

# CITY OF COSTA MESA SPECIAL EVENTS

## APPLICANT INSTRUCTIONS

Thank you for selecting the City of Costa Mesa as the site for your event. In order to process your application as quickly as possible, the application and attached checklist must be thoroughly completed and returned to the Finance Department as quickly as possible with your application fee. Your application, checklist and application fee will constitute a completed application unless you are provided written notification of an incomplete application by City staff within 3 days of submission.

After your application has been evaluated by City staff, you will be given specific instructions and time limits in which you must submit any additional information or documents to complete your special event application. Late applications may result in denial of a Special Event Permit. Please complete the Special Event Application including the Special Event Checklist (attached) and return the completed documents to the Costa Mesa Finance Department.

- I. **IF YOUR EVENT IS PLANNED FOR A CITY PARK OR FACILITY YOU MUST SUBMIT A SIGNED TEMPORARY FACILITY PERMIT FROM THE RECREATION DIVISION BEFORE A SPECIAL EVENT APPLICATION WILL BE PROCESSED.**
  
- II. **YOU MUST ALSO OBTAIN THE REQUIRED CLEARANCES NOTED ON YOUR PERMIT.** Once your application has been reviewed by City staff, you will be notified of its status and any additional documentation that may be required. Additional requirements may include, but are not limited to the following:
  1. An insurance certificate and policy endorsement naming the City of Costa Mesa as an additional insured, and in an amount not less than \$1,000,000 (one million dollars), or in an amount determined by the City of Costa Mesa Risk Manager;
  2. A City of Costa Mesa "Hold Harmless and Indemnity Agreement" signed by the applicant;
  3. A City of Costa Mesa "Waiver and Release of Liability" signed by the applicant;
  4. If your event will require the closure of any portion of City roadways (i.e., partial lane closures or complete road closures), you will be required to:
    - a. Submit a map and traffic control plan showing road and lane closures, delineation, and detour routes;
    - b. Make notifications to the persons or businesses affected by the street closure
    - c. Enter into a Police Services Contract to hire Police personnel for the purposes of traffic control and/or crowd control;
  5. Provide a site plan showing the location of any structures (i.e., bleachers, tents, etc.), electrical, plumbing, and sanitation plans;
  6. Provide structural plans of any structures (i.e., bleachers, stages, platforms, etc.) to be reviewed by the City Planning and/or Building Department;
  7. Obtain approvals from the City Departments and other agencies as required;
  8. If City of Costa Mesa Personnel / Resources are to be used, you will be required to sign an agreement for the use of City Services. In addition, you will be required to prepay certain fees and / or provide the city with a surety bond prior to the start of your event.
  
- III. **A COPY OF THE CITY'S STANDARD CONDITIONS IS ATTACHED.** These standard conditions are the minimum conditions that will apply to all applicants. However, depending on the event additional conditions may be imposed in accordance with the City's Special Event Ordinance.

## APPLICANT INSTRUCTIONS – Continued

Because your application may be reviewed by several departments within the City of Costa Mesa, and possibly outside agencies, **it is important that you meet all of the time requirements and include all of the necessary documents when submitting your application.** You will be notified when your permit has been approved.

The following list of department and agency contacts is provided to assist you in obtaining required approvals:

CITY OF COSTA MESA	
DEPARTMENT:	PHONE NUMBER:
Administrative Services – Recreation	(714) 754-5300
Administrative Services – Risk Management	(714) 754-5359
Development Services– Building Safety	(714) 754-5273
Development Services – Planning	(714) 754-5245
Finance – Business Permits	(714) 754-5064
Fire – Fire Prevention	(714) 754-7400
Police Department – Special Events	(714) 754-4963
Public Services – Engineering	(714) 754-5323
Public Services – Maintenance Services	(714) 754-5123
Public Services – Transportation Services	(714) 754-5335

OUTSIDE AGENCIES	
AGENCY:	PHONE NUMBER:
Orange County Environmental Agency (EMA)	(714) 834-2300
Orange County Health Department	(714) 667-3680 (714) 972-0749 fax
Orange County Transit District	(714) 265-4331 (714) 265-4317 fax
Alcoholic Beverage Control (ABC)	(714) 558-4101 (714) 453-4486 fax
Mesa Consolidated Water District	(949) 631-1200

Again, thank you for selecting the City of Costa Mesa as the site for your event. We hope that your experience with the City of Costa Mesa will be a positive one, and you will plan events again with us in the future.

