



# CITY OF West Linn

## Special Event Permit Application

Please fill out the application as completely as possible. When your application is submitted, there will be a \$150.00 non-refundable application fee. Depending on the type of event, additional fees and information may be required. When application is complete, please return to Parks & Recreation. All non-applicable items, Indicate by "na". Event Fees due at time of approval.

Application can be submitted one year to 30 days in advance of the event date.

Application Date \_\_\_\_\_ Application Fee \_\_\_\_\_  
(\$150)

Applicant/ Organization Name \_\_\_\_\_

Address \_\_\_\_\_

Type of Organization ☐ Non Profit ☐ Public Agency ☐ Commercial/Private

Tax ID# \_\_\_\_\_

Authorized Head of Organization \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ e-mail \_\_\_\_\_

Alternate Contact \_\_\_\_\_ Phone \_\_\_\_\_ e-mail \_\_\_\_\_

Date(s) of event: \_\_\_\_\_ Time of Event (from) \_\_\_\_\_ (to) \_\_\_\_\_

Type of Event \_\_\_\_\_

Address/Location of proposed event \_\_\_\_\_

Nature and description of activity

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\* FUNDRAISING EVENTS REQUIRE A LETTER OF REQUEST TO FUNDRAISE ON CITY PROPERTY.

Estimated number of Employees/volunteers

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Estimated # of Participants \_\_\_\_\_ Estimated # of Spectators \_\_\_\_\_

Event Co-sponsors \_\_\_\_\_

Admission Fee \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Amount \_\_\_\_\_

Animals involved, number and type \_\_\_\_\_

Equipment and number and type of vehicles and length of longest vehicles or combination of to be onsite: \_\_\_\_\_

Amplified Sound \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Type: \_\_\_\_\_ Live \_\_\_\_\_ DJ \_\_\_\_\_ Speaker/PA

Power source \_\_\_\_\_

Use of other city property or public right of way (i.e. parks, etc.)

Portable Structures, Including tents, trailers, toilet facilities etc. \_\_\_\_\_

List streets or public right of way that will be used during the event \_\_\_\_\_

(If event is in public right of way, please attach map showing route).

Will street closure or traffic control be required? \_\_\_\_\_

Emergency facilities and location (telephone, medical personnel, etc.)

Signs to be used on event days (size, material and location)

All signs to be placed on and off Parks property prior to event must have Temporary Sign Permits. Signs not located on park property contact Planning Department at 503-656-4211.

Lighting to be used (describe) \_\_\_\_\_

Trash containers to be provided? \_\_\_\_\_

Security personnel to be provided? \_\_\_\_\_  
Alcoholic beverages to be permitted, provided, or sold? \_\_\_\_\_  
(If yes, attach a copy of Oregon Liquor Control Commission license)

In addition, you are required to provide verification of the following:

- ☐ A current City of West Linn Business License (if any fees are charged)
- ☐ Certificate of Insurance, if this event is in the right-of-way or on city property, the City must be named as an additional insured. Limits of insurance are normally \$1,000,000 for death and bodily injury and property damage.

\_\_\_\_\_ Please, indicate if there is need for road closures. This may necessitate a traffic control meeting.

\_\_\_\_\_ Please, indicate if there will be use of special effects or stunts.

Stunts or special effects will require a meeting with; Police, Fire and other specifically affected City Departments.

Other comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I, THE UNDERSIGNED, ACKNOWLEDGE AND UNDERSTAND THAT I AM RESPONSIBLE TO COMPLY WITH THE INFORMATION, RESTRICTIONS AND CONDITIONS OF THE PERMIT WHEN ISSUED. I HEREBY ACKNOWLEDGE RESPONSIBILITY FOR PENALTIES ASSOCIATED WITH NON-COMPLIANCE WITH THE PERMIT CONDITIONS, WHETHER OR NOT I AM PRESENT AT THE TIME OF THE VIOLATION. \_\_\_\_\_ (INITIALS)

I hereby certify the foregoing statements to be true and correct, and agree to defend, indemnify and hold harmless the City of West Linn, its City Council, officers, agents, employees and volunteers from and against any and all loss, claims, damages, liability, such claim or suit arising from or in any manner connected to the requested activity. I also agree, if approved, to comply with all permit conditions, and understand that failure to comply with any condition, or any violation of law, may result in the immediate cancellation of the event, revocation of the permit, forfeiture of deposit, denial of future events, criminal prosecution and/or administrative citation (s), fines.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name Printed

Event Fees: \_\_\_\_\_

Date Paid \_\_\_\_\_

\_\_\_\_\_  
City Representative

\_\_\_\_\_  
Date event approved

\*Conditions of Approval will be developed for event and conveyed to you or covered as necessary at pre-event meeting.

West Linn Parks and Recreation Department  
22500 Salamo Road, #1100 West Linn, Oregon 97068  
503-557-4700

**Special Event Fees -**

Special Event fees are for the use of infrastructure facilities, right of ways, streets, open space, trails, or groups areas necessary for event.

Fees for reservation of specific shelters and fields would still apply.

	Non Profit	Commercial/Private
Event Size 1-199	\$155.00	\$255.00
Event Size 200-499	\$205.00	\$355.00
Event Size 500-999	\$305.00	\$505.00

\*For complex and large events City personnel costs can be charged based on services required using a Methodology.

**Adult & Youth Sport Tournament Fees-Per Day**

Fees to offset incurred cost of hosting tournaments (utilities, supplies & materials and staff time)

1-5 teams in tournament	\$300.00
6-10 team in tournament	\$500.00
11-20 teams in tournament	\$750.00
20+ teams in tournament	\$1000.00