



For Office Use Only
Permit No. _____

City of Des Moines

SPECIAL EVENT APPLICATION

Return to: City of Des Moines Events Office
ATTN: Shannon Kirchberg
Parks, Recreation & Senior Services
1000 S 220th Street
Des Moines WA 98198
skirchberg@desmoineswa.gov

Phone: (206) 870-9370
Fax: (206) 870-6587

This application must be completed, signed and forwarded to the City of Des Moines at least ninety (90) days prior to the first day of the event (unless authorized by the City Manager). Applications submitted less than 90 days prior to the event may be denied or subject to additional review fees. Any misrepresentation in this application or deviation from the final agreed upon route and/or method of operation described herein, may result in the immediate revocation of the permit. Submittal of this application in no way constitutes City of Des Moines approval of the event. Permits are issued at the discretion of the City of Des Moines upon thorough application review. The City of Des Moines reserves the right to reject any Special Event Permit application request for any reason. Please type or print information clearly and attach additional sheets as necessary.

1. EVENT INFORMATION																																	
to promote your event go to www.destinationdesmoineswa.org for more information																																	
Event Name:																																	
Event Type:	<table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Festival/Fair</td> <td><input type="checkbox"/> Concert/Amplified</td> <td><input type="checkbox"/> Private Event</td> <td><input type="checkbox"/> Music/Theatrical</td> </tr> <tr> <td><input type="checkbox"/> Block Party</td> <td><input type="checkbox"/> Boating/Rowing</td> <td><input type="checkbox"/> Car/Boat Show</td> <td><input type="checkbox"/> Exhibits/Displays</td> </tr> <tr> <td><input type="checkbox"/> Sporting Event</td> <td><input type="checkbox"/> Swim/Wind Surf</td> <td><input type="checkbox"/> Commercial Event</td> <td><input type="checkbox"/> Food Beverage Vendors</td> </tr> <tr> <td><input type="checkbox"/> Bicycling</td> <td><input type="checkbox"/> Rally/Protest</td> <td><input type="checkbox"/> Wedding/Reception</td> <td><input type="checkbox"/> Merchandise/Services</td> </tr> <tr> <td><input type="checkbox"/> Outdoor Market</td> <td><input type="checkbox"/> Run/Walk</td> <td><input type="checkbox"/> Triathlon</td> <td><input type="checkbox"/> Vendors</td> </tr> <tr> <td><input type="checkbox"/> Photo Shoot/Film</td> <td><input type="checkbox"/> Religious</td> <td><input type="checkbox"/> Fireworks</td> <td><input type="checkbox"/> Other (describe) _____</td> </tr> <tr> <td><input type="checkbox"/> Public Address/PA Systems</td> <td><input type="checkbox"/> MaST Facility Use</td> <td><input type="checkbox"/> Parade</td> <td></td> </tr> </table>					<input type="checkbox"/> Festival/Fair	<input type="checkbox"/> Concert/Amplified	<input type="checkbox"/> Private Event	<input type="checkbox"/> Music/Theatrical	<input type="checkbox"/> Block Party	<input type="checkbox"/> Boating/Rowing	<input type="checkbox"/> Car/Boat Show	<input type="checkbox"/> Exhibits/Displays	<input type="checkbox"/> Sporting Event	<input type="checkbox"/> Swim/Wind Surf	<input type="checkbox"/> Commercial Event	<input type="checkbox"/> Food Beverage Vendors	<input type="checkbox"/> Bicycling	<input type="checkbox"/> Rally/Protest	<input type="checkbox"/> Wedding/Reception	<input type="checkbox"/> Merchandise/Services	<input type="checkbox"/> Outdoor Market	<input type="checkbox"/> Run/Walk	<input type="checkbox"/> Triathlon	<input type="checkbox"/> Vendors	<input type="checkbox"/> Photo Shoot/Film	<input type="checkbox"/> Religious	<input type="checkbox"/> Fireworks	<input type="checkbox"/> Other (describe) _____	<input type="checkbox"/> Public Address/PA Systems	<input type="checkbox"/> MaST Facility Use	<input type="checkbox"/> Parade	
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Event Date(s): <small>Indicate Dates/Times OPEN to Attendees</small>	Start Day (of week): Date:	End Day (of week): Date:	Hours: Open until closing Each Day	Start Time (example 12:00pm):	End Time (example 12:00pm):																												
Setup/Take Down Dates:	Start Day: Date:	End Day: Date:	Setup/Take Down Hours Daily:	Start Time (example 12:00pm):	End Time (example 12:00pm):																												
Event Location:	Describe in detail and attach black and white maps and layouts:																																
Event Size:	# of Participants:	# of Spectators:	# of Staff/Volunteers:	TOTAL Attendance Expected: (Add all 3 columns)																													
Has this event been produced before? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is this an Annual Event? <input type="checkbox"/> Yes <input type="checkbox"/> No		Previous Names(s) of Event:		How Many Years?																												
Are there any changes from previous years? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe Changes:																																
Is this event public? <input type="checkbox"/> Yes <input type="checkbox"/> No Is this event private? <input type="checkbox"/> Yes <input type="checkbox"/> No	If open to the public, please check all advertisement methods: <input type="checkbox"/> TV <input type="checkbox"/> Radio <input type="checkbox"/> Internet <input type="checkbox"/> Posters <input type="checkbox"/> A-Board* <input type="checkbox"/> Banners* <input type="checkbox"/> Inflatable Display																																
Briefly describe your event here. Attach additional documents if necessary. *The use of Temporary Special Event Signage (A-Boards, Banners) requires a Sign Special Use Permit. Contact Planning, Building and Public Works at 206-870-7576 to obtain permit.																																	

