**SPECIAL EVENT PERMIT CHECKLIST**

Only **complete** applications will be accepted and reviewed. Please use the following Checklist to complete your application.

<table>
<thead>
<tr>
<th>✓</th>
<th>Checklist Items</th>
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<tbody>
<tr>
<td></td>
<td>Application Form</td>
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<tr>
<td></td>
<td>Completed Checklist (this form)</td>
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<tr>
<td></td>
<td><strong>Community Development Fees</strong> <em>(Fees for other permits or licenses may apply)</em></td>
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<tr>
<td></td>
<td>Application Fee (payable to City of Englewood)</td>
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<td></td>
<td>Late Application (payable to City of Englewood)</td>
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<td>This application was filled out to the best of my ability and is complete.</td>
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<td>Attached is a site map(s) showing pedestrian flow, emergency access, trash and recycling receptacles, temporary structures, sign and banner placement, parking areas and activity areas. Entire trail race maps required if applicable.</td>
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<td>Attached is a letter of permission from the property owner of the special event site, if applicable.</td>
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<td>Attached is proof of the applicant’s tax exempt status, if applicable.</td>
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<td>Attached is a Certificate of Insurance</td>
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<td>Attached is the appropriate permit fee.</td>
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<td>If emailing the permit, the appropriate permit fee is being mailed to: City of Englewood, 1000 Englewood Parkway, Englewood, CO 80110 and will arrive within 3-5 business days.</td>
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<tr>
<td></td>
<td>Attached is additional vendor contact information, if applicable.</td>
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<tr>
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<td>Attached is additional information that was not included in the space provided on the application, if applicable.</td>
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<td>A first-time special event shall provide evidence indicating the extent of neighborhood and business support for holding of the special event.</td>
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<td>The application should be submitted 90 days or more (but no more than 365 days) prior to the proposed event to the Community Development Department. Applications submitted less than 90 days prior to the event shall pay the late application fee.</td>
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<td>Additional information, conditions and/or fees may be required based on review of the application.</td>
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<td>If additional applications for other permits, licenses, and fees are required, appropriate departments have been contacted and processes started.</td>
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Signature: ____________________________  Date: ________________
PURPOSE: To identify all aspects of a special event held within the City of Englewood limits. For this purpose, a special event is an event with 50 or more participants held on private property, or any event held on City of Englewood property regardless of the number of participants. Special events held on City of Englewood dedicated Park property are permitted through the Parks and Recreation Department and do not utilize this form. Depending on the size of the event, some items may not apply. Attach additional pages, if necessary to complete the information. Incomplete applications cannot be accepted.

NAME & DATE OF EVENT: ____________________________________________

PROPERTY ADDRESS: ____________________________________________

LEGAL DESCRIPTION: (Provide at least one of the following)
Lot(s) _____________ Block _________ Subdivision _______________________
Parcel Identification No. _______ - ______ - ______ - ______ - ______

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<thead>
<tr>
<th>APPLICANT</th>
<th>PROPERTY OWNER</th>
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<tbody>
<tr>
<td>Name: ___________________</td>
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<td>Company: ___________________</td>
<td>Company: ___________________</td>
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<td>Address: ___________________</td>
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<td>Telephone Number: ___________________</td>
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<td>Fax Number: ___________________</td>
<td>Fax Number: ___________________</td>
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<td>Email Address: ___________________</td>
<td>Email Address: ___________________</td>
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Signature ____________________________
Print Name ____________________________

Signature ____________________________
Print Name ____________________________

Staff Use Only
Date Received: ____________
Received By: ____________
Fee Received: ____________
____________________
Zone District: ___________________
Planner Assigned: ___________________
Case/Project No.: ___________________
I. EVENT DESCRIPTION: Provide a description of the purpose scope and activities planned during the event. Attach a separate sheet if necessary.

II. LOCAL CONTACT: Provide a local contact that can be reached from 7am – 10pm during the event.

Name: ____________________________
Phone: ____________________________ Cell: ____________________________

III. EVENT DATE AND TIMES

Set Up Start: ___________________ Set Up End: ___________________
Date  Time                     Date  Time

Event Start: ___________________ Event End: ___________________
Date  Time                     Date  Time

Tear Down: ___________________ Tear Down: ___________________
Date  Time                     Date  Time

IV. LOCATION

- Attach a site map of the proposed location showing:
  - Pedestrian flow
  - Emergency access, fire hydrants
  - Trash and recycling receptacles
  - Temporary structures
  - Signs and banner placements
  - Parking and activity areas
  - Any proposed traffic control plan showing ingress and egress of vehicles.
  - If liquor involved, type of security control for premises.
- Entire trail race maps are required, if applicable.
- Letter of permission is required from property owner for all locations of special event site, including but not limited to, private property.

