



Recreation Administration SPECIAL EVENT LONG FORM WORKSHEET



A special event is any large event with an expected attendance in excess of 500 persons. However, the Department of Recreation and Parks may declare any event with over 100 persons a special event, at its own discretion. Any proposal for a large special event (expected attendance of more than 100) or an event at an unstaffed facility (pocket park) must be submitted at least 60 days prior to the first day of the proposed event and shall include the following information:

SPONSOR OF THE EVENT

Name of responsible entity that will assume full liability for the event and its associated activities. You must also provide additional sponsors, event contact person and alternate, along with phone numbers, business address, and any provisions for public/vendor information dissemination.

ORGANIZATION AND ADMINISTRATION

Who will coordinate, organize and/or promote the event? What will the responsibilities of each involved entity/sponsor include? What are the qualifications of the organizers/promoters? Provide references and list of events/activities previously coordinated, promoted, and/or sponsored.

DATE(S) REQUESTED

What is the date of the event? Include an estimate of the time needed for set-up and tear-down. What is the anticipated length of time for the facility activities? Provide your construction schedule, including types of structures and timelines for any construction (booths, stages, fencing, etc.).

OPERATING HOURS

Normal Park hours are considered sunrise to sunset. An event that extends into the evening will have to have special permission from both Recreation and Parks and other involved agencies, such as the Department of Transportation, LAFD and LAPD.

ANTICIPATED CROWD SIZES

Method(s) for determining anticipated crowd sizes should be identified. Please use information provided by trade magazines, trade associations, past performance of similar events at a similar location. These are some options in determining the anticipated attendance.

LIST AND DESCRIPTION OF ALL ANTICIPATED ACTIVITIES

Are carnival rides, game booths, commercial/community food and drink booths, commercial/community exhibits, featured/professional entertainment and any other activities being considered? Children's crafts or activity booths, jumpers/moon bouncer activities, face painters, puppet shows? Carnival rides and game booths shall be provided by pre-approved City carnival operators; proposal shall indicate which operator is being considered.

COMMUNITY INVOLVEMENT AND OUTREACH

What community groups are participating in your event? Participation requirements, i.e. Fees, activity restrictions, etc.

TRAFFIC AND PARKING CONTROLS

Provide your ingress and egress plans. Will you require a professional parking company? Will you charge for parking?

FINANCIAL CONCERNS

List all the fees being collected, including admission fees (adults, children, seniors citizens, etc.), parking fees, and vendor/booth fees for participation in the event (food/drink booths, merchandise booths, etc.) Anticipated event funding to include operating budgets and sources of funds. Any formal or informal commercial/non-commercial sponsorship commitments should be identified.

SECURITY CONSIDERATIONS

Identify a security coordinator, and his/her training, experience and references. Plans for use of mounted, private, and peer security should be indicated. Security command post (supervision/coordination) and communications should be addressed.

PROOF OF INSURANCE

A one million dollar general and products liability policy with the City of Los Angeles and the U.S. Army Corps of Engineers (*when event is on Army Corps property*) or other property owners named as additional insured is required at minimum. Permittee will be required to file proof of insurance with City's Risk Manager website: <https://kwikcomply.org/> Do not send copy of the Certificate of Insurance. Additional insurance requirements may be required.

NOTES:

SPECIAL EVENT LONG FORM WORKSHEET

(Complete pages 3 – 6 – Supplemental form to Application for Use of Facility)

Event Location:	
Organization's Name:	
Event Contact Person:	
Address:	
Contact Number(s):	
Name or Type of Event:	
Event Description:	

Event Days and Times		Date(s)	Time(s)
	Set-up		
	Event		
	Clean-up		

Is the Sponsoring Organization non-profit?	Tax-ID#	<input type="checkbox"/> NO
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Are admission fees being charged?	<input type="checkbox"/> YES <input type="checkbox"/> NO	How much?	\$
Is this a fundraiser?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Benefiting who?	

