



SPECIAL EVENT PERMIT APPLICATION

Submit to:
Waynesboro Parks & Recreation, 413 Port Republic Road, Waynesboro, VA 22980
540-942-6735 events@ci.waynesboro.va.us

Event Information															
Event Name: <u>South River Music Festival</u>															
Location: <u>Constitution Park</u>		Estimated Attendance: <u>1000</u>													
Event Date(s) mm/dd/yy: <u>06/01/2019</u> M T W Th F <u>Sat</u> Sun (circle) <u>6/1/19</u>		Event Time (s): <u>3-9 pm</u>													
Setup Begins (Date & Time): <u>Fri 5/81</u>		Teardown Ends (Date & Time): <u>6/43 Mon.</u>													
Provide a brief description of the event: <u>Music, food trucks, beer/wine</u>															
Type of Event: <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Carnival</td> <td><input type="checkbox"/> Church</td> <td><input type="checkbox"/> Fundraiser</td> </tr> <tr> <td><input type="checkbox"/> Parade</td> <td><input checked="" type="checkbox"/> Concert</td> <td><input type="checkbox"/> Charity</td> </tr> <tr> <td><input type="checkbox"/> Run/Walk</td> <td><input checked="" type="checkbox"/> Festival</td> <td><input type="checkbox"/> Bike</td> </tr> <tr> <td><input type="checkbox"/> Water Activity</td> <td><input type="checkbox"/> Community/Cultural</td> <td><input type="checkbox"/> Other:</td> </tr> </table>				<input type="checkbox"/> Carnival	<input type="checkbox"/> Church	<input type="checkbox"/> Fundraiser	<input type="checkbox"/> Parade	<input checked="" type="checkbox"/> Concert	<input type="checkbox"/> Charity	<input type="checkbox"/> Run/Walk	<input checked="" type="checkbox"/> Festival	<input type="checkbox"/> Bike	<input type="checkbox"/> Water Activity	<input type="checkbox"/> Community/Cultural	<input type="checkbox"/> Other:
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Event Admission/Entry Fee: <input type="checkbox"/> Free <input type="checkbox"/> Ticket/Entry Fee \$ <u>15 Adults / 15 kids</u> <input type="checkbox"/> Private <input checked="" type="checkbox"/> Open to public <input type="checkbox"/> Suggested Donation \$ _____															
Applicant Information - Applicant must be the contact person for the event submitted															
Organization Name: <u>The Wayne Theatre</u>															
Organization Address: <u>521 W Main St. Waynesboro</u>															
Contact Person: <u>Tracy Straight</u>															
Cell Phone #: <u>540 241 4670</u>		Email: <u>str@weaver@gmail.com</u>													
Is this a non-profit organization with 501(c)(3) status? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no		Identification #: <u>54-1993924</u>													
Insurance Carrier: <u>BB+T</u> <u>Harmon McGuff Shannon Grossy</u>		Phone: <u>946 6100</u>													
*You will need to submit a Certificate of Insurance (COI) prior to your event naming City of Waynesboro as additional insured.															
Requiring Council Approval															
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Event Requires Street Closures *Must submit map indicating event area and closures. After approval, contact Police Department 942-6686 and Public Works 942-6743													
		Closure Start Time:	Closure End Time:												
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Event Requires Alcohol Use Permit *Must obtain ABC License and submit copy to P&R After approval, contact Police 942-6686 to determine what police coverage is necessary.													
		Service Time: <u>3-9 pm</u>	# of Vendors: <u>3-4</u>												
		<input type="checkbox"/> Sampled <input checked="" type="checkbox"/> Sold Check all that apply													
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Special Request- indicate any special resources or services you would like to request from the City: <u>trash cans / pickup</u> <u>light</u>													

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mailed 9/28

Event Setup		
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Tents- A permit and inspection is required for any tent over 400 square feet http://www.waynesboro.va.us/322/Fire-Code-Permits	
	# of Commercial Tents:	# of Cooking Tents: # of Pop-up Tents: 4
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Inflatables/Mechanical Rides- A permit and inspection is required for inflatables (ie. bounce house, etc.) http://www.waynesboro.va.us/322/Fire-Code-Permits . Mechanical rides require a permit and fee http://www.waynesboro.va.us/DocumentCenter/Home/View/4588 . If staking is necessary, a Miss Utility ticket is required to ensure utilities are avoided.	
	# of Inflatables:	# of Mechanical Rides: Provider:
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Food Vendors/Food Trucks- Food Vendors must be licensed to vend in Waynesboro and be permitted by the Health Department- Contact Commissioner of Revenue 942-6610 and Health Department 949-0137 to verify.	
	# of Food Vendors:	# of Food Trucks 1 <input type="checkbox"/> Catered
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Access to Power- Power may not be available at all locations contact Parks & Recreation to determine availability.	
	Power Requirements: <input type="checkbox"/> 110v # of outlets: ___ <input type="checkbox"/> 30 Amp # ___ <input type="checkbox"/> 50 Amp # ___	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Access to Water- Water may not be available at all locations. Contact Parks & Recreation 942-6735 to determine availability.	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Signs/Banners- Signs/banners should not be placed on right-of-ways. All signs and banners should be removed immediately after the event. Contact Parks & Recreation about hanging banners at park venues. Contact Tourism about advertisement space available on their building.	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Trash Disposal- Many venues have trash cans in place. Additional cans can be requested if needed.	
	# of Additional cans: 1	Trash Service Requested: <input checked="" type="checkbox"/> yes <input type="checkbox"/> no
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Portable Restrooms- It is the event organizer's responsibility to provide restrooms, if public facilities are not available or not sufficient. Venues' facilities may not be available year round.	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Impact businesses/residences/parking- Tourism can assist with business notification in the Downtown Area. Contact Police Department for parking/access assistance.	
Emergency Support- Events with attendance over 500 may be required to have Emergency Support. Contact Em. Mgt 942-6698		
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Requesting Police Support- Required for road closures and when alcohol is being served. Contact the Police Department 942-6686 to discuss arrangements.	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Requesting Fire Department- Contact 942-6730 to make arrangements.	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Requesting EMS/Ambulance- Contact Emergency Management 942-6698	
Publicity		
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Requesting use of City Logo	Is this a grant requirement? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Requesting inclusion in Tourism's digital/print newsletter	

Liability Release: The undersigned applicant, in consideration of the City's approval of the event, on behalf of the Organizer, its agents, attorneys, successors and assigns, releases, forever discharges and promises to defend and wholly to indemnify the City, its officers, agents, attorneys, successors and assigns, from any and all claims, demands, obligations, liabilities, indebtedness, breaches of contract, debts, sums of money, accounts, compensations, contracts, controversies, promises, damages, costs, losses, expenses, attorneys' fees, and claims for sanctions of every type, kind, nature, description, or character, and irrespective of how, why and by reason of what fact, which could, might, or may be claimed to exist, of whatever kind or name, arising out of or in any way connected with this event or any prior or subsequent activity undertaken pursuant to and under the authority of this application. Further, I grant permission to all of the aforementioned to use any photographs, motion pictures, recordings, or any other record for any legitimate purpose.

By signing below the applicant certifies the above information is accurate. The applicant also acknowledges receipt, review, and understanding of the Liability Release.

Print Name: Tracy Straight Signature: [Signature] Date: 9/28/18

Facility Rental Fee: _____ Additional Services Fee: _____ Total Fee: _____ Receipt # _____ Date: _____

Approval of Parks & Recreation Staff: _____ Date: _____