

According to Municipal Order 2013-001

Special Event Permit Guidelines

(Or How to Know When You Need One)

This information has been prepared to assist you in planning and meeting necessary requirements for a safe and enjoyable event. If you should have any questions which are not answered in this application packet, please contact the Union City Clerk at (859) 384-1511 or email your questions to twilhoite@cityofunionky.org

You will need to fill out a special event application if your event –

- Will interfere with vehicular or pedestrian traffic (occurs on City streets or rights-of-way),
(or)
- Takes place on public property.

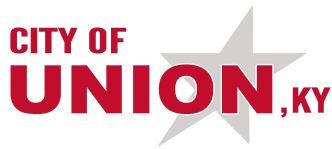
This includes block parties, parades, athletic events, and other special events, as defined below.

- Block Party: A festive gathering which requires the closure of a street. A special event permit is not required for block parties not requiring street closure.
- Parade: A march (or) procession which interferes with pedestrian and/or vehicular traffic. A special event permit is not required if the parade stays on sidewalk and abides by all traffic regulations.
- Athletic Events: An occasion when a group of participants collectively engage in a sport or other forms of physical exercise which interferes with pedestrian or vehicular traffic. This includes bicycle and foot races.
- Other Special Events: Street fairs, arts and crafts shows, carnivals, soapbox derbies, rallies, or other special events which interfere with pedestrian or vehicular traffic.

NOTE: A special event permit is not a permit to violate City codes, ordinances, rules, or regulations, IE: noise violations. If a violation occurs, it may result in citation(s) issued to the event applicant/responsible person.

Processing Procedure:

Once you obtain a permit application, please submit the completed application to the Union City Clerk not less than **60 days** before the date of the event and no more than one year prior to the event date. This will allow sufficient time for processing of the application. There will be a **\$10 application fee** for all events. This fee is to cover administrative costs.



Special Event Application

Application date: ____ / ____ / ____

MUNICIPAL ORDER 2013-001 - A MUNICIPAL ORDER FOR THE ADOPTION OF SPECIAL EVENT GUIDELINES FOR THE CITY OF UNION, KENTUCKY.

Please complete and return this application to the address listed above: - City Clerk's Office

Applicant Information

Name of Applicant: _____

Address: _____

Phone: _____ Cell: _____ Fax: _____

Email: _____

If contact person is different than applicant, please list:

Name of Contact: _____

Address: _____

Phone: _____ Cell: _____ Fax: _____

Email: _____

Sponsor/Organization Status:

☐ Not-For-Profit Organization, please include tax exempt #: _____

☐ For Profit Organization

☐ Individual

☐ Charitable

☐ Other, please describe: _____

There will be a \$25.00 fee for ALL RETURNED CHECKS and A NON-REFUNDABLE service charge fee of 3% will be applied to Credit Card payments.

EVENT INFORMATION

Name of Event: _____
Location(s): _____
Event date(s): _____
Set-up date(s) and time(s): _____
Event teardown date(s) and time(s): _____
Street Closure Date(s) and time(s): _____

Note: Any event that requires street closures must include date and name of Boone County Sheriff Deputy that granted the approval.

Date Street Closure Approved: _____ Boone County Sheriff Deputy
that Granted Approval: _____ Phone: _____

Will the event require Sound Amplification Equipment: ☐ Yes **(or)** ☐ No If so, please describe: _____

ROUTE INFORMATION (for parades, races, etc.)

Attach Route or Event Map: A map is required for all events.

Assembly Location: _____ Assembly Time: _____

Specific type of event, please check all that apply:

- | | |
|--|--|
| <input type="checkbox"/> Festival | <input type="checkbox"/> Fundraiser |
| <input type="checkbox"/> Parade | <input type="checkbox"/> Political |
| <input type="checkbox"/> Fair/Carnival | <input type="checkbox"/> Religious |
| <input type="checkbox"/> Private Party | <input type="checkbox"/> Filming |
| <input type="checkbox"/> Sports Event | <input type="checkbox"/> Community Event |

Anticipated attendance: _____ Prior year attendance, if applicable: _____

Notify affected residents and/or businesses: Required for any street or sidewalk blockages or closures – including residences above businesses (i.e.: Old Union Road downtown area) unless other arrangements have been made with the City Clerk's Office. You will need to send letters or notify the residents and/or businesses three (3) weeks prior to the street or sidewalk blockages or closures. Also, provide the city clerk with a list of who you notified about the closure.

I acknowledge that the information contained in this application is true and complete to the best of my knowledge.

Applicant Signature: _____ Date: _____
(required)

INSURANCE INFORMATION

Organizations holding a special event must provide the City of Union a current certificate of insurance complying with specified insurance coverage and limits as prescribed by the city not less than seven (7) working days prior to the event. The City of Union must be listed as an "additional insured" on the certificate. The insurance company must have a minimum "A" rating to be acceptable. Liability limits: \$1,000,000 for general and liquor liability (if applicable).

- I. Coverage: _____
- II. Insurance Company: _____
- III. Limits of Liability: _____
- IV. Agent: _____
- V. Agent's Phone Number: _____
- VI. Is the City named as an additional insured in this policy: _____

Hold Harmless Agreement: To the fullest extent permitted by law, _____ hereby agrees to defend, pay in behalf of, and hold harmless the City of Union against any and all claims, demands, suits, losses, including costs connected therewith, for any damage which may be asserted, claimed or recovered against or from the City of Union, its elected and appointed officials, employees, volunteers, agents or all others working on behalf of the City of Union, by reason of personal injury, including bodily injury and death; and/or property damage or intended wrongful act, including loss of use thereof, which arose out of the alleged negligence of _____ (*name of organization*) and/or in any way connected or associated with the event(s) known as _____ (*name of event*) which is being sponsored by _____ (*name of organization*).

Applicant declares all information submitted on this application is true and accurate. Applicant will immediately notify the City of Union of any additions or changes that arise after application is submitted. Changes could result in denial or revocation of permit. On behalf of above organization(s) and all members thereof, applicant agrees to abide by all policies, procedures and instructions set forth or provided by the City of Union, its staff, officers, and designated agents and will comply with all local, state, and federal laws or regulations.

Applicant's Signature: _____ **Date:** _____

Note: A completed City of Union Special Event Application must be received by the City of Union 60 days prior to the event date. If the Special Event Application is not received within the prescribed time period, the City may deny the application.

Disclaimer: Please note that approval of the Special Event Application by the City of Union does not substitute for any other required approvals or permits that must be obtained by the applicant. The applicant should apply for all necessary permits concurrently with this application.

BLOCK PARTY ABUTTER APPROVAL FORM

We the Undersigned residents of **(street name)** _____ request that **(street)** _____ be blocked off from **(starting time)** _____ to **(ending time)** _____ between **(street)** _____ and **(street)** _____ for the purpose of having a neighborhood block party. We agree to leave a 12-foot lane open for emergency vehicles.

[illegible]

RESIDENTS' AGREEMENT FOR STREET CLOSURE/BLOCKAGE

Special Event Name: _____

Special Event Applicant: _____

Location: _____

Date of Closure/Blockage: _____

Time: _____

Note: Signatures are required by all Residents and/or Business Owners affected by the closure and/or use of the Street/Sidewalk during the Event.

Name (please print)

Address

Phone#

Approve / Disapprove

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