APPLICATION FOR PERMIT TO CONDUCT AN OUTDOOR MASS GATHERING

Name of Mass Gathering: 

Date Application Submitted: 

I. General Information.

It is unlawful for any sponsor, owner of property, or person in charge of property to initiate, organize promote, permit, conduct or cause to be advertised a mass gathering, unless a permit has been obtained pursuant to Crook County Code Chapter 5.04.

The application with all attachments and the permit fee of $2,500 (attendance of 3,000 to 10,000) or $5,000 (attendance in excess of 10,000) should be submitted to Crook County Community Development, 300 NE 3rd Street, Prineville, Oregon as soon as possible, but no less than 180 days prior to the date of the mass gathering.

II. Organizer Information.

The Organizer includes any person who holds, stages or sponsors an outdoor mass gathering. The Organizer shall establish a headquarters at the gathering site and the Organizer or Organizer’s designee shall be present at the gathering at all times during operating hours.

Organizer Name: ____________________________
Organizer’s Address: ____________________________
City State ZIP Code ____________________________
Organizer’s Phone Number: __________________ FAX Number: _______
Organizer’s E-mail Address: __________________
Contact Person (Person-in-charge): __________________
Contact Person’s Phone Number: __________________
Contact Person’s Phone Number While at the Event: __________________

An Organizer who is not the owner of the property shall provide a signed authorization form from the property 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 mass 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 Name: ____________________________
Owner Address: ____________________________________________________________
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: ____________________________
Maximum Number of Attendees at Any Given Time: _______________________
How long is an attendee likely to be on the site? (Hours): ____________________
Maximum Number of Attendees Expected Each Day: _______________________
Maximum Number of Attendees Over the Entire Gathering: __________________
How will attendance be verified (e.g., wrist bands, ticket sales)? ________________________
Will there be overnight camping?   □ Yes   □ No

VI. Event Information.

Food Booths

Will food booths be present?   □ Yes   □ No

Food Booth Coordinator’s Name: ____________________________________________

Food Booth Coordinator’s Phone Number: ________________

Food Booth Coordinator’s E-mail Address: _________________________________

Food Booth Coordinator’s Phone Number While at the Event _____________

Will the Food Booth Coordinator provide the food booths? ______

□ Yes   □ No

If no, who will provide the food booths? _____________________________

[Food booths may be provided by the event Organizer, the food vendor, or other
person(s).]

Will the Food Booth Coordinator provide the electricity for the food booths? ___

□ Yes   ___No

If no, who will provide the electricity? ________________________________

Will the Food Booth Coordinator provide hand wash stations IN the food
booths? ____

□ Yes   __No

If no, who will provide the hand wash stations IN the food booths?

________________________________________________________

Will the Food Booth Coordinator provide refrigerated trucks?

□ Yes   □ No

Alcohol

Will alcoholic beverages be sold on the premises?

□ Yes   □ No

If yes, has the Oregon Liquor Control Commission granted approval?

□ Yes   □ No
**Sound System**
Will amplified sound system or a public address system be used?  
________ Yes  ________ No

What hours will the amplified sound system/public address system be used:

____________________________________________________________

**Restrooms**
Will restrooms/portable toilets be provided?  _______Yes  _______No

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: __________________________________________

**Drinking Water**
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.]

**First Aid/Medical Services**
How many first aid stations will be provided?  _____________________________

Who is the responsible for providing first aid/medical services?
Company Name: _________________________________________
Contact Name: __________________________________________
Phone Number: __________________________________________

[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.]
Lighting
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 and site clean-up? ______ Yes ________ No

If yes, who will be responsible for the solid waste management and site clean-up?
Name: __________________________________________________________________________

When will the clean-up take place? _____________________________________________

If no, who is the contractor, under written contract with the Organizer that will 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 finally be disposed? ________

________________________________________________________________________

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? _____Yes _____No
If yes, what time? _______________ How long? _______________

Will animals be present? ________Yes ________ No
If yes, how will the animals be involved? ________________________

VII. Traffic Control Plan

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 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, indicating the direction they are pointing; and
13) Location of the first aid station(s), including the placement of directional signage showing this facility, emergency vehicle parking, and emergency vehicle ingress and egress routes.

14) Location of camping area (if provided)

IX. **INSURANCE**

Has the applicant provided proof of casualty insurance? _____Yes _____No

Has the applicant provided the cash deposit as required by Crook County Code 5.04.060(2)? _____Yes _____No

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.

________________________________________________________
Applicant Signature Date