Name of Special Event: _		
Date of Event:		

Office Use Only:	
Date Rec'd:	
City Works No.:	
Site Plan Rec'd:	
COI Rec'd:	
Date Issued:	
DD Issued:	



City Clerk
City Hall, 215 SE 7th Street, Room 166
Topeka, KS 66603
www.topeka.org

Brenda Younger, M.M.C. 785-368-3940 <u>Email: cclerk@</u>łopeka.org

Special Event Permit Application

Submit this application, including all supporting documentation and the appropriate fee (\$50.00 for special event) to: City of Topeka City Clerk's Office; 215 SE 7th Street, Room 166; Topeka, Kansas 66603 or email cclerk@topeka.org. For assistance call **785/368-3940** during business hours.

APPLICATION DEADLINES:

- ✓ Serving <u>ALCOHOL BEVERAGES</u>: <u>SUBMIT APPLICATION 12 WEEKS (60 BUSINESS DAYS)</u> before your event date.
- ✓ Event occurs on a <u>HOLIDAY</u>: <u>SUBMIT APPLICATION 9 WEEKS (45 BUSINESS DAYS)</u> before your event date.
- ✓ Event occurs on a <u>REGULAR CALENDAR DAY</u> (not a holiday): <u>SUBMIT APPLICATION 6</u> <u>WEEKS</u> (30 BUSINESS DAYS) before your event date.

OTHER IMPORTANT ITEMS TO CONSIDER:

- ✓ NUMBER OF PARTICIPANTS
- **✓ SECURITY**
- ✓ FIRST AID STATIONS
- **✓ INSURANCE REQUIREMENTS**
- ✓ BARRICADE RENTAL
- ✓ SERVING ALCOHOL
- ✓ SITE MAP
- **✓ VOLUNTEERS**

General Event Information

Name of Event:				
Event Date(s)*:				
* NOTE: If this Application is may not be aware of potential:				
EVENT Start Time:	am/pm	EVENT End Time:_		am/pm
SET UP Start Time:	am/pm	TEAR DOWN End	Time:	am/pm
Full and complete descrip	tion of event:			
Location(s) / Route (if app Finish areas:	licable) – Please attacl	n a map <u>AND</u> describe	e the route, sho	wing the Start and
Staging Area (if applicable)) – Please provide a ful	ll and complete descrip	otion:	
Organization/Sponso	or & its Authorized	l Representative		
Name of Organization/Sp	oonsor:			
Address:		State:	Zip:	
Business Phone:	Work Ph	one:	Cell Pho	ne:
Web Address of Organiza	tion/Sponsor:			
Name of Authorized Repr	resentative:			
Address:		State:	Zip:	
Home Phone:	Work Phone:	Cell P	hone:	
Email:				
CHECK HERE IF THE S.	AME PERSON IS THE A	UTHORIZED REPRESE	ENTATIVE AND	ON-SITE PERSON

Primary On-Site Contact Person

Work Phone: Cell	Phone:
	Thone.
resentative must be an individual who po- uent documents on behalf of said entity. can provide appropriate and effective (1) ad volunteers during preparation for, as w	The primary on-site contact pers information to City personnel a vell as during the course of, the even
	_
Event Details	Equipment at Event
Alcohol Served	Amplified Noise and/or Mus Hours:to
Alcohol Sales	Portable Restrooms
Open to the Public	
Mobile Food Vendors: How many? Transient or Sidewalk Vendors: How many?	Stage/Props/Production Electrical Outlets Needed
Animals? Type:	Dumpsters/Receptacles
	Drone Usage
crical outlets if needed:	l
	went documents on behalf of said entity. It is an provide appropriate and effective (1) and volunteers during preparation for, as well is the said of

Rain Date? Y	es	No		If yes, then date(s):		
Fundraiser? Yo	es	No		If yes, then beneficiary:		
Registration/Entry	y Fee?	Yes	No	If yes, then amount:		
Noise Exception?		Yes	No	If yes, then Council District No		
(Examples of amp	lified n	oise whe	n needing	a Noise Exception: Live Band, DJ,	Large Sp	eakers)
Public Safety C	onsid	erations	<u>s</u>			
Will the organizer	/spons	or ensure	that fire l	nydrants remain unobstructed?	Yes	No
Will the organizer	/sponso	or supply	a First-A	id Station forthe event?	Yes	No
If yes, then:	Type:			Location:		
Will the organizer	/spons	or engage	<u>private</u>	security to work the event?	Yes	No
If yes, then	identif	y the prov	vider:			
minimum traffic corequired depending	ontrol a	levice req the partic	uired for cular fact	requirements in a timely manner. It all street closures. However, more as and circumstances surrounding each me type of barricade(s) will most lik	dvanced b ch event. I	arricades may be t is important for
Traffic/Parkin	g/Acc	ess/No	tificatio	<u>on</u>		
special event appli	ications	s. Regulat	tions that	nay be applied during the process of will be considered include (1) Reductive to Surrounding Property Own	ıcing Leng	gth of Street
Will streets, sidev	walks a	nd/or in	tersectio	ns need to be closed for your event	? Yes	No
residents and/or b	ousiness	owners/	tenants 1	re mindful of the manner in which to who live and work within the surrou ividuals will be affected in one way	nding are	a, including the
			•	lks and/or intersections that you a plete site plan in accordance with TM	_	_

