

Application for Permit to Conduct AN OUTDOOR SOCIAL GATHERING

ST. 1882	Name of Gathering:
	Date Application Submitted:
I. <u>General Information</u> .	
It is unlawful for any sponsor, owner property to initiate, organize promote advertised a social gathering, unless Crook County Code Chapter 5.04.	
Community Development, 300 NE 3	shall be submitted to Crook County o rd Street, Prineville, Oregon as soon as rior to the date of the social gathering.
251 to 500 participants \$501 to 1000 participants \$500 participants	200.00 500.00 1,000.00 1,500.00
II. <u>Organizer Information</u> .	
social gathering. The Organizer sha	who holds, stages or sponsors an outdoor II establish a headquarters at the gathering is designee shall be present at the gathering
Organizer Name:	
Organizer's Address:	
City State ZIP Code	FAX Number:
	TAX Number.
	hile at the Event:
An Organizer who is not the owner of authorization form from the property	of the property shall provide a signed owner (Attachment A)

III. Property Owner Information

Owner refers to any person, who alone or severally with others, has legal title to the premises where the social gathering will take place. This can be a person or group who has charge or control of the property such as the owner's agent or lessee.

Owner Address:	Owner Name	e:						
City State ZIP Code Owner Phone Number: FAX Number: Owner E-mail Address: IV. Site Information Site Address: Tax Account Number(s): Description of site (fields, forest, meadow, etc., including the identification of any ponds, lakes, creeks, streams, rivers, or wetlands): V. Gathering Information Date(s) Gathering Will Be Held: Date(s) for Set-up Date(s) for Clean-Up: Gathering Name: Gathering Site Name: Purpose of Gathering (run, walk, fair, concert, etc.) [provide details]: Describe the planned activities at the gathering (or attach a program of events) Hours of Operation:								
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Maximum Number of Attendees at Any Given Time:	•							
	iviaximum Nu	Imber of Attendees at Any Given Time:						

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How long is an attendee likely to be of Maximum Number of Attendees Experimental Maximum Number of Attendees Over How will attendance be verified (e.g.,	ected Each Day: _ the Entire Gatheri	ng:
Will there be overnight camping?	Yes	No
VI. <u>Event Information</u> .		
Food Booths		
Will food booths be present?	Yes	No
Food Booth Coordinator's Name: Food Booth Coordinator's Phone Nur Food Booth Coordinator's E-mail Add Food Booth Coordinator's Phone Nur Will the Food Booth Coordinator prov Yes No If no, who will provide the food booths [Food booths may be provided by the person(s).] Will the Food Booth Coordinator prov Yes No	mber: Iress: mber While at the E ride the food booths s? e event Organizer, t	events? he food vendor, or other
If no, who will provide the electricity?		
Will the Food Booth Coordinator prov	ide hand wash stat	ions <u>IN</u> the food
booths? YesNo		
If no, who will provide the hand	d wash stations <u>IN</u> t	the food booths?
Will the Food Booth Coordinator prov	ide refrigerated tru	cks?

<u>Alcohol</u>
Will alcoholic beverages be sold on the premises?
Yes No
If yes, has the Oregon Liquor Control Commission granted approval?
YesNo
Sound System
Will amplified sound system or a public address system be used?
YesNo
What hours will the amplified sound system/public address system be used:
Restrooms
Will restrooms/portable toilets be provided?YesNo
If yes, how many facilities will be provided?

Who is the contractor responsible for handling wastewater management (e.g.,
providing and servicing portable toilets)?
Company Name:
Contact Name:
Phone Number:
<u>Drinking Water</u>
What will be the source of the required water supply?

[The Organizer shall provide and strategically located drinking water
stations, complying with OAR 333-039-0015, to effectively meet the drinking water needs of attendees, participants, and staff.]
difficing water fleeds of attendees, participants, and stail.]
First Aid/Medical Services
How many first aid stations will be provided?
Who is the r responsible for providing first aid/medical services?
Contact Name:
Contact Name:Phone Number:

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[Each event shall have Emergency Medical Facilities as defined in OAR 333-039-0040. Additional facilities may be required by the County Health Department, due to the nature of the event, time of year, number of attendees and participants, risk of injuries, or other public health and safety needs.]

