

City of Concord Events Fact Sheet/FAQ
(Copy of Proposed Text)

What is a “Special Event?” Do I need a permit?

A "Special Event" requiring a Special Event Application is any public event held on City property, and/or requiring City services. Generally, this *excludes* facility rentals, such as Centre Concord, Sleep Train Pavilion, Diablo Creek Golf Course, Camp Concord and community swimming pools.

Can I rent a City Park?

No. The City of Concord does not rent-out entire City parks, however areas of the parks may be used for Special Events. Several City parks have picnic areas which may be reserved for a fee and be suitable for smaller group-events which do not require the application process.

How do I apply?

Submit a completed application form **at least 6 weeks before the event start date**. This initial application will be reviewed as an information-only application; no fees are due at this time and should not be submitted yet.

I am charging a fee for my event. Do I need a City of Concord business license?

Depending on the nature of the event, a commercial business applying for a Special Event Permit may be required to obtain other licenses or permits to operate (see Links)

Do I have to pay for my Special Event? What costs are involved?

- Event staff will review your application and determine whether your event can go forward. If so, and if you wish to proceed, at this point it is recommended that the applicant meet with City event staff. The **\$250.00 non-refundable** application fee is due (please note that this amount is a fee and is not applied against the final balance due); the initial application now becomes your final application; **from this point forward the \$250 fee can not be refunded**, whether your event takes place or not.
- By City Council resolution, “...the Event Sponsor shall pay 100% of the cost of providing City services” for special events and may include such services as police, street control, maintenance and cleaning, etc. An estimate of costs will be prepared by events staff and 25% of the estimated amount is due upon its receipt. This amount is applied against the final balance due.
Unlike an estimate for repairs, for example, the total due is still only an estimate. Your final balance due is calculated after your event is over and is based on existing conditions and circumstances at the time of your event. Whereas every effort is made to prepare the most accurate estimate possible, your final balance may be somewhat higher or lower.
It is also important to bear in mind that costs can vary greatly depending on the nature of each event and the City services requested by event applicant and/or required by event staff; event staff make the final determination about services required.
- A security deposit (**\$500-\$1500**) may be required, with the amount due to be determined by the estimated size of your event as stated in the application (please note that misrepresenting any aspect of an event may result in denial of approval; events involving unapproved alcohol or amplified sound or failure to provide

City of Concord Application for Special Event

Name of Organization (if self, enter Same as applicant)	Address	City	Zip
Name of Applicant	Phone	email contact	
	Alt. phone		
Day-of event on-site and legally responsible person in charge (if same as above, enter "same")	Phone	email contact	
	Alt. phone		
Event Name	Annual event?	No. of yrs	Anticipated daily attendance
In case of emergency, day-of event alternate contact	Phone	email	
	Alt. phone		
Requested location	Alternate location		Dates and times requested

Is this event an amusement, carnival or circus-type event or activity? Yes No If yes, you may be required to submit form FIN-12 (Amusement Activity Clearance,) and BL-54 (Special Permit for Temporary Operations). You may be eligible for a waiver of business license fee, for which you can apply using form FIN-86 (Request for Waiver of Business License Fee for Carnival or Circus Activity). See Links section of the Events Web page or obtain these forms at the Finance Department at the Civic Center, 1950 Parkside Dr.

FOOD AND VENDOR BOOTHS

Will your event include food booths, concessions, and / or preparation areas?

No Yes If yes, how many: _____

If yes, it is the responsibility of the event organizer to contact the following to obtain the permits required by law:

- Health Department at (925) 692-2500 a minimum of 30 days prior to the event
- Contra Costa County Fire Protection District at (510) 941-3300 a minimum of 30 days prior to the event to request an inspection.