Date(s) of street, sid	lewalk and/or ii	ntersection clo	osures:
Time(s) of street, sid	dewalk and/or i	ntersection cl	osures:
Set Up:	From	_to	_am/pm
Took Down:	From	to	am/nm

Explain the specific method(s) by which you will notify residents and/or businesses that will be affected by the street, sidewalk and/or intersection closures, including notification dates:

Downtown & NOTO Arts District Event Notification Requirements: Any applicant who intends to hold an event downtown or in NOTO shall use the contact information provided by the City Clerk's office upon request by the applicant. Once notification has been completed, the applicant shall execute a Statement indicating that all owners within the affected area were notified at least ten days prior to the event and shall provide such Statement to the City Clerk 48-hours prior to the event.

ALL APPLICANTS SHALL CONTACT A TRAFFIC CONTROL COMPANY FOR ALL TRAFFIC CONTROL DEVICES, APPLICANT SHALL HAVE THE COMPANY CALL TRAFFIC ENGINEERING AT LEAST 3 DAYS PRIOR TO EVENT AND CONFIRM ORDER HAS BEEN PLACED. IF YOU ARE SUPPLYING YOUR OWN BARRICADES YOU SHALL SEND THE NCHRP 350 OR MASH COMPLIANT CERTIFICATE TO CITY OF TOPEKA TRAFFIC ENGINEERING WITH A PHOTO OF THE DEVICES NO LATER THAN 10 DAYS PRIOR TO YOUR EVENT. FAILURE TO ORDER OR UTILIZING UNAPPROVED TRAFFIC CONTROL WILL RESULT IN EVENT CANCELLATION. _____ (initials)

Volunteers

The City does not provide volunteers for special events. Event organizers/sponsors are responsible for acquiring adequate volunteers. If device or volunteer requirements cannot be met, event organizer may be required to alter the event or the event may be denied due to safety concerns.

Depending on the size and location of the special event, the event organizer/sponsor may be required to provide volunteers to ensure the safety of the event space, participants, and the general public. The City of Topeka Traffic Engineering Department will determine the number and location of volunteers. These requirements will be denoted on the provided Traffic Control Plan. The event organizer/sponsor shall ensure that volunteers meet all of the following requirements:

- ➤ One volunteer **SHALL** be assigned to each street closure for assisting motorists and moving barricades in the case of an emergency, or for authorized vehicles to enter the event space.
- ➤ Volunteers **SHALL** be 18 years of age or older and capable of moving barricades, providing direction to motorists and authorized vehicles.
- ➤ Volunteers **SHALL** wear a Class 2 ANSI or better safety vest at all times while in the roadway.
- ➤ Volunteers **SHALL** not leave any street closure unattended. A volunteer must be present at each street closure at all times.
- ➤ Volunteers **SHALL** set-up and tear-down the traffic control devices for the event according to the provided Traffic Control Plan. (The only exception to this is when an event organizer/sponsor hires a traffic control company to set-up and tear-down the devices required by the Traffic Control Plan.)

<u>Traffic Control Company Contact Numbers:</u> C-HAWKK – 1-785-542-1800; MATHER – 1-785-478-3780; TCS – 1-785-448-0402<u>:</u> CTCR – 1-785-232-8360

*NOTE: The special event organizer/sponsor is responsible for providing notice of street closures to all affected residents and/or businesses at least ten days prior to the event. If the City receives complaints related to lack of notice and deems that the notice provided was not appropriate given the particular facts and circumstances involved, approval of special event permits may be withheld in the future.

Will sidewalk, transient or mobile food vendors be participating in your event? Yes No

If yes, please initial below to indicate that you have read and fully understand the requirements contained in TMC Section 12.70.060, which provide that the applicant: (i) submit the names of all sponsor-approved vendors to the city clerk at least forty-eight (48) hours prior to the event; (ii) ensure that each vendor receives written notification of their having been approved to participate; and (iii) ensure that each vendor displays such written notification in a prominent place (clearly visible to the public) during the time they are present at the event. ______ (initials)

City ordinance requires the special event organizer/sponsor to secure the consent of each business owner to a sidewalk vendor operating in front of or adjacent to their businesses. Have you obtained consent? Yes No

Clean up

Explain the specific methods by which you will clean up after your event, including your plan for removing	g
all debris and disposing of all refuse:	
Clean-Up personnel provided by:	

Insurance

A **special event applicant** is required to provide an original Certificate of Liability Insurance evidencing an insurance policy from an insurance company authorized to do business in the State of Kansas, which provides general liability coverage for any "special event" (as defined in TMC Section 12.70.010) in an amount not less than \$500,000 combined single limit per occurrence for bodily injury and property damage and which names the City of Topeka as an Additional Insured with the same coverage as the Insured, without restrictions.

