

CITY OF MOUNT CLEMENS APPLICATION FOR SPECIAL EVENT APPROVAL

Date Received by Community Development Department

ONE CROCKER BLVD., MOUNT CLEMENS, MI 48043 (586) 469-6818 EXT. 901 FAX (586) 469-7695 www.cityofmountclemens.com

NOTE: A COMPLETE AND DETAILED SITE PLAN/SITE MAP OF THE PROPERTY SHOWING THE EVENT AREA IS REQUIRED. PLAN MUST SHOW LOCATIONS OF SIGNS, TENTS OR ANY STRUCTURES, AMUSEMENT RIDES, FOOD SERVICES, PARKING AREA, THE LOCATION OF EXISTING BUILDINGS, ETC. REQUEST WILL NOT BE REVIEWED UNTIL THIS PLAN IS RECEIVED.

IF A TENT IS TO BE ERECTED, SPECIFICATIONS ARE REQUIRED

ADDITIONAL PERMITS MAY BE REQUIRED FOR BUILDING, ELECTRICAL AND MECHANICAL, IF APPLICABLE.

	i Name.			
Address:		City		Zip
Phone: Office:	Cell:	Email:		
Sponsoring Organization's Ager	nt's Name:			
Address:		City	State	Zip
Phone: Office:	Cell:	Email:		
Event Name:				
Event Purpose:				
Event Location:				
Event Date:				
Event Time(s):				
GIVE A DETAILED DESCRIPTION	OF THE PROPOSED SPECIAL EVE	NT: (use back or attach addi	tional sheets if i	necessary)
GIVE A DETAILED DESCRIPTION				icoccisui y)

	JNCE HOUSES/INFLATALES BE USED DUR S/INFLATABLES REQUIRE A SEPARATE AI				ROM THE PROIVDER
WILL THE EVENT HA	VE FOOD OR OTHER VENDORS? DORS MUST BE APPROVED BY THE MACC	YES	N	NO	
	ERVED OR SOLD AT THE EVENT? ROVIDE PROOF OF LIQUOR LIABILITY INS	YES SURANCE AND APPROV	/AL BY THE LCC	NO	
IF YES, DESCRIBE IN	VICES BE REQUIRED FOR THIS EVENT? DETAIL THE TYPE OF SERVICES REQUEST HARGE THE ACUTAL COST OF PROVIDING	ED:	YES	NO	
	OPOSED?YESYES		THIS APPLICATIO	N.	
CERTIFICATION AND	SIGNATURE: I understand and agree on	behalf of the sponsor	ing organization t	hat	
c) The approvapplication additional services, electron contact the Flame Resi	ndors must be approved by the Macomb val of this Special Event may include addi n. The event will be operated in conform requirements may include but are not lin ectric or water services, fire issues, or a de Mount Clemens Fire Inspector regardin stance for the Tent needs to be provided horized agent of the sponsoring organiza and agree that my sponsoring organiza en by the City Commission, all other City	itional requirements at lance with the approve mited to the procurem certificate of use from ag specific tent require d 10 days prior to the c lation, I herby apply for lition will comply with t	nd/or limitations, and guidelines from ent of permits an the building depa ments well in adv late of event/sale the approval of the he City's Special E	n the City Commind/or inspections artment. Please vance of your events. his Special Event Event Policy, the	ission. Such in regards to health note: You should ent. A certificate of , affirm the above terms of the
Applicant's Signatur	e	Date			
Printed Name of Ap	plicant	_			
	For City Use Only:				
	Approved				
	Approved, with Conditions				
	Denied				
	Date of City Commission Decision				

SPECIAL EVENT APPLICATION GUIDELINES

- Per City Ordinance section 21.300, all special events in the City of Mount Clemens must be approved and permitted by the City Commission in order to protect the health and safety of persons and property within the City.
- An application must be returned to the Community Development Department <u>at least forty-five (45) days</u> prior to your event. This provision may only be waived in extreme cases for events that involve a security issue.
- There is a \$50.00 application fee for ALL *Applications for Special Event Approval*. This includes events for nonprofit organizations and events for charitable solicitations.
- Certain large-scale special events may be subject to a separate Special Event Permit, after the *Application for Special Event Approval* is approved by the City Commission.
- Depending on the size of any tents being erected, it may require inspections and fees from the Building Department and Fire Department. The Fire Inspector should be contacted well in advance of the event date for specific tent requirements such as flame resistance certificates.
- There is a \$500.00 tap fee for the use of a fire hydrant and 30.00 fee for a back flow preventer. A separate inspection will be required to insure proper backflow protection is being provided.
- If you would like the Macomb County Sheriff's Office, the Mount Clemens Department of Public Services or the Mount Clemens Fire Department to participate in your event, please contact them directly, to determine availability any costs for participation.
- Required insurance documentation, including a concession waiver of liability to be signed prior to the opening of
 any vending operation, shall be submitted prior to the date of the event. The City shall require a \$1,000,000.00
 liability insurance policy naming the City as an additional insured. The City may also require additional or higher
 limits based upon risk factors. Insurance is not required for low hazard events of less than 50 people, include no
 physical activities and require no city services.
- If your event will have bounces houses and/or inflatables, the City requires an additional and separate Certificate of Liability Insurance from the inflatable provider.



INSURANCE REQUIREMENTS

All insurance coverage shall be with issuance carriers acceptable to the City of Mount Clemens. If any insurance is written with a deductible or self-insured retention, the contractor/subcontractor shall be solely responsible for said deductible or self-insured retention. The purchase of insurance and the furnishing of a certificate of insurance shall not be a satisfaction of any requirement for indemnification of the City of Mount Clemens. Not all of the following will be applicable to every special event, this is intended as a general guideline:

- a. Workers Compensation Insurance in accordance with all applicable statutes of the State of Michigan. Coverage shall include Employers Liability Coverage.
- b. Commercial General Liability Insurance on an "Occurrence" basis with limits of liability not less than \$1,000,000.00 (as stated above level of hazard) per occurrence and/or aggregate combined single limit, Personal Injury, Bodily Injury, and Property Damage.
- c. Motor Vehicle Liability Coverage, including Michigan No-Fault Coverage with limits of liability not less than \$500,000.00 per occurrence combined single limit bodily injury and property damage for all vehicles used in the performance of the contract. The City reserves the right to require specific limits of coverage if the contract involves the use of a motor vehicle for other than transportation to the work site.
- d. Additional Insured. Commercial General Liability Insurance as described above shall include an endorsement stating the following shall be an additional insured: "The City of Mount Clemens, including all elected and appointed officials and employees and all other individuals working on behalf of the City."
- e. Cancellation Notice. Workers Compensation Insurance, Commercial General Liability Insurance, and Motor Vehicle Liability Insurance as described above shall include an endorsement stating that thirty (30) days advance written notice of cancellation, non-renewal, reduction and/or material change shall be sent to:

City of Mount Clemens Terese G. Lucci, Purchasing Assistant One Crocker Boulevard Mount Clemens, MI 48043

f. Professional Liability, where applicable