City of Okanogan
P.O. Box 752
120 3rd Avenue, North
Okanogan, WA 98840
Phone: 509.422.3600 Fax: 509.422.0747

SPECIAL EVENTS PERMIT

Application

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Please fill out application completely.

- Applications must be submitted 90 days in advance if requesting closure of SR215 aka 2nd Avenue.
- All other events should be submitted 30 days in advance to allow for proper notice to surrounding businesses or affected residents.
- Application must include an attachment indicating routing maps for parades or races, including indications for all streets or portions of streets to be closed. Include any streets outside of Okanogan City Limits that will be part of the event.
- Submit proof of liability insurance.
- Submit Special Events Permit Fee of $50.00
- Only complete applications are submitted for approval.

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PLEASE PRINT OR TYPE

_____ _____
Name of Contact Person Address

_____ _____
Email Address Phone Number

_____ _____
Name of Sponsoring Organization Address

_____ _____
Email Address Phone Number

Type and Purpose of Event (specific):

_____
_____
_____

Date(s) of Event: _____

Number of Participants (estimate): _____

Route to be Traveled or Used (include staging area):

_____
_____
_____
_____
_____

Time (or days and dates) Involved in Event:

_____	_____	_____	_____
Set Up Start Time	Event Start/End Time	Break Down Completion Time	Total time

Type of Closure Requested

◯ Half Street ◯ Full Street ◯ Rolling Slowdown ◯ Other_____

Name of Street(s) to be Closed or Altered for ENTIRE Event

_____
Name of Street

_____
Name of Street

Name of Street(s) to be Closed or Altered For a PORTION of Event

_____	_____	_____
Name of Street	Beginning Time	Ending Time
_____	_____	_____
Name of Street	Beginning Time	Ending Time

Parade Entries

☐ Cars ☐ Trucks ☐ ATVs ☐ Pedestrians ☐ Dogs/Cats
☐ Horses/Farm Animals (please provide pooper scoopers) ☐ Floats
☐ Other_____

The following is a checklist relating to any special events held on public property, or within a public right-of-way. Please check all items that apply.

Will there be any:

☐ Open Flame or Cooking Facilities
☐ Compressed Gas Cylinders
☐ Tents, Canopies or Awnings
☐ Bouncy House or Similar *(copy of owner's liability insurance required)*
☐ Trailers, Motor Homes, Booths, Stages or other Portable Structures

Additional Services Requested:

- ☐ Street Sweeper
- ☐ Picnic Tables number requested _____
- ☐ Trash Receptacles number requested _____
- ☐ Electrical Outlets
- ☐ Dumpster (you must arrange directly with Sunrise Disposal – 509.422.4530)
- ☐ Other_____

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READ CAREFULLY AND SIGN

Permittee agrees to supply the City Clerk with proof of Commercial General Liability insurance in the amount of $1,000,000 combined single limits per occurrence, prior to obtaining permit, naming the City of Okanogan as Additional Insured. SR-215(2nd Ave) closure requires an additional $2,000,000 Automobile Liability, naming the City of Okanogan and State of Washington as Additional Insured. A copy of the endorsement/s must be attached to the Certificate of Insurance. Sponsoring agency agrees to reimburse damage repair to City property.

Permittee agrees to maintain access for emergency vehicles.

Permittee agrees to defend, indemnify and save harmless the City, its appointed and elective officers and employees from and against all loss or expense, including but not limited to judgments, settlements, attorney fees and cost by reason of any and all claims and demands upon the City, its elected or appointed officials or employees for damages because of personal or bodily injury, including death at any time resulting therefrom, sustained by any person or persons and on account of damage to property including loss of use therefrom, arising out of any activity under or in connection with this event, except only such injury as shall have been occasioned by the sole negligence of the City, its elected and appointed officials or employees.

_____ _____

Signature of Applicant Date

Application Reviewed and Approved by:

City of Okanogan Public Works Department

_____ _____
Director of Public Works Date

City of Okanogan Fire Department

_____ _____
Fire Chief Date

Okanogan County Sheriff's Office

_____ _____
Sheriff's Office Representative Date

Insurance Certificate on file in Clerk's Office

_____ _____
City Clerk/Treasurer Date

Special Events Permit Approved:

_____ _____
Mayor Date

Comments/Special Instructions: