



CITY OF RED BLUFF

555 Washington Street Red Bluff, California 96080 Phone 530-527-2605 Fax 530-529-6878
www.ci.red-bluff.ca.us

REQUEST TO USE CITY STREETS/PROPERTY FOR SPECIAL EVENT

Section 1 – Proposed Date of Event/Requestor Information

Proposed Date of Event: _____

Name of organization making request (for its own use OR on behalf of others):

Address & Phone Number: _____

Contact Person (with phone number if different from above): _____

Onsite person responsible for the Event? (aka Event Coordinator): _____

Please note: The Event Coordinator shall be responsible for obtaining all permits and paying all fees

Contact preference during the event if necessary?: _____

Section 2 – Event Information

Purpose for Request/Event: _____

Date(s): _____

Times (include set up & take down time): From _____ to _____

Will vendors be working at the event? YES NO

***Please note: All Event Operators/Participants/Vendors shall comply with all Red Bluff Municipal Codes Including but not limited to Red Bluff City Code Chapter 12.*

Will Non-City trash containers be supplied for the event? YES NO

If YES, provide the contact person (if other than the Event Coordinator) responsible for all clean up and sign removal; including but not limited to the emptying all of the Non-City trash containers:

Is the Organization charging an entry or event fee? YES NO

If YES, what is the fee? _____

Do you have Insurance Coverage for this event? YES NO

Insurance Company/Policy Number: _____

NOTE: Applicant is required to provide liability insurance in the minimum amount of \$1,000,000 per occurrence and \$2,000,000 aggregate and name "the City of Red Bluff, its elected officials, officers and employees" as additional insureds.

(Attach copy of Certificate of Insurance)



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Attach a map showing the proposed portions of streets and alleys to be closed. Indicate where barricades, cones or other devices would be installed to close streets and/or alleys.

****Please note:** If the City is providing the barricades, cones or other devices then the City will drop off and pick up the items. Also, the "No Parking Special Event" signs shall be posted by the Event Coordinator or the Authorized Event Coordinator Representative. The installation and removal of the devices shall be the sole responsibility of the Event Coordinator or the Authorized Event Coordinator Representative.

Is your Organization proposing to provide Portable Toilets? YES (show location on map)
 NO

Are all vehicles that will be used in this event in compliance with all California Vehicle Code Sections (lighting, exhaust, tires, registration, & insurance)?

YES NO

If NO, how will vehicles be transported to and from event? _____

Who will notify surrounding businesses and offices of the event and how will they be notified?

Is event organizer requesting to allow any possession and/or consumption of alcoholic beverages during the event?

YES NO

If YES, how will alcoholic beverages be sold at this event, what measures will be taken by the Event Coordinator Control the sales and prevent the sales to minors? _____

How many people are estimated to attend your event? _____

Applicant represents that the foregoing is true and correct and agrees to provide insurance coverage as described above. Applicant will defend and indemnify the City of Red Bluff, its elected officials, officers and employees from any and all claims arising from, associated with or related to Applicant's event(s) described herein.

Submitted by (Applicant): _____ Date: _____
Authorized Representative Signature

IF ALCOHOL CONSUMPTION IS PLANNED TO BE SOLD OR PROVIDED DURING THE EVENT, A SEPARATE APPLICATION THROUGH CALIFORNIA A.B.C. AND THE RED BLUFF POLICE DEPARTMENT WILL BE REQUIRED.

The City of Red Bluff is an equal opportunity provider



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CITY REQUIREMENTS / CONDITIONS OF APPROVAL TO BE COMPLETED BY THE TECHNICAL ADVISORY COMMITTEE

Will the event require use of any state highway or right-of-way?

YES NO Encroachment

If YES, will an "ENCROACHMENT PERMIT" from CAL-Trans be required for this event?

YES Or Any other Public Agency Permit(s): _____

Will individuals be required to control access to street closure area including but not limited to emergency access?

YES NO

If YES, will barricades, cones or other devices be needed for access control/street closure/alley closure, etc.

YES NO

If YES, what is the number of barricades, cones or other devices needed?: _____

Who will provide barricades, cones or other devices?: _____

CITY: _____ Organization: _____

Who will set up and takedown?: _____

How many people required to control access and to allow emergency access for City Police, fire, etc.: _____

Will security personnel be required by the Red Bluff Police Dept., for this event?

YES NO

If YES, Red Bluff Police Dept., will accept the following forms of security?

YES NO

Other (Identify): _____

***Please note: If Private Security is required then the applicant will be required to submit the contract between the applicant and licensed bonded private security firm prior to the City Council taking action.*

Number of security personnel required for the Event by the Red Bluff Police Dept.: _____

Number of portable toilets required: _____

Location: _____

Setup and removal: _____

Signature – Director of Public Works _____
Date

Signature – Chief of Police _____
Date



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Comments / Additional Information