<u>Lighting</u> Will the event be held after daylight hours?	Yes	No		
[If the temporary event will be held after daylight, there must be adequate lighting to ensure the comfort and safety of the attendees, participants, and staff. Lighting is required in the parking areas as well as on the event site.]				
What type of lighting source and number of lighting fixtures will be used?				
What electrical source will be used?				
Solid Waste Management How many, and what type, trash containers will be	on site?			
Will the Organizer handle solid waste management Yes No	 it and site clear	 า-up?		
If yes, who will be responsible for the solid waste rup?	-	nd site clean-		
Name:When will the clean-up take place?				
If no, who is the contractor, under written contract handle the solid waste and site clean-up? Company Name: Contact Name:				
Phone Number:				
When will the clean-up take place?				
How will the waste be collected and where will it fi	nally be dispos	ed?		

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Crowd Control

Describe the type of crowd control/security personnel that will be on-site during the event. Detail the number of personnel on site and their responsibilities. Describe who will be in charge of security for the gathering:		
Who is the contractor, under written contract with the Organizer that will handle the crowd control and security? Company Name: Contact Name:		
Phone Number: Other		
Will there be fireworks?YesNo If yes, what time? How long?		
Will animals be present?YesNo If yes, how will the animals be involved?		

VII. <u>Traffic Control Plan</u>

The applicant is required to submit a Traffic Control Plan to the County for approval. The plan will show how traffic will enter the county Road System and exit the County Road system without substantial interruption to surrounding properties. The plan should include a description of any flaggers that might be required and any advance temporary signing.

VIII. Site Plan and Directional Signs

A. Sufficient signage shall be required for identifying and directing attendees, participants and staff to: all entrance and exit locations, the Organizer's headquarters, first aid station(s), restrooms, and free drinking water facilities. All lettering shall be in a color and design that is in high contrast with the background and of an appropriate font size to be clearly visible and easily read from anywhere on the gathering site. Signage on the first aid station(s) shall be posted in all directions for everyone to clearly identify. All signage shall be in compliance with local fire and building codes. If a gathering is held at night time, all exit signs and exit markings

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shall be illuminated. Additionally, within an enclosed building, illuminated low level exit signs and directional markings shall be required.

- B. A detailed site plan of the area where the gathering will take place, including the following details, shall be submitted with this Application. (A hand drawn map of reasonable scale is acceptable.) The site plan shall show existing structures on the property and proposed temporary structures.
 - 1) Show parking areas available and designate areas for handicapped, attendees, participants, and staff both those under the control of the Organizer and others which may be used off site for the gathering. Include an estimate of the size of the area and the number of parking spots that will be provided;
 - 2) Location of the entrances and exits designated for attendees, participants, and staff, including placements of directional signs leading to these locations, as well as any interior walks and roadways (Please detail emergency vehicle access and mark in which direction traffic will flow on the interior roadways);
 - 3) Location of the Organizer's headquarters, including the placement of directional signage showing this location;
 - 4) Location of any trails, tracks, runs, roadways and the like;
 - 5) Location of food booths;
 - 6) Location of restrooms, indicating which are handicap accessible, and hand wash stations, both permanent and portable, including placement of directional signs leading to these facilities;
 - 7) Location of solid waste receptacles;
 - 8) Location of waste water tanks, if unable to directly connect to the sanitary sewer system;
 - 9) Location of free drinking water stations including placement of directional signs leading to these stations;
 - 10) Location of lighting, if event takes place after daylight hours;
 - 11) Location of electrical power sources;

	12)	Location of stage and sound equipment, indicathey are pointing; and	ating the direction
	13)	Location of the first aid station(s), including the directional signage showing this facility, emergand emergency vehicle ingress and egress rounds.	ency vehicle parking,
	14)	Location of camping area (if provided)	
IX.	INSURANCE		
	Has th	ne applicant provided proof of casualty insuranc No	e?Yes
	Has th	ne applicant provided the cash deposit as requir Code 5.04.060(2)?You	red by Crook County esNo
The applicant agrees to meet the terms and provisions of Crook County Code chapter 5.04 and all laws, rules and regulations of the state of Oregon and Crook County.			
	Applic	cant Signature	Date