



85 N. Main St., Ivins, UT 84738  
 Tel: 435-628-0606 Fax: 435-674-5486  
 www.ivinsUtah.gov

Rec'd By: _____
Filing Fee: \$100.00
Receipt #: _____
Date: _____
Valid Until: _____

## SPECIAL EVENT PERMIT APPLICATION

Date of Event	Name of Event
Applicant Name	Phone #
Address	City, State, Zip

Detailed Description of Event: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Location of Event \_\_\_\_\_

Time and Duration of Event \_\_\_\_\_

Anticipated Participants	Anticipated Participation Fee	Anticipated Spectators
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A Special Event that creates a need for municipal coordination of parking, traffic flow, fire, police/security service and/or otherwise impacts the public health, safety, and welfare or general peace and tranquility of the community beyond that which would be reasonably necessary and ordinarily anticipated relative to personal and individual use of public or private property, and in all cases where an admission fee is required, shall be required to apply for and be granted a Special Event Permit for the specific event and its venue(s).

**Applications must be completed and submitted to the special event coordinator not less than thirty (30) days prior to the scheduled event.**

Events, which occur in a series such as live performances, may apply for the entire series of Special Events under one Special Event Permit.

Applications for Special Events shall be made in writing to Ivins City on this form. The application shall be signed by the person, or group of people, who is or are the organizer(s) and with whom the responsibility for conduct of the event lays. The applicant must be a natural person or persons and not a corporation, corporate sponsor, or business, or any other entity that is not a natural person.

**CHECKLIST**

(Please do not refer to "on file from previous year.")

- \_\_\_\_\_ Attach security plan
- \_\_\_\_\_ Attach EMS/FIRE plan
- \_\_\_\_\_ Attach a site plan of event
- \_\_\_\_\_ Attach a traffic and parking plan
- \_\_\_\_\_ Attach a plan of anticipated necessity for public personnel, equipment, and other public services at the event
- \_\_\_\_\_ Obtain a Temporary Sales Tax License from the State Tax Commission
- \_\_\_\_\_ Submit a vendor list and copy of the Temporary Sales Tax License
- \_\_\_\_\_ Proof of liability insurance in the amount of \$1,000,000, naming Ivins City as additional insured
- \_\_\_\_\_ Sign and notarize the Ivins City Special Event Hold Harmless Agreement

Once application has been submitted and complete, the Special Event Coordinator will submit the completed Special Event Permit Application to Department Heads for needs assessment review.

I hereby declare that the foregoing information given on this application for a special event permit is true and that falsifying any information constitutes cause for rejection of my permit.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\*\*\*\*\***STAFF REVIEW**\*\*\*\*\*

	Date Approved	Signature	Comments
Public Works	_____	_____	_____
Police	_____	_____	_____
Fire/EMS	_____	_____	_____
Parks & Recreation	_____	_____	_____
City Manager	_____	_____	_____
City Attorney	_____	_____	_____



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## SPECIAL EVENT HOLD HARMLESS AGREEMENT

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Date and Time of Event: \_\_\_\_\_

Event Location: \_\_\_\_\_

Event Type: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Applicant Telephone: \_\_\_\_\_

In consideration of being permitted to hold the above-referenced Special Event within Ivins City, the undersigned does hereby personally, and on behalf of the above-named applicant, agree to waive, release, indemnify, and hold harmless Ivins City, its officers, employees, and agents from and against any and all liability, claims, demands, actions, causes of action, proceedings, awards, judgments, and expenses (including attorney's fees and litigation costs) of every kind and nature, and by whomsoever made or brought, in respect of any personal or bodily injury (including death) to any person, and any loss of or damage to any property, caused directly or indirectly by the undersigned and/or applicant, its officers, employees, agents, or subcontractors, engaging in and/or sponsoring the above-referenced Special Event.

Dated this \_\_\_\_\_ day of \_\_\_\_\_

By: \_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

State of Utah                    )  
  ) ss.  
County of Washington        )

On this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, before me, \_\_\_\_\_,  
the undersigned Notary Public, personally appeared \_\_\_\_\_,  
personally known to me or proved to me on a basis of satisfactory evidence to be the person(s)  
whose name(s) is/are subscribed in the within instrument, and acknowledged that he/she/they  
executed it.

Witness my hand and official seal.

\_\_\_\_\_  
Notary Signature

My Commission Expires: \_\_\_\_\_