



# Street Event Permit Application Form

Low and High Impact Events

## Event Information

EVENT NAME	
EVENT LOCATION	
EVENT DATE(S)	EXPECTED ATTENDANCE
TIME EVENT STARTS	TIME EVENT ENDS

## Applicant Information

LAST NAME	FIRST NAME	CELL PHONE NUMBER *	
SPONSORING ORGANIZATION		BUSINESS LICENSE NUMBER	
MAILING ADDRESS	CITY	STATE	ZIP
EMAIL			

*\*This phone number is very important and must be answered during the day(s) of the event, in case of emergencies (ex: from Fire, Police, etc.)*

## Summary of Attachments

In addition to the completed application form, please include the following documents (check N/A if not applicable):

- |  |                              |  |                              |
|--|------------------------------|--|------------------------------|
| <input type="checkbox"/> Site Plan           | <input type="checkbox"/> N/A | <input type="checkbox"/> Recycling & Waste Management Plan | <input type="checkbox"/> N/A |
| <input type="checkbox"/> Traffic Detour Plan | <input type="checkbox"/> N/A | <input type="checkbox"/> Waste Water & Liquids Plan        | <input type="checkbox"/> N/A |
| <input type="checkbox"/> Parking Plan        | <input type="checkbox"/> N/A | <input type="checkbox"/> Insurance Certificate             | <input type="checkbox"/> N/A |
| <input type="checkbox"/> Security Plan       | <input type="checkbox"/> N/A | <input type="checkbox"/> Event Description (see below)     | <input type="checkbox"/> N/A |
| <input type="checkbox"/> Vendor Information  | <input type="checkbox"/> N/A |  |                              |

## Event Description

Please provide a written description of the proposed event including a schedule of activities, and a list of speakers, entertainers, and vendors. For each merchandise vendor, please include the following information:

- Name of Vendor
- Address & Telephone number
- Type of merchandise to be sold

In addition, provide a list with the name, address and telephone number of all persons who are or will be responsible for the conduct of the street event, including a photo identification of each and effective means by which to reach them during the event, such as cell phone and numbers and likely location during the street event.

**Date/Time**

<b>SETUP</b>	DATE _____	DAY OF WEEK _____	TIME _____
<b>EVENT STARTS</b>	DATE _____	DAY OF WEEK _____	TIME _____
<b>EVENT ENDS</b>	DATE _____	DAY OF WEEK _____	TIME _____
<b>DISMANTLE</b>	DATE _____	DAY OF WEEK _____	TIME _____

**Parades**

- a) **Does this event involve a moving route of any kind along streets or sidewalks?**  YES  NO

If yes, please provide a diagram on letter size paper with directional arrows showing the exact route of the parade, staging area, judging area, ending area, and location of bleachers, grandstands or related structures.

- b) **Will animals be a part of this event?**  YES  NO

If yes, what type(s) of animals will be used in this event? What is the purpose of the animals (*petting zoo, part of parade, etc.*)?

**Tents, Structures, or Entertainment Devices**

- c) **Are you installing or constructing any structures, including buildings, climbing structures, etc.?**  YES  NO

If yes, a plan is required for review. Please show site structures in your plan. Also, please submit a description of the type, size and number of structures. Please be aware that tents, structures or entertainment devices are to be installed so that they do not obstruct or restrict the required 20-foot wide emergency access lane.

- d) **Are you installing any tents or canopies?**  YES  NO

If yes, please show all tents and/or canopies including dimensions on your site plan. Food booths must meet the requirements established by the Environmental Health Division.

- e) **Are you installing any stages?**  YES  NO

If yes, please show locations and dimensions on your site plan.

- f) **Are you installing any grandstands, bleachers, or folding or telescoping seating?**  YES  NO

If yes, please show locations and dimensions on your site plan.

