

LFUCG SPECIAL EVENTS PERMIT APPLICATION

DATE OF APPLICATION: _____

*Please review the Special Event Planning Guide prior to submitting this application. **Application must be received 12 weeks prior to event date.***

EVENT NAME: _____ **EVENT DATE:** _____

DESCRIPTION OF EVENT (Be specific.): _____

EVENT ORGANIZER: (Name of individual, group or organization producing event.) _____

_____ FED ID No. _____

ORGANIZATION TYPE: Registered for-profit Registered non-profit other _____

If Organizer is a non-profit organization, attach a copy of the current IRS Determination letter.

PRIMARY CONTACT: (Person responsible for the application, event or in case of an emergency).

Name: _____ Title: _____

Address: _____ City: _____ Zip: _____

Day Phone: _____ Night Phone: _____

Alternate Phone: _____ Email: _____

EVENT DATES AND TIMES. (Event organizers are responsible for adhering to the approved schedule and ensuring that vendors, rentals and other participants adhere to it as well.)

Load-in Date: _____ Time: _____ AM PM

Event – Day #1 Date: _____ Start time: _____ AM PM End time: _____ AM PM

Event – Day #2 Date: _____ Start time: _____ AM PM End time: _____ AM PM

Load-Out/Clean-up Date: _____ Time: _____ AM PM

Rain Date (if any): _____

EVENT DETAILS

EVENT TYPE: (check all that apply) Festival / Fair Parade Run/Walk/Ride

Other (Describe) _____

EVENT VENUE: (List LFUCG park or other location(s) for events: _____

If this event is for a Run, Walk or Ride, attach an event map that shows the proposed route.

Will a fee be charged for spectators? yes no Will a fee be charged for participants? yes no

If fees are involved, identify the amount and describe the purpose: _____

TOTAL ATTENDANCE EXPECTED: _____ Peak Attendance at any one time: _____

If proposed event location is Robert F. Stephens Courthouse Plaza, check one:

Lower Half of plaza Upper Half of plaza Both

Check if applicable: Water wall - on off Fountain - on off

NUMBER OF NON-FOOD VENDORS: _____ NUMBER OF ENTRIES (if a parade, walk, etc.) _____

NUMBER OF ANIMAL ENTRIES: _____ TYPES OF ANIMALS: _____

WILL STREETS NEED TO BE CLOSED? YES NO If yes, describe streets below:

WILL PORTABLE TOILETS BE UTILIZED AT THE SITE FOR THE EVENT? (This is NOT a service provided by LFUCG.)

YES NO If yes, designate what locations: _____

Number of portable toilets to be rented: _____

Name of Supplying Company: _____ Phone: _____

Arranged time for toilets to be removed from site: _____

ALCOHOL, FOOD, AND BEVERAGE

Will there be food and beverage sales? yes no

Will there be alcohol sales? yes no

Number of Food Vendors _____

Number of Drink Vendors _____

Food Vendors MUST hold appropriate permits and licenses from the Lexington Fire Department and from the Lexington-Fayette Co. Health Department. For requirements, refer to pages 7 – 10 in the Special Events Planning Guide. Special Event organizers are responsible for ensuring that all food vendors are properly permitted.

Will you be using an ABC Licensed Caterer? yes no

If yes, provide name and contact information

Alcohol Caterer Name: _____

Phone: _____ Email: _____

Alcohol Caterer Name: _____

Phone: _____ Email: _____

Alcohol Caterer Name: _____

Phone: _____ Email: _____

Will you be applying for a temporary liquor license? yes no

NOTE: Be sure to review the Alcohol Beverage License details in the LFUCG's Special Event Planning Guide, page 6. All alcohol sales must be approved by the Alcohol Beverage Control Office and proper permits must be secured. Events serving or selling alcohol must have liquor liability insurance in the amount of \$1,000,000.

LFUCG EVENT SERVICES

Generally all events require some level of LFUCG support or services in order to be successful. Services may be requested and larger events will be required to contract with the LFUCG for specific services. Review the Special Event Planning Guide for the specific requirements for events.

