



TOWN OF REDCLIFF

1 3 Street NE Box 40
Redcliff, AB T0J 2P0
www.redcliff.ca
T 403.548.3232
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SPECIAL EVENT APPLICATION for Parks and Municipal Street Use

APPLICANT INFORMATION:	ORGANIZATION SPOKESPERSON: Please name an individual who can address public inquiries regarding your event (<input type="checkbox"/> same as applicant)
Name:	Name:
Title:	Title:
Organization:	Organization:
Address:	Address:
Email:	Email:
Phone:	Phone:

EVENT DESCRIPTION

Event Name:
Event Location:
Event Dates and Times (including set up and tear down schedules):
Type and Description of Event:
Beer/Liquor Garden: <input type="checkbox"/> No <input type="checkbox"/> Yes If <u>yes</u> , additional requirements must be met. Please consult with staff.
Estimated Attendance:
On-Site Supervisor: _____ Phone: _____

INSURANCE

If you are advised that proof of liability insurance is required; you must provide proof that you have in the amount of at least \$2 million must be provided within 10 days of event approval. "The Town of Redcliff" must be named as an "additional insured".	
Have you attached confirmation of insurance?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will proof of insurance be forwarded by insurance provider?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If <u>no</u> , please explain:	

BARRICADES /TABLES/GARBAGE, etc

Some municipal equipment such as garbage cans; dumpsters; barricades and picnic tables are available for **COMMUNITY EVENTS** but this must be booked a minimum of 2 weeks prior to the event and are subject to availability. (The needs of the municipality will take precedence.) Event organizers must ensure that placement of any event related equipment does not pose any hazard to event participants.

Town of Redcliff supplied: Yes No

Number of Barricades required:

Other equipment required, please list:

Other Source: Yes No

ROAD CLOSURE(S)

Does your event require the closure of any municipal roads. If so, please indicate and clearly label on an attached map/site plan which roads you want to close, and the dates and times required. No Yes

****You may be required to have trained flag persons and marshals.****

CONTRACTORS/VENDORS

Event organizers are responsible to ensure that any contractors or vendors participating in the event (i.e. market vendors, traffic flagging companies, etc.) carry adequate liability insurance coverage (\$2 million minimum), or that contractors and vendors are covered under the event organizer's insurance ("Blanket contractual liability").

Are you using contractors (regardless of service)? Yes No

If yes, list contractors:

If any vendors are serving food, has the appropriate food service permit been obtained from the health authority? Yes No

Have contractors/vendors provided proof of up to date Worker Compensation insurance coverage? Yes No

Have contractors/vendors secured adequate liability insurance ? Yes No

If no, are they covered under the event organizer's insurance? Yes No

POWER REQUIREMENTS

A deposit of \$125 is required for keys used to access electrical boxes on Municipal property. You must ensure that any placement of electrical cords does not cause a hazard (i.e. extension cords laid across walkways).

For what purpose:

Power source location:

AMPLIFICATION *(for what purpose):*

Event organizers must ensure noise levels comply with the terms set out in the Municipality's *Noise Bylaw*

Pre-recorded music

Live band

Speeches

Dancing at site

ENTERTAINMENT

Type:
Stage: <input type="checkbox"/> Yes <input type="checkbox"/> No
Special Requirements:

TENTS /INFLATABLES

If tents/inflatables are being used, they must be properly staked or anchored. You must ensure that anchor points do not pose a tripping hazard.	
Number being used:	Type:
Size:	
Staked into ground: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Purpose:	
Location (<i>mark on site map</i>):	

SIGNS and BANNERS

Describe all signage that will be used to direct the public, advertise the event, or publicize a sponsor. Please note that any signage posted to publicize the event may require a separate permit and must be removed following the event.

FACILITY USE INFORMATION FORM

Town of Redcliff staff will only consider events that provide economic and cultural contributions to both visitors and locals of the community. To better assess your proposal, please provide the following information:

BENEFITS

Describe the main economic and cultural benefits to Redcliff residents and visitors.

FUNDRAISER

If the event is a fundraiser, please indicate the primary recipient of funds raised:

MUNICIPAL PROPERTY AND FACILITY USE

If applicable, identify the facility or property required and provide a complete description of event. Please note that fees, deposits and use of municipal property is governed by local bylaws and policies.

Lions Park Legion Memorial Park River Valley Park Seniors Centre Other (please identify)

MAP / SITE PLAN: Attach a map (hand drawn is acceptable) of all areas to be used outlining all proposed event features.

The individual who signs the application is responsible for all aspects of the event, including compliance with Municipal bylaws (copies available on request or from the Town's website; www.redcliff.ca), the conduct and safety of all individuals working or attending the event, clean-up following the event, and any contractors hired to provide a service to the event.

Names of Event Applicant (Please print)

Date

Signature of Event Applicant

* The personal information requested on this form is collected for promotional and booking confirmation use, and will only be disclosed within the Freedom of Information Privacy Act. If you have any questions regarding the collections, use or disclosure of the information provided to the Town of Redcliff on this form, please contact (403) 548-3232.

**RETURN COMPLETED FORMS TO THE TOWN OF REDCLIFF FOR APPROVAL.
YOU WILL BE NOTIFIED ONCE YOUR APPLICATION HAS BEEN REVIEWED.**

FOR OFFICE USE ONLY:

LEGISLATION AND DEVELOPMENT

Name of Authorized Representative (Please print)

Date

Signature of Authorized Representative

Notes or requirements:

PLANNING AND OPERATIONS

Name of Authorized Representative (Please print)

Date

Signature of Authorized Representative

Notes or requirements:

RCMP

Name of Authorized Representative (Please print)

Date

Recommendation to APPROVE or REFUSE: _____

Requirements for approval or additional notes: _____

Signature of Authorized Representative

BYLAW

Name of Authorized Representative (Please print)

Date

Recommendation to APPROVE or REFUSE: _____

Requirements for approval or additional notes: _____

Signature of Authorized Representative

ADDITIONAL APPROVAL REQUIRED FROM: _____

Name of Authorized Representative (Please print)

Date

Recommendation to APPROVE or REFUSE: _____

Requirements for approval or additional notes: _____

Signature of Authorized Representative