# SPECIAL EVENT APPLICATION

**ALL APPLICATIONS MUST BE ACCOMPANIED BY SITE PLANS AND VICINITY MAPS**

Please complete the following application regarding the event you are proposing:

DATE OF APPLICATION:				
APPLICANT'S NAME: (LAST) (FIRST) (MIDDLE)			TELEPHONE NUMBER: ( )	
APPLICANT'S ADDRESS:			CITY:	STATE: ZIP CODE:
RESPONSIBLE PERSON: (LAST) (FIRST) (MIDDLE)			TELEPHONE NUMBER: ( )	
FULL TRUE NAME OF BUSINESS CONDUCTING/HOSTING EVENT			TELEPHONE NUMBER: ( )	
BUSINESS ADDRESS			CITY:	STATE: ZIP CODE:
ADDRESS OF EVENT:				UNIT NUMBER:
APPROVED BUILDING USE:			TYPE OF STRUCTURE:	
TYPE OF EVENT:				
EVENT START DATE: / /	EVENT START TIME:	EVENT END DATE: / /	EVENT END TIME:	
SET UP START TIME:	SET UP END TIME:	TEAR DOWN START TIME:	TEAR DOWN END TIME:	TOTAL TIME OF EVENT: <b>Hours</b>
1. TYPE OF EVENT:				
2. DESCRIBE PLANNED ACTIVITIES:				
3. ESTIMATED # OF PERSONS AT EVENT:		4. ESTIMATED # OF VEHICLES AT EVENT:		5. ESTIMATED # OF PARKING SPACES REQUIRED:
6. LOCATION OF EVENT:				
7. WILL ALL OR A PORTION OF THE EVENT OCCUR ON PRIVATE PROPERTY WITHIN THE CITY OF COSTA MESA? <input type="checkbox"/> YES <input type="checkbox"/> NO. IF YES, WHERE?				
8. HAVE YOU OBTAINED WRITTEN APPROVAL FROM THE OWNERS FOR THE USE OF THE PROPERTY FOR THE EVENT? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, attach a copy of the written approval to your application. If NO, you must file written approval with the Costa Mesa Police Department before a Special Event Permit will be issued. Please write your name, date of the event, and the Special Event Application number on the written approval.				
9. WILL THERE BE ANY WATER "AID" STATIONS DISPENSING OF BEVERAGES IN DISPOSABLE CUPS? <input type="checkbox"/> YES <input type="checkbox"/> NO. IF YES, WHERE?				
10. WILL FOOD OR ALCOHOLIC BEVERAGES* BE SERVED OR SOLD AT THE EVENT? <input type="checkbox"/> YES <input type="checkbox"/> NO. IF YES, DESCRIBE:				
*Note: Alcohol is prohibited on City property except for inside at the Neighborhood Community Center				
11. HAVE YOU OBTAINED A PERMIT FOR THE SALE OF FOOD OR ALCOHOL? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, WHAT GOVERNMENTAL AGENCIES ISSUED PERMITS?				

12. WILL ANY ANIMALS BE DISPLAYED / EXHIBITED AT THE EVENT? <input type="checkbox"/> YES <input type="checkbox"/> NO. IF YES, DESCRIBE:
13. WILL ANY STRUCTURES (i.e., tents, booths, stages) BE ERECTED AT THE EVENT? <input type="checkbox"/> YES <input type="checkbox"/> NO. IF YES, DESCRIBE:
14. WILL THERE BE ANY SOUND AMPLIFICATION EQUIPMENT BE AT THE EVENT? <input type="checkbox"/> YES <input type="checkbox"/> NO. IF YES, DESCRIBE:
15. WILL THERE BE MONITORS OR SECURITY PERSONNEL AT THE EVENT? <input type="checkbox"/> YES <input type="checkbox"/> NO. IF YES, DESCRIBE NUMBER AND DUTIES:
16. IF THERE IS GOING TO BE ANY MERCHANDISE SALES AT YOUR EVENT, HAVE YOU OBTAINED A CITY OF COSTA MESA BUSINESS PERMIT? <input type="checkbox"/> YES <input type="checkbox"/> NO. IF YES, PLEASE PROVIDE THE DATE OF ISSUANCE AND THE LICENSE NUMBER:
LICENSE #: _____ DATE ISSUED: ____/____/____ DATE EXPIRED: ____/____/____