Please review the various services listed below and the corresponding LFUCG department that will provide the services. Each LFUCG department will provide you with a cost estimate of the requested or required services. Upon receipt of the estimate, you may choose to modify your request to meet your budget needs.

If alcohol will be served AND estimated attendance is over 100, a security deposit of \$1,000 is required. The amount will be refunded to the applicant if the property is returned to LFUCG in the same condition it was provided to the applicant. The LFUCG reserves the right to charge additional fees if damage/cleanup to the property exceeds security deposit amount (\$1,000). The fees for services will be billed following the event.

Please check all services that will be requested / required for the event. Refer to the Special Event Planning Guide for cost estimates of services.

- Security / Crowd Control Traffic Control / Street Closures Fire / Emergency Medical
- Recycling Containers Herbies Folding Waste Receptacles
- Clean-up (trash pick-up, empty trash barrels, etc.) Electrical Service
- Other (explain): _____

APPLICATION AGREEMENT

1) **INSURANCE:** *The applicant shall furnish a certificate of commercial general liability insurance written through a company with an A.M. Best rating of "A" or better with the minimum amount of \$1,000,000 per occurrence, listing the LFUCG as an "additional insured." **If your event will be serving/selling alcohol you will also need a liquor liability policy in the amount of \$1,000,000 from each vendor serving/selling the alcohol.** NOTE: Acceptable Insurance Certificates must be submitted at least sixty days before the date of the event, or the event application is subject to be denied.*

2) **INDEMNIFICATION:** *The applicant agrees to indemnify, defend and hold harmless the Lexington-Fayette Urban County Government, employees and agents, from all claims, liabilities, losses, damages, expenses, accidents and occurrences (including attorney fees) arising out of, or in connection with, the performance of this agreement, activities associated with the event or arising out of applicant's use of the facility, excepting however, all such claims, liabilities, losses, damages, expenses, accidents and occurrences caused by LFUCG's sole negligence or willful misconduct.*

3) *If you will be serving alcohol you must get a permit from the ABC Office. ****SALE OF ALCOHOLIC BEVERAGES IS PROHIBITED ON THE GROUNDS THE ROBERT F. STEPHENS COURTHOUSE PLAZA**** Alcoholic sales may be made from vendors on the adjacent streets.*

4) *The approval process takes approximately 12 weeks. The applicant may be asked to respond to additional questions or to provide additional information during that time.*

5) *The applicant agrees to provide a \$50 non-refundable application fee at the time of application, to pay for all agreed upon services provided by LFUCG departments and divisions, and to provide any required deposits (such as for events that serve alcohol).*

Signature and title of applicant: _____ **Date:** _____

Return to:

**Mayor's Office
ATTN: Special Events
200 E. Main St.
Lexington, KY 40507**

Or email it to:

HLyons@LEXINGTONKY.GOV

Please check boxes to ensure you have completed and enclosed all required materials:

- Completed application**
- Application Fee (\$50)**
- Certificates of Insurance**
- Division of Emergency Management Special Event form**
- IRS Determination Letter (if applicant is a non-profit organization)**
- Maps of parade, run or walk route, or event layout**
- Deposit of \$1000.00 (for events with alcohol)**

LFUCG Special Events Permit Application
(Supplement)
Division of Emergency Management

Event Name:

Dates and
Location:

Event Contacts

List the senior organization representative who will be *on site* during the event:

Name:

Title:

Cell:

E-mail:

Does the person named above have the authority to stop/postpone the event if an emergency occurs? If not, provide the contact information for the organization representative who *is* authorized to make such decisions:

Name:

Title:

Cell:

E-mail:

Severe Weather Planning

Describe how event staff will monitor potential severe weather threats:

Describe the event managers' contingency plans for the following weather events (including thresholds, cancel/delay criteria, etc.):

Lightning:

High Winds:

Heavy Rainfall:

Describe how cancellation/delay decisions will be communicated to attendees:

Describe where attendees would take shelter in the event of a dangerous weather event:

Additional Comments:

Please return this form to:

LFUCG Division of Emergency Management

Attn: Ashley Walo

E-mail: awalo@lexingtonky.gov

OR

Attn: Tim Brandewie

E-mail: rbrandew@lexingtonky.gov