No. of exhibit booths: _____

No. of craft booths: _____

All non-members of the Todos Santos Business Association: if this event is being requested for Todos Santos Plaza, please attach a list of all vendor(s), including Business Names, Address, City, State, Zip code

ALCOHOL CONSUMPTION

This event is: Alcohol-free: Yes No

Alcohol to be provided at no cost: Yes No

Alcohol to be sold: No Yes Hours: from _____ to _____
If alcoholic beverages will be consumed or sold, a permit from the State of California's Alcoholic Beverage Control (ABC) authorizing the sale of alcoholic beverages must be provided 5 working days prior to the event. Failure to obtain the permit or failure to abide by any law shall be grounds for denying or revoking this application/permit and the cancellation of the event.

USE OF AMPLIFIED SOUND

Will any type of sound amplification be used during this event?

Yes No

If yes, please describe: _____

Please describe your event, including any entertainment, special equipment, machinery, or decorations you will be setting up

Will there be media coverage at the event? Yes No If yes, please describe where, when, and the name of the media organizations: _____

PUBLIC SANITATION

Depending on the location of your event, you may be required to supply at your expense a minimum of one portable toilet per 250 persons in attendance. If only one unit is supplied, it must be ADA compliant; 10% of the total number of units supplied must be ADA compliant. Are you planning to provide rest rooms at the event? Yes No

If yes, please identify the following: Total number of portable toilets _____ Total number of ADA accessible rest rooms (10% minimum): _____

Portable Toilet Company Name: _____ Telephone Number: _____ Fax: _____

Address: _____ City _____ Zip _____

City of Concord Application for Special Event (page 2) Name of event: _____

City services being requested by the applicant or required by the City

Police			
Traffic Control	Lane closures	Road Closures	Parking enforcement
Security/Public Safety Dates and times requested/required:			
Parks			
Water hookup	Picnic tables	Adj moving sched	Adj watering
Streets			
Barricades & delineators	No-parking notification requested; street names, days, and hours requested:		
General Services			
Access to electrical hook-up	Carpenter	On-site electrician	Special equipment

Please note: the following are not permitted in City of Concord Parks, unless otherwise allowed by law:

- Smoking
- Dogs
- A-frame-type signage (except for traffic safety and control barricades) or any other type of signage in the public right-of-way
- Amplified sound (unless approved by an authorized City of Concord representative)

I, acting on behalf of the organization I represent, state that I am a legally responsible adult authorized to commit that organization to agree to abide by the rules, regulations and guidelines specified herein, and that I will accept all responsibilities for any damage to City Property and/or facilities, any payments for municipal services and/or resources as they have been outlined and as they may be utilized by me and the organization whom I am representing and the patrons who will be served by this Special Event. I also understand that the falsification or misrepresentation of any information on this application my result in the immediate termination or cancellation of this event at the sole discretion of an authorized representative of the City of Concord.

I understand that I am responsible for meeting all the requirements of my special event as set forth by the City of Concord including, but not limited to the following: adequate public sanitation facilities (“porta-potties”), Contra Costa County Health and Fire Protection District permits and inspections, appropriate A.B.C. permits, and impact to surrounding neighborhoods, especially noise. I understand it is my responsibility to provide proof of adequate liability insurance which names the City of Concord on a spearate endorsement as “additional insured” or which provides a blanket additional-insured document as part of the policy, the validity of which is to be determined by the Office of the City Attorney of Concord, CA.

Name of Applicant (Please Print): _____

Signature: _____ Date: _____

required equipment may result in the event being cancelled or shut-down at the sole discretion of law enforcement and/or City staff).

- proof of insurance (a certificate of liability in the amount of \$1 million per occurrence, \$2 million aggregate) is required along with the 25% of estimated charges and the security deposit. A separate endorsement document naming Concord as additional insured must be provided along with the insurance form and must be approved by the City Attorney's Office; ample time must be allowed for the City Attorney to review these documents. Your event can not be approved or take place unless the City Attorney's office has reviewed and approved your insurance documents.
- **Final invoice:** after your event is over, a final billing will be prepared based on the actual costs involved, less the amount pre-paid. Following payment of the final balance due, any security deposit will be refunded unless damages, additional maintenance, or services are assessed.

