required, the Applicant when filing a permit application shall represent, stipulate, contract and agree that it will indemnify and hold the City harmless against liability, including court costs and attorney's fees, and attorney's fees on appeal, for any and all claims for damage to property, or injury to, or death of persons arising from the Applicant's activities authorized by the Special Event Permit.

**Is this indemnification statement required for your event?**      Yes      No



## ACCEPTANCE OF TERMS

**Please read each of the following statements and initial each blank space to confirm your understanding of the following terms and conditions that apply to all events applied for through this application:**

Applicant understands that all Costs for Police, Fire or Public Works or other City of Washington employees performing work expressly requested by Applicant in association with the permitted event must be paid in advance, if charges are to be incurred.

Applicant understands that a copy of the approved permit for this event must remain on-site for review at all times.

Applicant understands that if Applicant's event involves the consumption of alcohol, Applicant must obtain proper permissions from the Liquor Control Board before Applicant's application can be approved.

Applicant understands that the City of Washington is not able to or responsible for providing amenities such as portable restrooms, sound systems, tables, chairs, or support materials or services outside of those agreed to in this application.

Applicant understands that it is required to secure portable restrooms, trash containers, and all other amenities required by this application to support the event.

Applicant understands that any damage or personal injury occurs during the use of the Community Pavilion, Applicant will be held responsible. Applicant agrees to indemnify and hold harmless the City of Washington from any and all claims arising from personal injury and any and all damage to the Community Pavilion or the surrounding areas directly caused by the Applicant, its guests or vendors in connection with the Event.

Applicant understands that it is responsible to pay for repairs to the Pavilion or City property for damage caused by Applicant's event, as assessed by the Public Works Director.

If insurance is required by the terms of this Application, Applicant must submit a Certificate of Insurance naming the City of Washington as Additional Insured to the Office of the Mayor no later than 10 days prior to the event. A permit will not be issued if an acceptable Certificate of Insurance is required and is not received.

Applicant's application will not be reviewed if I have not supplied a payment of \$350/day and a (\$200) security deposit. The security deposit will be refunded after the event provided there is no damage to the Community Pavilion or surrounding area and all trash, debris and equipment have been removed no later than 8:00 am the day following the scheduled event.

If Applicant cancels its event, Applicant must notify the City as early as possible so as to cut down on any cost recovery. Applicant will be charged for City services provided in advance of the event up through the time of notification.

Applicant has carefully read all of the above instructions, rules, regulations, both here and on all the pages in this application and agree to abide by the requirements contained therein.

Applicant (Legal Name of the Individual or Organization): \_\_\_\_\_

Name of Authorized Signing Party if the Applicant is an Organization (print): \_\_\_\_\_

Title/Position: \_\_\_\_\_

Signature: \_\_\_\_\_

Date:

**INDIGENCY WAIVER**

**INDIGENCY-** No application fee or cost recovery charges shall be assessed to an individual group or organization holding a First Amendment Activity for which a notarized indigency affidavit is submitted. The affidavit is attached hereto and should be submitted after you receive your invoice from the City to determine recovery costs. If you are unable to submit the original application fee, you can submit the affidavit at the time of your application.

**Notarized Indigency Affidavit  
Please turn in with Application if applicable.**

COMMONWEALTH OF PENNSYLVANIA )  
 ) SS:  
 COUNTY OF WASHINGTON )

BEFORE ME, the undersigned authority, personally appeared \_\_\_\_\_, who, being duly sworn according to law, and under penalty of perjury, deposes and says that:

1. The costs to be imposed by the City for this Event exceed the available resources of the applicant/sponsor and the applicant/organization/sponsor does not reasonably foresee such funds becoming available within a reasonable period after the Event; and
2. The sponsor is not charging participation fees or other admittance fees to the general public for the Event and has no other sponsor that is underwriting the Event.

\_\_\_\_\_  
 Name:  
 Title:

SWORN TO and subscribed  
 before me this \_\_\_\_\_ day of  
 \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
 Notary Public  
 (SEAL)

(OFFICE USE ONLY)

## City of Washington

### Community Pavilion Application Checkoff List (OFFICE USE ONLY)

Event \_\_\_\_\_

Date of Event \_\_\_\_\_

Date Reserved on Pavilion Calendar  yes  no

Available  yes  no

Received Application Fee  yes  no / /

		Date
<b>Contact</b>	Joe Thomas, Parking Director	
	Chief Wilson, Police Department	
	Chief Coleman, Fire Department	
	John Stout, Public Works Superintendent	

	Department	Amount
<b>Invoice Additional Costs</b>	Police	
	Fire	
	Public Works	
	Other Permits	
	Total Additional Costs	

Received Additional Costs  yes  no / /

