



City of Des Moines SPECIAL EVENT APPLICATION

Return to: City of Des Moines City Clerk
ATTN: Taria Keane
21630 11th Avenue S, Suite A
Des Moines WA 98198
cityclerk@desmoineswa.gov

For Office Use Only
Permit No. _____

Phone: (206) 870-6552

This application must be completed, signed and forwarded to the City of Des Moines at least ninety (90) days prior to the first day of the event (unless authorized by the City Manager). Applications submitted less than 90 days prior to the event may be denied or subject to additional review fees. Any misrepresentation in this application or deviation from the final agreed upon route and/or method of operation described herein, may result in the immediate revocation of the permit. Submittal of this application in no way constitutes City of Des Moines approval of the event. Permits are issued at the discretion of the City of Des Moines upon thorough application review. The City of Des Moines reserves the right to reject any Special Event Permit application request for any reason. Please type or print information clearly and attach additional sheets as necessary.

1. EVENT INFORMATION

to promote your event go to www.destinationdesmoineswa.org for more information

Event Name:					
Event Type:	☐ Festival/Fair ☐ Concert/Amplified ☐ Private Event ☐ Music/Theatrical ☐ Block Party ☐ Boating/Rowing ☐ Car/Boat Show ☐ Exhibits/Displays ☐ Sporting Event ☐ Swim/Wind Surf ☐ Commercial Event ☐ Food Beverage Vendors ☐ Bicycling ☐ Rally/Protest ☐ Wedding/Reception ☐ Merchandise/Services ☐ Outdoor Market ☐ Run/Walk ☐ Triathlon ☐ Vendors ☐ Photo Shoot/Film ☐ Religious ☐ Fireworks ☐ Other (describe) _____ ☐ Public Address/PA Systems ☐ MaST Facility Use ☐ Parade				
Event Date(s): Indicate Dates/Times OPEN to Attendees	Start Day (of week): Date:	End Day (of week): Date:	Hours: Open until closing Each Day	Start Time (example 12:00pm):	End Time (example 12:00pm):
Setup/Take Down Dates:	Start Day: Date:	End Day: Date:	Setup/Take Down Hours Daily:	Start Time (example 12:00pm):	End Time (example 12:00pm):
Event Location:	Describe in detail and attach black and white maps and layouts:				
Event Size:	# of Participants:	# of Spectators:	# of Staff/Volunteers:	TOTAL Attendance Expected: (Add all 3 columns)	
Has this event been produced before? ☐ Yes ☐ No	Is this an Annual Event? ☐ Yes ☐ No		Previous Names(s) of Event:		How Many Years?
Are there any changes from previous years? ☐ Yes ☐ No	Describe Changes:				
Is this event public? ☐ Yes ☐ No Is this event private? ☐ Yes ☐ No	If open to the public, please check all advertisement methods: ☐ TV ☐ Radio ☐ Internet ☐ Posters ☐ A-Board* ☐ Banners* ☐ Inflatable Display				

Briefly describe your event here. Attach additional documents if necessary. *The use of Temporary Special Event Signage (A-Boards, Banners) requires a Sign Special Use Permit. Contact Planning, Building and Public Works at 206-870-7576 to obtain permit.

2. APPLICANT INFORMATION

Sponsoring/Producing Organization Name:

Mailing Address:	Street Address:				
	City, State, Zip:				
Applicant Contact:	Name:		Secondary Contact:	Name:	
	Title:			Title:	
Phone:		Fax:	Phone:		Fax:
Email:			Email:		
Organization/Event Website: http://www.					

3. PARK, RECREATION & MARINA FACILITIES

Events held at Des Moines Parks and Recreation facilities require a Park Use Permit, with separate fees. Please familiarize yourself with the Park and Recreation Use Permit Application to understand the conditions, limitations and fees for events on Parks Property. For more information regarding facility rentals please contact the Parks and Recreation Office at 206-870-6527 or recreation@desmoineswa.gov.

Events held at Des Moines Marina facilities require a Marina Use Permit, with separate fees. Conditions, fees and limitations for events are in the Marina Tariffs. For more information regarding Marina rentals please contact the Harbormaster's Office at 206-870-6724 or marina@desmoineswa.gov.

Is your event partially or fully held at a City of Des Moines Park or Marina? ☐ Yes ☐ No	Park Facility(ies) requested: Marina Facility(ies) requested:	Have you completed a Park Use or Marina Use Application ☐ Yes ☐ No
Recreation Facility Requested: ☐ Activity Center ☐ Field House ☐ Founder's Lodge Picnic Shelter Requested: ☐ Midway ☐ Field House Park ☐ Wooton Park	Have you completed a Facility Use Application ☐ Yes ☐ No	

Disclaimer: The City of Des Moines does not endorse any products, programs or services that are presented. Each individual is responsible for making informed decisions regarding these services, programs or products. Submittal of this application in no way constitutes City of Des Moines approval of the event. Permits are issued at the discretion of the City of Des Moines upon thorough application review. The City of Des Moines reserves the right to reject any Special Event Permit application request for any reason.