2. APPLICANT INFORMATION					
Sponsoring/Producing Organization Name:					
Mailing Address:		Street Address:			
		City, State, Zip:			
Applicant Contact:		Name:		Secondary Contact:	
		Title:		Title:	
Phone:			Fax:	Phone:	
Email:			Email:		
Organization/Event Website: http://www.					

3. PARK, RECREATION & MARINA FACILITIES					
<p>Events held at Des Moines Parks and Recreation facilities require a Park Use Permit, with separate fees. Please familiarize yourself with the Park and Recreation Use Permit Application to understand the conditions, limitations and fees for events on Parks Property. For more information regarding facility rentals please contact the Parks and Recreation Office at 206-870-6527 or recreation@desmoineswa.gov.</p> <p>Events held at Des Moines Marina facilities require a Marina Use Permit, with separate fees. Conditions, fees and limitations for events are in the Marina Tariffs. For more information regarding Marina rentals please contact the Harbormaster's Office at 206-870-6724 or marina@desmoineswa.gov.</p>					
Is your event partially or fully held at a City of Des Moines Park or Marina? <input type="checkbox"/> Yes <input type="checkbox"/> No		Park Facility(ies) requested: Marina Facility(ies) requested:		Have you completed a Park Use or Marina Use Application <input type="checkbox"/> Yes <input type="checkbox"/> No	
Recreation Facility Requested: <input type="checkbox"/> Activity Center <input type="checkbox"/> Field House <input type="checkbox"/> Founder's Lodge				Have you completed a Facility Use Application <input type="checkbox"/> Yes <input type="checkbox"/> No	
Picnic Shelter Requested: Midway <input type="checkbox"/> Field House Park <input type="checkbox"/> Wooton Park					

Disclaimer: The City of Des Moines does not endorse any products, programs or services that are presented. Each individual is responsible for making informed decisions regarding these services, programs or products. Submittal of this application in no way constitutes City of Des Moines approval of the event. Permits are issued at the discretion of the City of Des Moines upon thorough application review. The City of Des Moines reserves the right to reject any Special Event Permit application request for any reason.

4. FEES & PROCEEDS		Admission Fee? <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount? \$	Will you have vendors selling goods or services on park property? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Items to be sold:	<input type="checkbox"/> Food	<input type="checkbox"/> Beverages	<input type="checkbox"/> Merchandise	<input type="checkbox"/> Services	<input type="checkbox"/> Other
15% of gross commercial sales (food beverages, admissions, souvenirs, goods, and services) on Parks property must be remitted to Des Moines Parks and Recreation Department within 10 days following the event.					

