



STAFF USE ONLY
Pending Park Use Permit No. _____
 Over Capacity Special Event
 New Special Event

**PARK AND RECREATION DEPARTMENT
 RESERVATION OF SPACE**

~~Reservation of Space application will not be accepted without site plan and/or route maps.~~

Event Name _____
 Applicant Name _____ Mobile _____
 On-site/Event Contact _____ Mobile _____
 Host Organization/Company _____ Phone _____
 Host Organization/Company Address _____
 Email Address _____

Additional authorized representatives may be requested, in writing, by the original authorized representative or organization.

Is the Host Organization (company) a bona fide tax exempt nonprofit entity? Yes No

A copy of the non-profit (501 tax exemption) letter is required and must be attached to the application.

Fundraiser/Commercial/Promotional Activity: Yes No

Commercial, fundraising and promotional activities must pay to the respective Recreation Council an additional \$10.00 per hour (for youth activities) or \$15.00 per hour (for adult activities).

Estimated Total Attendance _____ Estimated Attendance at any given time _____

Do you plan on having alcoholic beverage service? Yes No

If yes, please check all that apply:

Free/Host Alcohol Alcohol Sales Host and Sales Alcohol Beer, Wine and/or Distilled Spirits

Beer Garden Venue(s) _____ Beer Garden Hours: _____

Glass containers of any kind are prohibited on all the beaches and park areas (SDMC 56.54).

~~Venue/Park/Field #1~~

Set-up Date	Set-up time from	to	Total hrs.
Event Date(s)	Time of use from	to	Total hrs.
Clean-up Date	Clean-up time from	to	Total hrs.

Park road or park parking lot closures associated with the event? Yes No Not Sure

Event organizer is responsible for posting road closure signage no less than two (2) weeks prior to the event date. Event organizer is responsible for parking lot closures associated with this event. Signage must be posted no less than 72 hours in advance of the parking lot closure. Event organizer must remove all signage immediately after event.

Road/Parking Lot	Date	Start Time	End Time	Total Hours

Equipment: Select equipment to be used at this site and the company providing equipment: (i.e. tables, chairs, canopies, stages, inflatables, etc.)

Air Jump Company Name (where permitted) _____ Canopy – up to 20' x 20' _____
 Carnival/Animal Rides (where permitted) _____ Vendors _____
 Tables _____ Chairs _____ Stage _____
 Canopy – up to 10' x 10' _____ Lighting _____
 Canopy – up to 10' x 20' _____ Other _____

(Any shade structure with two or more sides, larger than 20' x 20' requires a fire permit)

Music/voice amplification (restrictions may apply) Yes No

Purpose: _____ Intended Hours of Use: _____

~~Venue/Park/Field #2~~

Set-up Date	Set-up time from	to	Total hrs.
Event Date(s)	Time of use from	to	Total hrs.
Clean-up Date	Clean-up time from	to	Total hrs.

Park road or park parking lot closures associated with the event? Yes No Not Sure

Event organizer is responsible for posting road closure signage no less than two (2) weeks prior to the event date. Event organizer is responsible for parking lot closures associated with this event. Signage must be posted no less than 72 hours in advance of the parking lot closure. Event organizer must remove all signage immediately after event.

Road/Parking Lot	Date	Start Time	End Time	Total Hours

Equipment: Select equipment to be used at this site and the company providing equipment: (i.e. tables, chairs, canopies, stages, inflatables, etc.)

Air Jump Company Name (where permitted)	_____	Canopy - up to 20' x 20'	_____
Carnival/Animal Rides (where permitted)	_____	Vendors	_____
Tables _____	Chairs _____	Stage	_____
Canopy - up to 10' x 10'	_____	Lighting	_____
Canopy - up to 10' x 20'	_____	Other	_____

(Any shade structure with two or more sides, larger than 20' x 20' requires a fire permit)

Music/voice amplification (restrictions may apply) Yes No

Purpose: _____ Intended Hours of Use: _____
 Use "Additional Park Venues" sheet to add more venues.

Portable Toilets

No. of Portable Toilets (if required) _____

List Locations _____

(One Portable Toilet for every 250 persons is required; 10% ADA accessible).

Recycling and Trash Containers

(One recycling container is required per each trash container provided).

Container Type	Number of Containers
Recycling Single Container	_____
Trash Single Container	_____

Recycling and Trash Dumpsters

(One recycling dumpster is required for events over 300 persons).

Container Type	Number of Dumpsters
Recycling 3-Yard Dumpster (lid)	_____
Trash 3-Yard Dumpster (lid)	_____
Recycling 40-Yard Roll Off	_____
Trash 40-Yard Roll Off	_____

Electrical

No. of Generators (if needed) _____

Generators are based on your event needs. All locations must be approved by the park supervisor. All cables must be ramped and a drip pan placed underneath the unit. Please note: Park and Recreation does not provide power, water, or any equipment for outdoor events.

New Special Events

Name of Advisory Group _____

Approved

Not Approved

Meeting Date _____

Appointing Authority _____

Application must be completed and received at least 120 Calendar Days in advance for a permit. This application may be cancelled by Park & Recreation if all requirements are not met a minimum of 30 days before your event. ANY FAILURE TO FULLY DISCLOSE COMPLETE DETAILS OF YOUR EVENT MAY WARRANT YOUR APPLICATION TO BE RESUBMITTED WHICH INCLUDES THE REMITTANCE OF ADDITIONAL APPLICATION FEES. ~~Please notify staff in writing if your event is cancelled.~~

I have read and understand all the rules and regulations governing the use of City parkland and/or facilities that are attached to and a part of this application and agree to abide by same. By (print name) _____ who hereby certifies that he/she is the duly qualified and authorized representative of PERMITTEE as set forth in this Reservation of Space application. I further understand that only the authorized representative may cancel or make changes to the Reservation of Space.

Park use fees will be determined upon approval of this application. Fees will be calculated based on the City Council approved Park and Recreation Fee Schedule in effect at the time of application approval (not submittal date).

Authorized Signature _____ Date ____/____/____

Park & Recreation Staff (print name) _____ Phone _____

Staff Signature _____ Date ____/____/____

SITE PLAN/DIAGRAM

Yes No

ROUTE MAP

Yes No

Does the proposed ROS require a fully dimensioned close up of an enclosed area (s)?

Yes No