**IF YOUR EVENT WILL INVOLVE A PARADE, CYCLING EVENT, FOOT RACE, OR OTHER ACTIVITY WHICH WILL OBSTRUCT A CITY STREET OR RIGHT-OF-WAY OR REQUIRE A FULL OR PARTIAL STREET CLOSURE, PLEASE COMPLETE THE FOLLOWING SECTION.**

17. ASSEMBLY TIME	18. START TIME OF EVENT:	19. ASSEMBLY LOCATION:
20. ESTIMATED DURATION OF EVENT:	21. DISBANDING LOCATION:	
21. PRE-APPROVED ROUTE LOCATION		
22. DESCRIBE VEHICLES / FLOATS (i.e., how many size, powered by):		
23. NUMBER AND TYPE OF MARCHING UNITS IF APPLICABLE:		

24. ANY PARADE ANIMALS?  YES  NO. IF YES, DESCRIBE:

**DECLARATION**

I, the undersigned, declare upon penalty of perjury that the above information listed within this City of Costa Mesa Special Event Permit Questionnaire AND Application is true and correct to the best of my knowledge. I further understand that knowingly providing any false information is cause for the immediate denial of a Special Event Permit, the suspension of a Special Event Permit if one has already been issued, and / or the denial of future Special Event permits being issued. I understand that in the event of a major incident, my event may be postponed or terminated for the sake of public safety and welfare (e.g., major crime incident, fire, flood, or any act of God). I have attached the following documents to this application that are, to the best of my knowledge, true and correct.

- Completed Application
- Certificate of Insurance & Additional Insured Endorsement
- Commercial Liability Certificate
- Signed Indemnification Agreement
- Encroachment Permit
- Map and Traffic Control Plan
- Signed Waiver & Release of Liability
- Completed Checklist
- Copies of notifications to OCFD, OC Transit District, Local Businesses, Churches, and Residents
- Site plan showing locations of any structures (i.e., bleacher, tents, etc.), electrical, plumbing, and sanitation.
- Structural plans of any structures (i.e., bleachers, stages, platforms, etc.) to be reviewed by City.

\_\_\_\_\_  
(NAME OF APPLICANT)

\_\_\_\_\_  
(SIGNATURE OF APPLICANT)

\_\_\_\_\_  
(DATE SIGNED)

\_\_\_\_\_  
(NAME OF EVENT ORGANIZER)

\_\_\_\_\_  
(SIGNATURE OF EVENT ORGANIZER)

\_\_\_\_\_  
(DATE SIGNED)

## SPECIAL EVENT ITEM CHECKLIST

Please check each item that will be present at your event, and provide a brief description of each item checked "YES".