Is alcohol consumption or sales allowed at my event?

Alcohol consumption is subject to the regulations of the State's Department of Alcoholic Beverage Control and approval by the Concord Police Department. It is the responsibility of the applicant to contact the ABC; Concord PD will review your request along with the rest of your completed application.

Can I have live entertainment at my event?

In consideration of local neighborhoods and communities, the use of *any* type of amplified sound is not allowed unless it is pre-approved by authorized City staff; unauthorized use may result in your event being cancelled.

How do I pay the fees?

Payment in the form of a check should be made payable to the *City of Concord* and can be mailed to

City of Concord
Downtown Program/City Events
1950 Parkside Dr. MS 1-B
Concord CA 94519

or dropped-off at the front desk of the main (City Manager's) wing of the Civic Center at the above address.

Can I pay fees and deposits online?

Unfortunately, not at this time.

(Proposed draft for informational purposes only)

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
05/26/2011

PRODUCER

Acme Insurance
303 NE 6thN.E. Anystreet
Yourtown, CA 94000

FOR SERVICE CALL:

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.

COMPANIES AFFORDING COVERAGE

COMPANY
A Insurance Brokers Insurance Inc.

COMPANY
B

COMPANY
C

COMPANY
D

INSURED

COVERAGES

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 THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	CLA 2002630	05/28/2011 12:01am	05/31/2011 12:01am	EACH OCCURRENCE	\$ 1,000,000.00
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000.00
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADV INJURY	\$ 1,000,000.00
	<input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT				GENERAL AGGREGATE	\$ 2,000,000.00
	<input type="checkbox"/> INCLUDES ATHLETIC PARTICIPANTS				PRODUCTS-COMP/OP AGG	\$ 1,000,000.00
					MED EXP (Any one person)	\$ N/A
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT	\$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE	\$
	<input type="checkbox"/> HIRED AUTOS					
	<input type="checkbox"/> NON-OWNED AUTOS					
	GARAGE LIABILITY				AUTO ONLY-EA ACCIDENT	\$
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY:	
					EACH ACCIDENT	\$
					AGGREGATE	\$
	EXCESS LIABILITY				EACH OCCURRENCE	\$
	<input type="checkbox"/> UMBRELLA FORM				AGGREGATE	\$
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM					\$
	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	
	<input type="checkbox"/> INCL				OTHER	
	<input type="checkbox"/> EXCL				EL EACH ACCIDENT	\$
	THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE:				EL DISEASE - POLICY LIMIT	\$
					EL DISEASE - EA EMPLOYEE	\$
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

THE CERTIFICATE HOLDER IS ADDED AS AN ADDITIONAL INSURED AS RESPECTS LIABILITY ARISING OUT OF OPERATIONS OF THE NAMED INSURED DURING THE POLICY PERIOD.

CERTIFICATE HOLDER

City of Concord
1950 Parkside Drive
Concord, CA. 94519

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED DESIGNATED PERSON OR ORGANIZATION FOR SPECIFIC ACTIVITY

This endorsement modifies insurance provided under the General Liability Coverage Part.

The following is added to the General Liability Additional Provisions Form.