Parking	Number of Cars?		Fee/car	\$
Will there be paid parking? <input type="checkbox"/> YES <input type="checkbox"/> NO	Location:			
	Parking Coordinator:			
Offsite Parking? <input type="checkbox"/> YES <input type="checkbox"/> NO	Contact:			
	Parking Plan (describe):			

Approximate attendance expected?	Attendance: #	Staffing/Volunteers: #
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10 x 10 Booths* do you anticipate, if any? <input type="checkbox"/> None		
<input type="checkbox"/> Merchandise (Sales)	Total Number of Booths	
<input type="checkbox"/> Display/Information Booths (No Sales)	Total Number of Booths	
<input type="checkbox"/> Food Booths (Sales)	Total Number of Booths	
<input type="checkbox"/> Food Booths (No Sales)	Total Number of Booths	

Larger than 10x 10 canopies, if any? <input type="checkbox"/> None					
Size		Number		Location	
Size		Number		Location	

Stage :	<input type="checkbox"/> YES <input type="checkbox"/> NO	Size:		Height:	
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Outside Security Company <input type="checkbox"/> YES <input type="checkbox"/> NO	Insurance CA#:	Company:	
	Insurance Expiration Date:	Address:	
		Phone #:	
	Number of Guards:	Days and Hours	
	# of Overnight Guards:	Days and Hours	
	PLEASE NOTE: Private security must additionally insure the City of Los Angeles and US Army Corps (if applicable) on their insurance policy.		

Portable Toilets and Sinks <input type="checkbox"/> YES <input type="checkbox"/> NO	Insurance CA#:	Company:	
	Insurance Expiration Date:	Address:	
		Phone #	
	Number of Toilets:	Number of ADA Toilets:	Number of handwashing sinks:
	Cleaning Schedule:		
	PLEASE NOTE: One portable restroom unit per every 200 persons expected in attendance. Ten percent of these should be ADA.		

Rental Company <input type="checkbox"/> YES <input type="checkbox"/> NO	Insurance CA#:	Company:		
		Address:		
	Insurance Expiration Date:			
		Phone #		
	Number of Tables:	Number of Chairs:	Number of Tents:	
	Stage included in Rental Company: <input type="checkbox"/> YES <input type="checkbox"/> NO		Other:	

Trash Receptacles <input type="checkbox"/> YES <input type="checkbox"/> NO	Insurance CA#:	Company:		
		Address:		
	Insurance Expiration Date:			
		Phone #		
	Number of trash bins:	Number of Recycle bins:	20' Roll off bins:	
	Cleaning Schedule:			

PLEASE NOTE: Applicant may be required to provide 30-gallon or equivalent disposable trash receptacles throughout the site, including parking lot(s) and pedestrian thoroughfares. These are to be disposed of and replaced with fresh liners when full. Additionally, PERMITTEE is responsible for the purchase and replacement of all plastic trash can liners (55-gallon, 1.18 mil) on Department receptacles when full. Two twenty-foot (20') bins for every 10,000 in expected attendance to be emptied as needed during the event, as needed.

First-Aid <input type="checkbox"/> YES <input type="checkbox"/> NO	Insurance CA#:	Company:		
		Address:		
	Insurance Expiration Date:			
		Phone #		

Amplified Sound	<input type="checkbox"/> YES <input type="checkbox"/> NO	Location:		Time:
Use of Electricity	<input type="checkbox"/> YES <input type="checkbox"/> NO	Location:		
Use of Water	<input type="checkbox"/> YES <input type="checkbox"/> NO	Location:		
Phone Banks	<input type="checkbox"/> YES <input type="checkbox"/> NO	Location:		
Alcohol	<input type="checkbox"/> YES <input type="checkbox"/> NO	Location:		ABC permit <input type="checkbox"/>

Bands	<input type="checkbox"/> YES <input type="checkbox"/> NO	Type of Music		Type of Music	
		Type of Music		Type of Music	
		Type of Music		Type of Music	
Other entertainment	<input type="checkbox"/> YES <input type="checkbox"/> NO	How Many		What Type	
		How Many		What Type	
		How Many		What Type	

Carnival <input type="checkbox"/> YES <input type="checkbox"/> NO	Insurance CA#:	Operator:	
		Address	
	Insurance Expiration Date:		
		Phone #	

Fireworks <input type="checkbox"/> YES <input type="checkbox"/> NO	Insurance CA#:	Operator:	
		Address	
	Insurance Expiration Date:		
		Phone #	

OTHER REQUIREMENTS to TALK ABOUT:

Plot Plan needed by date: _____

Insurance needed by date: _____

PERMITTEE has 24 hours to return the site to its original condition and remove all items which were delivered/brought onto the site.

It is the PERMITTEE's responsibility to inquire of the Bureau of Street Services Event Permit (BOSS) for LAPD, LA Fire, and Department of Transportation permits and approvals. BSS website is: <http://bssspevents@lacity.org>

Meeting with Superintendent needed.

Notes: