

**Community Development Department**

1321 S Market Blvd. Chehalis, WA 98532

(360) 345-2229 / Fax: (360) 345-1039

[www.ci.chehalis.wa.us](http://www.ci.chehalis.wa.us) email: [comdev@ci.chehalis.wa.us](mailto:comdev@ci.chehalis.wa.us)**SPECIAL EVENT APPLICATION****submit at least 28 days in advance of proposed event****Will your event take place on City owned property or in the street?**☐ **No** ☐ **Yes** if yes, insurance is required to be submitted along with the application. (See page 3)

\*\*\*\*\*Please note: Incomplete applications are not accepted \*\*\*\*\*

Please check the event type:

- ☐ **Athletic Event**  
☐ **Noise Permit**  
☐ **Car Show**  
☐ **Other** \_\_\_\_\_

- ☐ **Street Event**  
☐ **Park Event**  
☐ **Parade**

Name of Applicant/Organization: \_\_\_\_\_

Location of event: \_\_\_\_\_

Person in Charge: \_\_\_\_\_ Address: \_\_\_\_\_

Phone Number: Daytime: \_\_\_\_\_ Work: \_\_\_\_\_ Email: (required) \_\_\_\_\_

Additional Authorized Individuals: \_\_\_\_\_

Phone Number: Daytime: \_\_\_\_\_ Work: \_\_\_\_\_ Email: (required) \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Phone Number: Daytime: \_\_\_\_\_ Work: \_\_\_\_\_ Email: (required) \_\_\_\_\_

Type of Activity Planned (describe event): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Will participants pay a fee or donate? (Please circle) YES NO

Are you a non-profit organization? (Please circle) YES NO If yes, please provide your EIN (tax) number.

Will City of Chehalis services be requested for:

- ☐ **Street Closure**  
☐ **Security**  
☐ **Garbage Collection**  
☐ **EMS**

- ☐ **Sidewalk Closure**  
☐ **Equipment**  
☐ **Parking Restrictions**  
☐ **Other** \_\_\_\_\_

Date(s) of Proposed Event: \_\_\_\_\_

Hours of Operation: \_\_\_\_\_

Set-up Date/Time: \_\_\_\_\_

Dismantling Date/Time: \_\_\_\_\_

Number of Staff/Volunteers: \_\_\_\_\_

Estimated Number of Participants: \_\_\_\_\_

LOCATION/STREET(S) INVOLVED (describe area involved in event, attach map/route plan):

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**Special Considerations - (Additional permits and/or licenses may be required) - Will there be:**

Amplified sound? (Please circle) YES NO

Alcohol? (Please circle) YES NO

Animals? (Please circle) YES NO number animals \_\_\_\_\_  
Types of animals listed here.

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Booths/Commercial Vendors: (Please circle) YES NO If yes, be sure to show them on your site plan.  
Each vendor is required to have a current City of Chehalis business license.

Cooking/Food Service: (Please circle) YES NO

Fire/Fireworks/Pyrotechnics: (Please circle) YES NO

Inflatables or Amusement Rides: (Please circle) YES NO

Mechanical Rides: (Please circle) YES NO

Portable Restrooms: (Please circle) YES NO If yes, be sure to show them on your site plan.  
A portion of the restroom facilities must meet ADA requirements.

Dumpsters: (Please circle) YES NO If yes, be sure to show them on your site plan.

Signs: (Please circle) YES NO If yes, be sure to show them on our site plan.

Stage: (Please circle) YES NO If yes, be sure to show it on your site plan.

Other special considerations: \_\_\_\_\_

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List any special signs/barricades/cones requested to be supplied by the City of Chehalis. There is no guarantee that the city will be able to provide.

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**Public Relations:** Please state what efforts, if any, have occurred, or you intend to make, to notify residents or businesses that will likely be affected by your event. If permit is granted it will be the responsibility of event organizers to alert those likely to be impacted. (i.e., street closures, no parking zones, noise, etc.)

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**INSURANCE** – The City of Chehalis does not maintain insurance that will respond to claims against the applicant in connection with the permitted event by the applicant, its members, or those attending the event. Depending on the type of event you are planning, and the activity and risk level of your group, you may be required to obtain liability insurance in accordance with the City of Chehalis policy, name the City of Chehalis as an **additional insured** on the policy, and be responsible for providing proof of such insurance. If your event will take place on City of Chehalis property or on City streets, you are required to provide proof of insurance. Insurance coverage shall be at a minimum of \$1,000,000 per occurrence and \$2,000,000 general aggregate.

**HOLD HARMLESS** –Applicant/Permittee/User shall defend, indemnify and hold harmless the City of Chehalis, its officers, officials, employees and volunteers from and against any and all claims, suits, actions, or liabilities for injury or death of any person, or for loss or damage to property, which arises out of the acts or omissions of the Applicant/Permittee/User, its employees, volunteers, representatives or vendors, or from any activity, work or thing done, permitted, or suffered by Applicant/Permittee/User, related to the permitted activity, except only such injury or damage as shall have been occasioned by the sole negligence of the City of Chehalis.

**Have you included: a site plan or route plan?**

**A traffic control plan?**

**Brochures, posters, flyers, or other advertising for this event?**

**A copy of your insurance naming the City as co-covered, if applicable?**

By signing below, the applicant certifies that they are at least 21 years old and an authorized representative of the event. Signer also verifies that they have read and understand all information contained within the application and understands that the event may not take place until authorized by the City.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Organization/Title: \_\_\_\_\_ If nonprofit, EIN number: \_\_\_\_\_

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