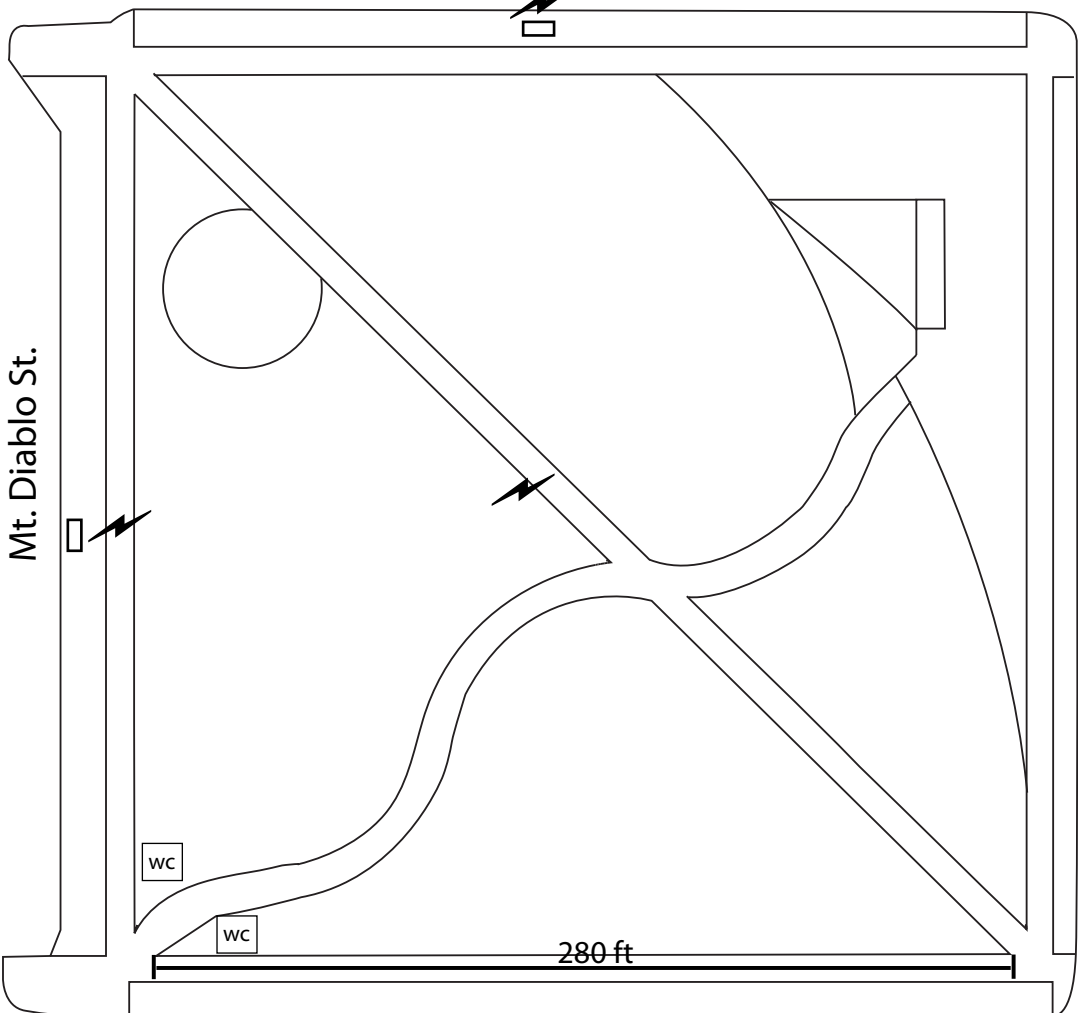
Additional Insured Person(s) or Organization(s): Name: City of Concord Address: Attn: Florence Weiss 1950 Parkside Drive MS 1B Concord City CA State 94519 Zip Activity: Special events permit located on premises, 1234 Main St. Anytown, CA 94444 Date(s): August 14 & 15, 2011
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A. ADDITIONAL INSURED DESIGNATED PERSON OR ORGANIZATION FOR SPECIFIC ACTIVITY

1. Paragraph C., Who is An Insured, is amended to include the person(s) or organization(s) shown above, but only with respect to "bodily injury," "property damage," "personal injury," and "advertising injury" liability, and only with respect to operations of the Named Insured that are directly related to the activity shown above during the dates shown above.



Salvio St.



Mt. Diablo St.

Grant St.

280 ft

Willow Pass Rd.