4. FEES & PROCEEDS	Admission Fee? ☐ Yes ☐ No	Amount? \$	Will you have vendors selling goods or services on park property? ☐ Yes ☐ No		
Items to be sold:	☐ Food	☐ Beverages	☐ Merchandise	☐ Services	☐ Other
15% of gross commercial sales (food beverages, admissions, souvenirs, goods, and services) on Parks property must be remitted to Des Moines Parks and Recreation Department within 10 days following the event.					

5. VENDORS	Does your event have vendors selling food, beverages, merchandise or services? ☐ Yes ☐ No
If yes, please contact Planning, Building and Public Works at 206-870-7576 or visit www.desmoineswa.gov for Business License information and requirements.	

6. ALCOHOL	The sale, service and consumption of alcoholic beverages are subject to Washington State Liquor Control Board (WSLCB) regulations, licensing and permit requirements. Special Occasion licenses are issued only to non-profit societies or organizations holding a special event at which spirits, beer or wine is sold by the drink. The City's liquor liability limits apply to events in which alcohol is sold. Non profit organizations must apply for a Special Occasion License 45 days prior to the event. Your event may require a different type of permit. Please visit the WSLCB website, www.liq.wa.gov for additional information.				
Will alcohol be sold or consumed? ☐ Yes ☐ No		Is a non-profit organization providing the alcohol service? ☐ Yes ☐ No If Yes, indicate name of non-profit organization: _____ If No, indicate alcohol service provider: _____			
Beer/Wine Garden Days & Dates:			Hours:		
Describe intended or requested sale and/or consumption of alcoholic beverages at your event:					

7. FOOD	If you plan to sell food or have food vendors at your event, Public Health Seattle & King County Temporary Food Service permits may be required for each food vendor or sales/serving location. The Temporary Food Service application and fee are due at least 14 days prior to the event. Additional requirements are listed on the application available at www.kingcounty.gov/health or contact Renton Public health at 206-296-4700.		
Do you plan to sell food at your event? ☐ Yes ☐ No		How many food vendors will you have at your event?	Will food be hot/cold held or cooked onsite? ☐ Yes ☐ No <i>Potentially hazardous food must be kept hot at 140F or more or cold at 41F or less.</i>
Only limited food preparation is allowed onsite at an event. A commercial kitchen is required for most food preparation. Handling unpackaged food requires a barrier such as gloves, tissue or tongs and a hand-wash station available INSIDE the food booth (an insulated container with 5 gallons of gravity flow hot water, soap and paper towels). Food vendors are required to be within 200 feet of a restroom with a hand sink that has hot and cold running water for food workers.			
Please describe the food service at your event:			
8. NEIGHBORHOOD COMMUNICATION	Please provide a community outreach and notification plan with your application for events such as parades, road races, festivals, neighborhood block parties with details regarding how residents and businesses will be notified in the neighborhood where your event takes place, and if there will be street closures, impact to parking areas, traffic delays or amplified sound:		
9. AMPLIFIED SOUND/MUSIC	Special review is required if your event has Amplified sound (PA system) or music after 10:00pm or during early morning hours before 7:00am on weekdays and 9:00am on weekends.		
Does your event have amplified sound? ☐ Yes ☐ No	Does your event have amplified music and entertainment? ☐ Yes ☐ No	Dates:	
What times are you requesting amplified sound? Please list dates and start and end times below:			
Date: Start: End:	Date: Start: End:	Date: Start: End:	Date: Start: End:
10. EQUIPMENT SET/UP			
Please check all boxes that apply: ☐ Requesting Electricity			
☐ Commercial Signage	☐ Generators	☐ Tents/Canopies #	☐ Fireworks
☐ Portable Restrooms	☐ Inflatable's/Bouncy Toys	☐ Hand washing Stations	☐ Staging/Scaffolding
Please contact the Department of Planning Building and Public Works at 206-870-7576 if you have special electrical needs or if you will have tents/canopies at your event to determine if a separate permit is required.			
Please list the outside company/vendor that you are using for any of the checked boxes above:			
11. RECYCLE & TRASH	Washington State law requires vendors and organizers for festivals, sports facilities, special events and official gatherings to provide recycling containers at events where beverages in cans and/or bottles are sold. See RCW 70.93.093 for complete language.		
Will beverages in cans or bottles be sold at your event? ☐ Yes ☐ No	Are you providing recycling containers at your event? ☐ Yes ☐ No	How many recycling containers will you have at your event?	
How many large trash dumpsters will you have onsite at your event? What size?		How many large recycling dumpsters will you have onsite at your event? What size?	
How many waste containers will you have at your event?	Will you be managing your own waste and recycling? ☐ Yes ☐ No Will you be hiring an outside vendor? ☐ Yes ☐ No		
If you are hiring an outside vendor, please identify the company you are working with and include onsite, weekend or emergency numbers for them. Name _____ Telephone _____ Email _____			
Please describe your waste and recycling plan.			

Please include information regarding collection of recyclables including cans, bottles, cardboard, paper, food and other compostable items if applicable.