5. VENDORS		Does your event have vendors selling food, beverages, merchandise or services? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please contact Planning, Building and Public Works at 206-870-7576 or visit www.desmoineswa.gov for Business License information and requirements.		

6. ALCOHOL		The sale, service and consumption of alcoholic beverages are subject to Washington State Liquor Control Board (WSLCB) regulations, licensing and permit requirements. Special Occasion licenses are issued only to non-profit societies or organizations holding a special event at which spirits, beer or wine is sold by the drink. The City's liquor liability limits apply to events in which alcohol is sold. Non profit organizations must apply for a Special Occasion License 45 days prior to the event. Your event may require a different type of permit. Please visit the WSLCB website, www.liq.wa.gov for additional information.			
Will alcohol be sold or consumed? <input type="checkbox"/> Yes <input type="checkbox"/> No		Is a non-profit organization providing the alcohol service? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, indicate name of non-profit organization: If No, indicate alcohol service provider: _____			
Beer/Wine Garden Days & Dates:			Hours:		
Describe intended or requested sale and/or consumption of alcoholic beverages at your event:					

Please include information regarding collection of recyclables including cans, bottles, cardboard, paper, food and other compostable items if applicable.

12. STREET USE & METRO Events that require the use or closure of public streets are required to submit a detailed description of the intended usage and/or closure and detailed maps to support the request. A right of way permit may be requested/required.

Barricades, traffic cones, "No Parking" signs, etc., may be required by Des Moines Planning, Building and Public Works Department as part of the Traffic Control Plan and are at the expense of the permit holder and are not included in the Special Event Permit Fee.

Does your event require any street closures? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you plan to use street parking spaces? <input type="checkbox"/> Yes <input type="checkbox"/> No	If your event requires either of these, or affects any streets, please attach a detailed map and description of the areas affected.
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What times are you requesting to close the streets? Start Time: End Time:	Do you anticipate affecting or re-routing any Metro bus routes? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list routes and note route locations on your street use map.
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Please describe your street use:

13. FIRE City special events may require fire permits. The cost of these permits may not be included in the Special Event Permit Fee. Fire permits may be required for carnivals and fairs, tents/canopies, places of assembly, open flame cooking (with propane, charcoal or wood), fireworks and other uses. Contact South King County Fire and Rescue at prevention.web@southkingfire.org Size of Tents:

14. MEDICAL Does your event require onsite medical assistance or first response providers standing by:
 Yes No

15. POLICE & TRAFFIC Special events may require the use of police officers for crowd and traffic control or other purposes. These needs will be determined at your event review.

16. CITY OR PUBLIC SERVICES REQUESTED

Police Department: Crowd Control, Security or Traffic Control:

City Staff Presence:

Barricades, Street Closures or Detours

Special Park Maintenance or Set Up

Street Sweeping/Clean Up

Assistance with Banner or Sign Placement

Marina Approval Special Conditions Department Contact: Conditions or Comments: Estimated Cost \$	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	
Parks & Recreation Approval Special Conditions Special Event Sign Permit? Facility Use Application? Department Contact: Conditions or Comments: Estimated Cost \$	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	
Street Superintendent Approval Special Conditions Department Contact: Conditions or Comments: Estimated Cost \$	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	
Surface Water Management Approval Special Conditions Department Contact: Conditions or Comments: Estimated Cost \$	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	
SK Fire & Rescue Approval Special Conditions Department Contact: Conditions or Comments: South King Fire Permit Required? Estimated Cost \$	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	
City Manager/Administration Approval Special Conditions Contract Required? City Council Resolution Required? Business License Required? Department Contact: Conditions or Comments: Estimated Cost \$	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	Resolution No: _____ License No: _____
Total City Cost: \$ _____ Special Event Permit Fee: \$ _____ TOTAL CHARGE: \$ _____		