ITEM	YES / NC	PLEASE DESCRIBE ALL ITEMS CHECKED YES:
ANIMALS	<input type="checkbox"/> Y <input type="checkbox"/> N	
ALCOHOLIC BEVERAGES	<input type="checkbox"/> Y <input type="checkbox"/> N	
AUTOMOBILES / TRUCKS	<input type="checkbox"/> Y <input type="checkbox"/> N	
BICYCLES / FOOT RACES	<input type="checkbox"/> Y <input type="checkbox"/> N	
BUILDINGS / STRUCTURES	<input type="checkbox"/> Y <input type="checkbox"/> N	
BOOTHS / STANDS	<input type="checkbox"/> Y <input type="checkbox"/> N	
CAMPGROUNDS / RV AREAS	<input type="checkbox"/> Y <input type="checkbox"/> N	
CONCESSIONS	<input type="checkbox"/> Y <input type="checkbox"/> N	
DANCE / PARTY / CONCERT	<input type="checkbox"/> Y <input type="checkbox"/> N	
ELECTRICAL / PLUMBING / MECHANICAL	<input type="checkbox"/> Y <input type="checkbox"/> N	
EMERGENCY ACCESS REQUIRED	<input type="checkbox"/> Y <input type="checkbox"/> N	
FLAMMABLE MATERIALS	<input type="checkbox"/> Y <input type="checkbox"/> N	
FOOD SUPPLIES / SALES	<input type="checkbox"/> Y <input type="checkbox"/> N	
ON-SITE GRADING / CONSTRUCTION	<input type="checkbox"/> Y <input type="checkbox"/> N	
LIGHTING / ILLUMINATION	<input type="checkbox"/> Y <input type="checkbox"/> N	
MEDICAL / FIRST AID STATIONS	<input type="checkbox"/> Y <input type="checkbox"/> N	
PARKING	<input type="checkbox"/> Y <input type="checkbox"/> N	
POLICE / SECURITY PROTECTION	<input type="checkbox"/> Y <input type="checkbox"/> N	
POLICE / TRAFFIC CONTROL	<input type="checkbox"/> Y <input type="checkbox"/> N	
PYROTECHNICS (FIREWORKS)	<input type="checkbox"/> Y <input type="checkbox"/> N	
RIDES - CARNIVAL / MECHANICAL	<input type="checkbox"/> Y <input type="checkbox"/> N	
SANITATION	<input type="checkbox"/> Y <input type="checkbox"/> N	
SIGNS / BANNERS	<input type="checkbox"/> Y <input type="checkbox"/> N	
STREET / LANE CLOSURES	<input type="checkbox"/> Y <input type="checkbox"/> N	
TENTS / CANOPIES	<input type="checkbox"/> Y <input type="checkbox"/> N	
CITY PROPERTY OR FACILITY USED	<input type="checkbox"/> Y <input type="checkbox"/> N	
WATER SUPPLY USED OR AFFECTED	<input type="checkbox"/> Y <input type="checkbox"/> N	

# SAMPLES OF CERTIFICATES OF INSURANCE

Please note that failure to provide a certificate of insurance and policy endorsement amounts to a violation of City ordinance, and may be grounds for the denial of your Special Event Application.

CERTIFICATE OF INSURANCE		005550		DATE (MM/DD/YY) 07/03/2002
<b>PRODUCER:</b>  <b>UNIFORM INSURANCE COMPANY</b> <b>P.O. Box 12345</b> <b>Any city, Any state 12345-6789</b>	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND, OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.			
<b>INSURED:</b>	COMPANIES PROVIDING COVERAGE			
	COMPANY A			
	COMPANY B			
	COMPANY C			
	COMPANY D			
<b>COVERAGES:</b> THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL TERMS, EXCLUSIONS, AND CONDITIONS OF BOTH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.				
TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> OWNER & CCNT PROT <input type="checkbox"/> LIABILITY ARISING OUT OF ATHLETIC PARTICIPATION	ABC 1234 567	07/03/2002	07/03/2003	GENERAL LIABILITY - EACH OCCURRENCE \$ 1,000,000 PRODUCTS COMP OF AGG \$ 1,000,000 PERSONAL & ADV INJURY \$ 1,000,000 FIRE DAMAGE \$ 50,000 MEDICAL \$ 5,000
AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> RENTED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per inc) \$ PROPERTY DAMAGE \$
DAMAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY \$ EACH ACCIDENT \$ AGGREGATE \$
EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM	ABC 1234 567	07/03/2002	07/03/2003	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY				<input type="checkbox"/> STATUTORY LIMITS EACH ACCIDENT \$ DISEASE - POLICY LIMIT \$ DISEASE - EACH EMPLOYEE \$
OTHER				
<b>POSITION OF OPERATIONS/LOCATIONS/SPECIAL ITEMS</b> <b>EVENT: COSTA MESA MARATHON</b> <b>DATE: 07/03/2002</b> <b>SANC: #1234</b> <b>Certificate holder is an additional insured for this sanctioned event</b>				
<b>CERTIFICATE HOLDER</b>  <b>CITY OF COSTA MESA AND ITS OFFICERS, EMPLOYEES, AGENTS, VOLUNTEERS, AND REPRESENTATIVES</b> <b>ONE CIVIC CENTER PLAZA</b> <b>P.O. BOX 19575</b> <b>COSTA MESA, CALIFORNIA 92623-9575</b>	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES AS CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT  <b>AUTHORIZED REPRESENTATIVE</b>  <b>UNIFORM INSURANCE COMPANY</b>			