- g) **If you answered yes to any of the questions from #1-4 above, please provide the following information for the person or company responsible for installing the tent, structure, or entertainment device:**

Name: \_\_\_\_\_ Company \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

- h) Will a city park facility also be used for this event?**  YES  NO  
If yes, you will need to obtain a [Park Event Permit](#).
- i) Will this event take place on public property that is not owned by the City of Berkeley (East Bay Regional Park District, University of California, etc.)?**  YES  NO  
If yes, you will need to contact the appropriate agency to determine if a permit is required.
- j) Will any part of this event take place on a sidewalk, median, or other Public Right-of-Way?**  YES  NO  
If yes, please describe what will take place on this area and show on site plan:
- k) Will any part of this event take place on a City parking lot, or City-owned land/property?**  YES  NO  
If yes, you will separate permission for its use. Please describe what will take place on this area and show on site plan:
- l) Is electrical power required (for sound amplification, lighting, etc)?**  YES  NO  
If yes, show items on the site plan and describe how power is to be provided.
- m) Will amplified sound be used?**  YES  NO  
If yes, you must obtain an [Amplified Sound Permit](#). For information, contact the Division of Environmental Health at [envhealth@cityofberkeley.info](mailto:envhealth@cityofberkeley.info) or call (510) 981-5310 about applicable requirements.
- n) Will food be served or sold?**  YES  NO  
If yes, contact the Division of Environmental Health at [envhealth@cityofberkeley.info](mailto:envhealth@cityofberkeley.info) or call (510) 981-5310 about applicable requirements.
- o) Will beer, wine or champagne be served or sold?**  YES  NO  
If yes, you must obtain a Bureau of Alcoholic Beverage Control permit appropriate to their event after receiving an approval letter from the Chief of Police. For information, contact the Berkeley Police Department at (510) 981-5900.
- p) Will merchandise be sold or advertised for sale?**  YES  NO  
If yes, attach a complete list of vendors with a description of the merchandise.
- q) Will pyrotechnics or other hazardous activities be involved?**  YES  NO  
If yes, you must obtain a Pyrotechnics Permit. For information, contact the Berkeley Fire Department at [fire@cityofberkeley.info](mailto:fire@cityofberkeley.info) or call (510) 981-3473.

## Hold Harmless Agreement

NAME OF EVENT	DATE(S) OF EVENT
NAME OF APPLICANT / EVENT SPONSOR	PHONE
MAILING ADDRESS	CITY STATE ZIP
NAME OF APPLICANT/EVENT SPONSOR	PHONE
MAILING ADDRESS	CITY STATE ZIP

Event organizers agree to reimburse the City of Berkeley for all loss incurred by it in repairing or replacing damage to City property proximately caused by the permittee, its officers, employees, agents, monitors, or any persons attending or forming the street event or parade who were, or should have been, under the permittee's control. Persons who merely attend or join in a street event or parade are not considered reason alone to be "under the control" of the permittee.

Event organizers further agree to defend without costs, indemnify, and hold harmless the City of Berkeley, its officers, employees, agents and volunteers from any liability to any persons, damages, losses, or injuries arising out of or alleged to arise out of the permitted event, which are proximately caused by the actions of the permittee, its officers, employees, agents, volunteers including monitors, or any other persons attending or joining in the event who were, or reasonably should have been under the control of the permittee. Persons who merely attend or join in a street event or parade are not considered reason alone to be "under the control" of the permittee.

I understand and agree to comply with all the terms of the above Hold Harmless Agreement if my application has been approved and all special conditions and required advance payments have been met.

SIGNATURE OF EVENT ORGANIZER(S)	DATE
SIGNATURE OF OFFICER OF SPONSORING ORGANIZATION	DATE
TITLE	

I declare under penalty of perjury that the information provided in this application is true and correct.

SIGNATURE OF EVENT SPONSOR	DATE
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### Affidavit of Applicant

I certify that the information contained in the foregoing application is true and correct to the best of my knowledge and belief that I have read, understand and agree to abide by the rules and regulations governing the proposed Street Event under the Berkeley Municipal Code Chapter 13.44 and I understand that this application is made subject to the rules and regulations established by the City Council and/or City Manager or the City Manager’s designee. I agree to comply with all other requirements of the City, County, State, Federal Government, and any other applicable entity, which may pertain to the use of the Event Venue and the conduct of the Event. I agree to abide by these rules and further certify that I on behalf of the Host Organization am also authorized to commit that organization, and therefore agree to be financially responsible for any costs and fees that may be incurred by or on behalf of/to the Event to the City of Berkeley.

I further certify that I will comply with all State and Federal disability access requirements applicable to the event. Compliance with the City’s permit requirements does not exempt the applicant from any additional requirements that may be imposed by State or Federal Laws.