12. STREET USE & METRO	Events that require the use or closure of public streets are required to submit a detailed description of the intended usage and/or closure and detailed maps to support the request. A right of way permit may be requested/required.
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Barricades, traffic cones, "No Parking" signs, etc., may be required by Des Moines Planning, Building and Public Works Department as part of the Traffic Control Plan and are at the expense of the permit holder and are not included in the Special Event Permit Fee.

Does your event require any street closures? ☐ Yes ☐ No	Do you plan to use street parking spaces? ☐ Yes ☐ No	If your event requires either of these, or affects any streets, please attach a detailed map and description of the areas affected.
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What times are you requesting to close the streets? Start Time: End Time:	Do you anticipate affecting or re-routing any Metro bus routes? ☐ Yes ☐ No If yes, please list routes and note route locations on your street use map.
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Please describe your street use:

13. FIRE	City special events may require fire permits. The cost of these permits may not be included in the Special Event Permit Fee. Fire permits may be required for carnivals and fairs, tents/canopies, places of assembly, open flame cooking (with propane, charcoal or wood), fireworks and other uses. Contact South King County Fire and Rescue at prevention.web@southkingfire.org Size of Tents:
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14. MEDICAL	Does your event require onsite medical assistance or first response providers standing by: ☐ Yes ☐ No
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15. POLICE & TRAFFIC	Special events may require the use of police officers for crowd and traffic control or other purposes. These needs will be determined at your event review.
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16. CITY OR PUBLIC SERVICES REQUESTED	Police Department: Crowd Control, Security or Traffic Control:
	City Staff Presence:
	Barricades, Street Closures or Detours
	Special Park Maintenance or Set Up
	Street Sweeping/Clean Up
	Assistance with Banner or Sign Placement

17. INSURANCE	Evidence of insurance must be provided to the Des Moines Parks, Recreation & Senior Services office no later than thirty (30) days prior to the commencement of the event. A Special Event Permit will not be issued until all insurance requirements have been received, verified and approved.
	The City of Des Moines must be listed as an additional insured. The Certificate of Additional Insured must be accompanied by the policy endorsement forms CG20 12 or CG 20 26 or equivalent or it will not be accepted. Please fax or e-mail your proof of insurance to the Special Events Office, Attn: Ashley Young. Contact information on page 1 of this form.
18. EXEMPTION REQUEST	Are you requesting an exemption from the Special Event Permit Fee? ☐ Yes ☐ No If Yes, state the reason for the exemption (i.e., constitutionally protected free speech, religious and political expression are accepted reasons for an exemption; non profit status by itself is not sufficient for exemption). Fee exemptions apply only to the Special Event Permit Fee and do not apply to other department's permit fees.
19. SIGNATURE	By signing this application I assume all risks and hazards of the conduct of this special event. In case of injury, I waive all claims or legal actions, financial or otherwise, against the City of Des Moines, its organizers, sponsors, employees, or any volunteers connected with the program unless injury is caused by the sold negligence of the City of Des Moines.
	_____ Print Applicant's Name _____ Date _____ Applicant's Signature (see below for electronic signature) _____ Date
Date: _____	
☐ By checking this box as an electronic signature, I agree to all the terms and conditions that may apply to the Special Event permitting process and agree that all information contained in this application is true and correct to my knowledge.	
20. CITY CLEARANCES & SPECIAL CONDITIONS (City Use Only)	Police Department Approval Special Conditions Department Contact: Conditions or Comments: ☐ Yes ☐ No ☐ Yes ☐ No
	Estimated Cost \$ _____
	Building Division Approval Special Conditions Building Permit Required? Department Contact: Conditions or Comments: ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No
	Estimated Cost \$ _____
	Transportation Engineering Special Conditions ROW Permit Required? Department Contact: Conditions or Comments: ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No
	Estimated Cost \$ _____
	Estimated Cost \$ _____

Marina Approval Special Conditions Department Contact: Conditions or Comments: Estimated Cost \$	☐ Yes ☐ No ☐ Yes ☐ No	
Parks & Recreation Approval Special Conditions Special Event Sign Permit? Facility Use Application? Department Contact: Conditions or Comments: Estimated Cost \$	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No	
Street Superintendent Approval Special Conditions Department Contact: Conditions or Comments: Estimated Cost \$	☐ Yes ☐ No ☐ Yes ☐ No	
Surface Water Management Approval Special Conditions Department Contact: Conditions or Comments: Estimated Cost \$	☐ Yes ☐ No ☐ Yes ☐ No	
SK Fire & Rescue Approval Special Conditions Department Contact: Conditions or Comments: South King Fire Permit Required? Estimated Cost \$	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No	
City Manager/Administration Approval Special Conditions Contract Required? City Council Resolution Required? Business License Required? Department Contact: Conditions or Comments: Estimated Cost \$	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No	Resolution No: _____ License No: _____
Total City Cost: \$ _____ Special Event Permit Fee: \$ _____ TOTAL CHARGE: \$ _____		