**INSURANCE SERVICES OFFICE, INC.**

**P.O. BOX 12345**

**Any City, Any State 12345-6789**

**(555) 555-5555**

**POLICY NUMBER: 12345-67890**  
**GENERAL LIABILITY**

THIS ENDORSEMENT CHANGES THE POLICY, PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION**

This endorsement modifies insurance provided under the following:

**COMMERCIAL GENERAL LIABILITY COVERAGE PART**  
**SCHEDULE E**

Name of Person or Organization:

(If no entry appears above, information required to complete this endorsement will be shown in the Declaration as applicable to this endorsement.)

WHO IS INSURED (Section ) is amended to include as an insured the person or organization shown in the schedule as an insured but only with respect to liability arising out of your operations or premises owned by or rented to you.

CG 20 26 11 85

Page 1 of 1

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# INDEMNITY AGREEMENT

\_\_\_\_\_ (applicant/organization name) agrees to indemnify, defend (at City's option) and hold harmless the City of Costa Mesa, its officials, employees, representatives, and volunteers from any and all claims, demands, defense costs, liabilities or consequential damages of any kind or nature which rise out of the use of \_\_\_\_\_ (location) in connection with the \_\_\_\_\_ (event) which will take place in Costa Mesa, California on \_\_\_\_\_ (date(s) of event). This agreement includes any liabilities that may arise out of the use of booths, concessions or any other activities conducted, set up and/or used by all applicant during the event, including non-members or guests of \_\_\_\_\_ (applicant/organization name).

Date: \_\_\_\_\_

Authorized representative for:

\_\_\_\_\_  
(organization name)

\_\_\_\_\_  
Print Name and Title

**WAIVER AND RELEASE OF LIABILITY**

I am the applicant and responsible person for the \_\_\_\_\_  
(event name, hereafter "event") to be held \_\_\_\_\_ (dates) at \_\_\_\_\_  
\_\_\_\_\_ (location) in Costa Mesa, California.

I hereby ASSUME ANY AND ALL RISKS associated with the event including but not limited to injuries sustained by participant arising out of strenuous physical activity or exertion; striking or being struck by objects, vehicles or persons; uneven or defective roadway surfaces; exposure to heat, cold or humidity.

I APPRECIATE AND VOLUNTARILY ELECT TO ACCEPT ALL RISKS connected with the event and any property directly adjacent or appurtenant to the event location.

I HEREBY FOR MYSELF, MY HEIRS, OR ANYONE WHO MIGHT CLAIM ON MY BEHALF AGREE NOT TO BRING ANY CLAIM AGAINST THE CITY OF COSTA MESA AND WAIVE, RELEASE AND DISCHARGE THE CITY OF COSTA MESA, ITS OFFICERS, AGENTS AND EMPLOYEES FROM ANY AND ALL LIABILITY FOR PERSONAL INJURY, DEATH OR PROPERTY DAMAGE INCLUDING LIABILITY ARISING OUT OF THE NEGLIGENCE OF THE CITY OF COSTA MESA OR ITS OFFICERS, AGENTS OR EMPLOYEES. THIS RELEASE AND WAIVER EXTENDS TO ALL CLAIMS OF EVERY KIND OR NATURE WHATSOEVER, FORESEEN OR UNFORSEEN, KNOWN OR UNKNOWN.

**I HAVE READ THE FOREGOING AND CERTIFY MY ACCEPTANCE OF THE ABOVE PROVISIONS BY MY SIGNATURE ON THIS DATE, \_\_\_\_\_ (date).**

Authorized representative for:

\_\_\_\_\_  
(organization name)

\_\_\_\_\_  
Print Name and Title