

**CITY OF SACO
SPECIAL EVENT APPLICATION**

(Appendix A)

City of Saco
300 Main Street
Saco, Maine, 04072

Name of Event _____ Location of Event _____

Start Time _____ Finish Time _____

Description of Event _____

Estimated # of Participants _____ Estimated Attendance _____

Type of Event:

Festival/Fair

Race/Walk/Bike Ride

Concert

Parade/March

Other-Please clarify _____

If held in the past—Is this event changing this year? If so, how? _____

What impact will this have upon the surrounding neighborhood? (Noise, Traffic, etc) Please explain:

Describe the means by which the neighborhood (residents and businesses) will be notified of this event and its public hearing:

Organization Information

Name of Organization _____

Address _____

Business Telephone _____ Fax _____ E-mail _____

Contact Person/Event Coordinator

Name & Address _____

Telephone _____ Cellular _____ E-mail _____

Relation to above organization _____

General Service Questions
Department of Public Works

Is the use of barricades necessary/requested for this event? _____ If yes, number needed _____

Will it be necessary to cover street and/or parking signs for this event? _____ If yes, please note on diagram.

What is your plan for cleanup and debris disposal for this event? _____

Is any other Public Works assistance anticipated? _____

Parks and Recreation Department

Will this event take place in a City park? _____ If yes, where _____

Will tenting/staging be utilized for this event? _____ If yes, what is your plan to repair any damage caused by stakes, tie-downs, etc? _____

Any Parks and Recreation assistance required? _____

Fire Department

Will the Fire Department have access to all sites in the event of an emergency? _____

Will any fire hydrants be obstructed? _____ Will you have access to E 9-1-1? _____

Will you have First Aid or medical staff present? _____

Police Department

Is traffic control necessary for this event? _____ If yes, who will provide it? _____

Is crowd control necessary for this event? _____ If yes, who will provide it? _____

Other

All vendors *must* obtain proper licenses/permits from the City Clerk's office (284-4831).

Indemnification agreement/insurance certificate must be attached to this application at time of submission.

Site Plan Sketch may be accompanied by a separate map, if necessary.

SITE PLAN SKETCH OF SPECIAL EVENT (Completed by Event Coordinator)

In the space below, please provide the following information. Attach a separate map if necessary.

General Map of Location
Street Closures/Parking Information
Garbage Cans
Tents/Stages/Grandstands
Loudspeakers

Vendor Locations
Event Coordinator's Booth
Water/Electricity Sources
Water Sources
Rest Facilities



Applicant's Statement of Agreement:

Everything I have stated on this agreement is correct to the best of my knowledge. This permit, if granted, is not transferable and is revocable at any time at the discretion of the City of Saco. I understand that the issuance of this permit is contingent upon compliance with any and all conditions imposed by the City of Saco or its officers.

Applicant Signature _____ Date _____

Appendix B

**INDEMNIFICATION AND RELEASE PROVISIONS
CITY OF SACO SPECIAL EVENT PERMIT**

A. In consideration for being permitted to use the facilities and/or rights-of-way of the City of Saco, (hereinafter "City"), _____ (insert name of person/entity seeking permission to use facilities and/or rights-of-way, hereinafter "Applicant") agrees to indemnify and hold harmless the City, its officers, employees, and insurers, from and against all liability, claims, and demands, which are incurred, made, or brought by any person or entity on account of damage, loss, or injury, including without limitation claims arising from property loss or damage, bodily injury, personal injury, sickness, disease, death, or any other loss of any kind whatsoever, which arise out of or are in any manner connected with the use of the facilities and/or rights-of-way, whether any such liability, claims, and demands result from the act, omission, negligence, or other fault on the part of the City, its officers, or its employees, or from any other cause whatsoever.

B. By signing below, Applicant agrees that, in the event of any damage, loss or injury to the facilities or to any property or equipment therein or to the City rights-of-way, the City may deduct from any damage deposit the full amount of such damage, loss, or injury. Applicant further agrees that, if such damage, loss, or injury exceeds the amount of the damage deposit, Applicant will promptly reimburse the City for all costs associated therewith upon billing by the City.

C. In addition, in consideration for being permitted to use the facilities and/or rights-of-way, Applicant, on behalf of itself, and its officers, employees, members, and participants, hereby expressly exempts and releases the City, its officers, employees, insurers, from and against all liability, claims, and demands, on account of injury, loss, or damage, including without limitation claims arising from property loss or damage, bodily injury, personal injury, sickness, disease, or death, that Applicant may incur as a result of such use, unless any such liability claims and demands result from the act, omission, negligence, or other fault on the part of the City, its officers, or its employees.

D. In addition, _____ has furnished and attached two copies of certificates of insurance with the City of Saco named as an additional insured in the amount of \$1,000,000 unless a greater amount is warranted.

Signature of Applicant

Date

Printed Name of Applicant

