



**SPECIAL EVENT PERMIT - APPLICATION**

**Return application and fee a minimum of 45 days prior to event to:**

**Raytown City Hall-City Clerk's Office, 10000 E. 59<sup>th</sup> Street, Raytown, MO 64133 Phone 816-737-6004  
www.raytown.mo.us**

Applicant's Name: \_\_\_\_\_ Date: \_\_\_\_\_

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

Phone (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_ (Fax) \_\_\_\_\_

(Mobile) \_\_\_\_\_ E-mail \_\_\_\_\_

Additional Contact Person \_\_\_\_\_ Phone) \_\_\_\_\_

Sponsoring Organization \_\_\_\_\_ Event URL) www. \_\_\_\_\_

Is applicant an incorporated not-for-profit organization? Yes \_\_\_\_ No \_\_\_\_ If yes, Federal/State ID No. \_\_\_\_\_

Event Name: \_\_\_\_\_

Event Date \_\_\_\_\_ Event Time: From \_\_\_\_\_ AM/PM To: \_\_\_\_\_ AM/PM

Total Anticipated Attendance: \_\_\_\_\_

Public Property requested:

\_\_\_\_\_

General description of the planned event: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is the event open to the general public? Yes \_\_\_\_ No \_\_\_\_ If yes, will spectator fees be charged? Yes \_\_\_\_ No \_\_\_\_

Will the event be advertised to the general public? Yes \_\_\_\_ No \_\_\_\_ If yes, how and when: \_\_\_\_\_

\_\_\_\_\_

What special equipment will be brought onto the property: \_\_\_\_\_

\_\_\_\_\_

List any street(s) requiring closure as a result of this event (include street name(s), dates and time of closing and street reopening): \_\_\_\_\_

Types of barricade(s) to be utilized: \_\_\_\_\_  
(Fees may apply if utilizing City-Owned Barricades)

Does this event involve the sale or use of alcoholic beverages? Yes \_\_\_\_ No \_\_\_\_ If yes, please describe: \_\_\_\_\_

If yes, hours during which alcohol will be served: From \_\_\_\_\_ AM/PM To \_\_\_\_\_ AM/PM

**Please check all that apply:**

- \_\_\_\_\_ Will outdoor tents or stages will be used? If yes, \_\_\_\_\_ expected # of occupants
- \_\_\_\_\_ Will there be booths, exhibits or display tables?
- \_\_\_\_\_ Will there be open flame cooking in booths or trailers?
- \_\_\_\_\_ Will temporary fencing or barricades be used?
- \_\_\_\_\_ Will there be portable restrooms? If yes, \_\_\_\_\_ # of regular and handicapped accessible restrooms
- \_\_\_\_\_ Will amplified sound/music be used? If yes, please specify \_\_\_\_\_ DJ or \_\_\_\_\_ amplified radio/voice
- \_\_\_\_\_ Will there be a pyrotechnics display? If yes, \_\_\_\_\_ Vendor Name and phone
- \_\_\_\_\_ Will cooking equipment be used? If yes, which: \_\_\_gas \_\_\_electric \_\_\_charcoal \_\_\_other (specify)
- \_\_\_\_\_ Will temporary electrical wiring be used?
- \_\_\_\_\_ Does the event involve hanging a banner or temporary event signs?

Do you plan to provide operate concessions, if yes, please describe:

Describe how charcoal, grease and other materials will be disposed of: \_\_\_\_\_

**Attach a detailed site map showing:**

- 1) All public property being used including identifying booths, stages, trailers, etc.
- 2) All streets affected by traffic rerouting or street closure.
- 3) Parking plan including spaces designated for handicap accessible.

**Attach a description of:**

- 1) How and what kind of traffic routing and control devices will be used for the event.
- 2) Who will be directing traffic.
- 3) How you plan to notify residents, businesses and churches impacted by this event.

**Certificate of Insurance: Evidence of Insurance must consist of (1) Certificate of Liability Insurance naming the City of Raytown, Missouri as an additional insured on a primary and non-contributory basis including waiver of subrogation.**

Commercial General Liability	Each Occurrence	\$1,000,000	Aggregate	\$2,000,000
Automobile Liability -Combined Single Limit		\$1,000,000		

The insurance companies providing coverage must have an A.M. Best rating of A- or better or an equivalent rating given by a recognized rating agency.

Other Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**INDEMNITY**

Permittee assumes all risk of all damage, loss and expense and agrees to indemnify and hold harmless the City of Raytown, and/or its agents and employees from and against any and all liability which may accrue to or be sustained by the City or Raytown on account of any claim, suit or action made or brought against the City of Raytown for the death or injury to persons or the destruction of property involving the permittee and its employees sustained in connection with the performance of the permit except the sole negligence and willful misconduct of the City of Raytown, its employees acting within the scope of their employment, and such indemnification shall extend to and include attorney's fees and the cost of establishing the right to indemnification hereunder in favor of the City of Raytown.

I am aware of the terms and conditions of the permit and will advise the participants of the event of these terms and conditions. The undersigned, does hereby state the above information is true and complete and that they have received a copy of the Special Event Permit Conditions that may apply to a Special Event Permit, if approved by the City of Raytown.

Applicant \_\_\_\_\_ Date \_\_\_\_\_

**POLICE DEPARTMENT:**

Approved as submitted: \_\_\_\_\_

Approved with the following revisions: \_\_\_\_\_

\_\_\_\_\_

Denied: \_\_\_\_\_

Equipment/Personnel Provided: \_\_\_\_\_

Cost: \_\_\_\_\_

**PUBLIC WORKS DEPARTMENT:**

Approved as submitted: \_\_\_\_\_

Approved with the following revisions: \_\_\_\_\_

\_\_\_\_\_

Denied: \_\_\_\_\_

Equipment/Personnel Provided: \_\_\_\_\_

Cost: \_\_\_\_\_

**EMERGENCY MEDICAL SERVICES DEPARTMENT:**

Approved as submitted: \_\_\_\_\_

Approved with the following revisions: \_\_\_\_\_

\_\_\_\_\_

Denied: \_\_\_\_\_

Equipment/Personnel Provided: \_\_\_\_\_

Cost: \_\_\_\_\_

**FIRE DISTRICT:**

Approved as submitted: \_\_\_\_\_

Approved with the following revisions: \_\_\_\_\_

\_\_\_\_\_

Denied: \_\_\_\_\_

Equipment/Personnel Provided: \_\_\_\_\_

Cost: \_\_\_\_\_