PRINT NAME OF EVENT ORGANIZER	
SIGNATURE OF APPLICANT	DATE
PRINT NAME OF EVENT ORGANIZER	
SIGNATURE OF APPLICANT	DATE

## A Quick Check List

This list has been developed to aid you in preparing your application, the necessary drawings and other required material. It is by no mean complete. You are still responsible for complying with all provisions whether they are covered herein or not. All drawings and other required materials should be submitted on letter size paper.

### YOUR APPLICATION WILL NOT BE CONSIDERED UNLESS IT IS COMPLETE

**On the cover page**, provide the name, address and telephone number of the applicant, including photo identification. If the park event will be conducted for, on behalf of or by an organization, the name, address and telephone number of the headquarters of the organization, and of the authorized head of such organization shall also be supplied. Where a park event will be conducted for, on behalf of or by an organization, the organization will be considered a co-applicant.

### On drawing(s), are the following shown?

- a) **Sidewalk and street (curb to curb) widths**
- b) **Streets to be closed**
- c) **Emergency Access Plan**  
Continuous passage at least 18 feet wide
- d) **Number & location of food/beverage booths showing general accessibility**
- e) **Blue zone locations**  
1 blue zone for every 1 displaced OR 1 zone for every block closed WHICHEVER is greater. Locate at the end of the block to allow a person using a van with a back lift to exit the van and access the sidewalk by using the curb ramp at the corner.
- f) **Blue zone signs and placement**
- g) **Total number of portable toilets and handwashing sinks provided**  
Are they shown on the map? The number required is 1/8 of 1% of the number of attendees. There is a minimum of 2 required.
- h) **Number of toilets accessible to persons with disabilities**  
At least 10%, with a minimum of one at the event site, of the total number of temporary or portable toilets should be accessible to persons with disabilities. Each of the accessible toilets must have a sign on them that reads: *"Priority is to be given to individuals with disabilities in the use of this accessible facility."*
- i) **Is there a stage?**  
In conformance with federal and state accessibility regulations, all stages shall be made accessible to persons with disabilities.
- j) **Wires interfering with the path of travel?**
- k) **AC Transit routes, transit shelters, and bus stops are shown**

**l) Signage**

The signage should include the following information: path of travel, restrooms, phones (if any), all accessible features, drinking fountains, and the name and location of a contact person who is responsible for dealing with any problems which may arise during the course of the street closure. This signage should be placed at all entrances to the event. As part of the application packet, the event sponsor must provide a mockup of the signage, information in its final size, where the signage will be placed, and a description of how the signage will be mounted.

**m) Plans for security**

The number of security personnel required will be determined by the event coordinator and the Berkeley Police Department using risk assessment that considers the type of event, location, duration, time, potential for danger, history, type of entertainment, whether or not alcohol is being served, any specific information or intelligence received regarding the event, as well as many other factors. Crowd control monitors must wear armbands and/or such other identification to prominently identify them as monitors, and have a method, such as a cell phone, to communicate with the Berkeley Police Department.

**n) Plans for recycling and refuse are included**

Included should be the types and locations of recycling and refuse containers and the name of any organization(s) with whom the applicant has contracted for these services.

## Department Contact Information

There may be costs associated with your proposed event. Below are telephone numbers that may be of help to you in getting information and determining costs.

<b>Department</b>	<b>Phone</b>
<b>Finance</b> Business License	<b>(510) 981-7200</b>
<b>Fire</b> Emergency vehicle access lane; tents, structures or entertainment devices; use of pyrotechnics or other hazardous activities; and first aid plan	<b>(510) 981-3473</b>
<b>HHS-Environmental Health Division</b> Use of amplified sound, temporary food & beverage facilities, and portable toilets & handwashing sinks	<b>(510) 981-5310</b>
<b>HHS – Office of the Director</b> Permit application process, and insurance coverage	<b>(510) 981-5110</b>
<b>Parks, Recreation &amp; Waterfront (510) 981-5150</b> Time and manner for use of a park facility	<b>(510) 981-5150</b>
<b>Police</b> Security plan, alcoholic beverage requests, and beer gardens	<b>(510) 981-5900</b>
<b>PW-Disability Compliance</b> Event accessibility	<b>(510) 981-6342</b>
<b>PW -Transportation</b> Street closures, traffic detour plan, traffic control devices, parking requests and blue zones	<b>(510) 981-7010</b>
<b>PW-Solid Waste Management</b> Trash & recycling services	<b>(510) 981-7270</b>