^{*} NOTE: The special event organizer/ sponsor will be required to provide a deposit, (in an amount to be determined by designated City personnel depending upon the scale of the event). The purpose of the deposit is to ensure that normal traffic flow and access is restored to the area in a prompt manner and that the site(s) is returned to its former condition (normal wear and tear excepted). If not, the deposit will be forfeited and approval of special event permits may be withheld in the future. (1) All debris must be removed from the street(s) and/or right- of- way within thirty minutes after the ending time noted on the event permit; and (2) All other associated clean-up must be completed within 12 hours after the ending time noted on the event permit.

City of Topeka Department Contacts & Authorization

If you have questions or concerns about your event, please contact any of the following

City representatives, we are happy to assist.

DEPARTMENT	CONTACT	EMAIL	TELEPHONE
City Clerk's Office	Megan Brunson	cclerk@topeka.org	785-368-3940
Police Department	Sgt. Jeff Sloan	jsloan@topeka.org	785-368-9576
Fire Department	Adam Appelhanz	ajappelh@topeka.org	785-368-4144
Traffic Division	Uvaniga Kandaswamy	ukandaswamy@topeka.org	785-368-9439
Traffic Division	Joe Harrington	jaharrington@topeka.org	785-368-3041
Street Operations	Todd Workman	tworkman@topeka.org	785-368-0128
Parking Division	Jenn Howey	jhowey@topeka.org	785-368-2584
City Attorney's Office	Mathew Mullen	mwmullen@topeka.org	785-368-9529

Applicant's Statement of Agreement:

The information that I have provided herein is correct to the best of my information, knowledge and belief. I have read, understand and agree to abide by the rules and regulations included in this application and the Topeka Municipal Code, (including my obligations under the "Process and Instructions" section of this application). I further understand that any permit that may be granted is not transferable and is revocable at any time at the absolute discretion of the City of Topeka.

I hereby affirm that the above information is true and fully understand that the issuance of a Special Event Permit is entirely contingent upon satisfactory compliance with all associated conditions and requirements.

I, the undersigned, agree to abide by the provisions in this ap	oplication and the instructions attached hereto.
PRINTED NAME of authorized representative/applicant	
SIGNATURE of authorized representative/applicant	Date
Please mail, deliver or email this completed application, alon to: City Clerk's Office 215 SE 7 th Street, Room 166 Topeka, F	
OFFICE USE ONLY:	
Date Special Event Application Received: By: Cash D Credit D Check No. D Receipt YesD N OD	
Date Refundable Special Event Debris Deposit Received:By Fee \$250	In Person □ Email □ Mail □ Receipt Yes□ No □

Downtown & NOTO Art District Special Events

Statement of Notification

Any applicant who intends to hold an event downtown or in NOTO shall use the contact information provided by the City Clerk's office upon request by the applicant.

Please return signed statement to the City Clerk's office at least 48 hours prior to your event.

I hereby affirm that all owners within the affected area were notifie event.	d at least ten days prior to the
PRINTED NAME of authorized representative/applicant	
SIGNATURE of authorized representative/applicant	Date
Email: cclerk@topeka.org	
Fax: 785-368-3943	
Address: City Clerk's Office	
215 SE 7th Street, Room 166	
Topeka, KS 66603	



Special Event Debris Deposit Form

PLEASE PRINT

Name of Event:	I LLAGE I KIIVI
Event Date(s):	Estimated attendance:
Location of Event:	
Address:	State: Zip:
Debris Deposit Fee: \$250 - Less tha \$500 - More th	an 5,000 people in attendance an 5,000 people in attendance
 prompt manner and that the site(s) is not, the deposit will be forfeited and a All debris must be removed from ending time noted on the even Clean-up must be completed v 	vithin 12 hours after ending time noted on the event permit e conducted by City staff and if all cleanup requirements have been
How would you like to receive your r	efund check? PICK UP at Clerk's Office Δ By MAIL Δ
Check Refund Information: (NOTE proper refund)	: if Debris Deposit payment is by check, the address must match for
Name and/or Company:	
Address:	State:Zip:
Applicant's Statement of Agreement:	
associated with the cleanup of my eventh in the cleanup of my eventh in the cleanup of the clean	regulations outlined in this form and the Topeka Municipal Code ent. ion is true and /fully understand that the Special Event Debris Deposit factory compliance with all associated conditions and requirements.
SIGNATURE of authorized represen	tative/applicant Date