V. STAFF AND ATTENDANCE

Staff: _____  Vendors: _____  Entertainers: ________  Participants: ________
Spectators: ________  TOTAL ATTENDANCE: ________

(Trained crowd managers shall be provided for facilities or events where more than 1,00 persons congregate. The crowd manager ratio shall be 1:250 persons.)
VI. ESTIMATED REVENUE AND FEES
Estimated Revenue: __________________________
Briefly Describe Charges to Participants, Vendors, etc.: __________________________

VII. PROPOSED USE OF CITY PROPERTY/SERVICES: Please check all the City services needed for the Special Event. Please Note: All events that take place on City of Englewood property require insurance naming the City of Englewood as additional insured for a minimum of One Million Dollars ($1,000,000.00). Fees may also apply to events that take place on City property and/or require City services.

☐ City Street(s)  ☐ City Trail(s)  ☐ City Building(s)  ☐ City Right(s)-of-Way
☐ City Property  ☐ City Park(s)  ☐ City Parking Lot(s)  ☐ Not Applicable

Describe any proposed closure of City street(s), parking (lots) or other City property, including a proposed traffic control plan.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Describe the need for any City services, or equipment being requested in conjunction with the event, including the presence of police, fire and emergency medical services personnel. Include anticipated fees for City services, or equipment.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
### VIII. TENTS AND FIRE CODE

<table>
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<tr>
<th>No. of Tents</th>
<th>Dimensions x</th>
<th>Total Square Feet</th>
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**TOTAL SQUARE FEET**

- ☐ No tents/canopies at event

Per Chapter 1, Section 105 of the International Fire Code, an additional permit and inspection is required for special events that include, but are not limited to, the following events. Please check all that apply.

<table>
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<tr>
<th>YES</th>
<th>NO</th>
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<tbody>
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By checking “yes” to any of the above will require a Fire Department Operational Permit and Inspection. Please note this permit has a minimum fee of $150 to cover plan review and an inspection of the site, prior to the start of the event. Permittee must contact the Englewood Fire Department to obtain a permit.

### IX. ELECTRICAL

Provide a plan that includes the utilization of electrical equipment, services, and your intended sources of power including generators. (Extension cords shall only be used with portable appliances and must be plugged directly into an approved receptacle. Extension cords shall not be less ampacity than the rated capacity of the portable appliance supplied by the cord.

List any equipment and electrical source. List types of extension cords to be used and GFI protection locations.
X. LIQUOR, FOOD, AND/OR GOODS AND SERVICES

☐ The Event does not have any food or liquor services and/or goods or services that will be provided and/or sold. If checked, please skip to Question XII.

☐ Is the Event being conducted by a non-profit organization? (If not, a Special Event Liquor Permit cannot be obtained.)

Briefly describe any liquor services at the event.

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

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Have you applied for a Special Event Liquor Permit? ☐ Yes ☐ No ☐ Not Applicable

If yes, the City requires Liquor Liability Insurance (City listed as additional insured).

Please Note: Special Event Liquor License Applications must be submitted to the City of Englewood City Clerk’s office at least 90 days prior to event using the State and City forms for approval. This application is separate from the Community Development process. Both local and State approval is required. Contact the City of Englewood City Office with questions: 303-762-2405.

Briefly describe any food services provided and/or sold at the event; including a list of all food items that will be served, related vendors, fees, etc.
Have you contacted Tri-County Health at 720-200-1563 regarding food and beverage service?  ☐ Yes  ☐ No  ☐ Not Applicable

Briefly describe any goods or services which will be provided and/or sold at the event, including a list of related vendors.

Anyone participating in a City of Englewood Special Event must have a Special Event License (separate from this application). Please download the application from the following link: http://www.englewoodgov.org/home/showdocument?id=1682

Please check one of the following options regarding Special Event Licensing and the collection and remittance of sales tax.

☐ Event Coordinator will obtain a Special Event License – Fee $115.00 ($15.00 Application Fee; $40.00 License Fee and $60.00 Sales Tax Deposit refunded upon receipt of completed Sales and Use Tax Return along with payment of Tax Collected). Vendors covered under this option, will pay the Event Coordinator a $5.00 license fee, payable to the City of Englewood. The Event Coordinator will provide the City a list of all vendors and their Sales and Use Tax License, if applicable, along with payments received no later than 14 days prior to the event. The Event Coordinator will provide a ‘Sales Tax Form’ to each vendor who does not currently have an active City of Englewood Sales and Use Tax License. The Event Coordinator will collect and remit sales tax for all vendors at the conclusion of the event. Those vendors who have an active City of Englewood Sales and Use Tax License will remit the tax collected from this event with their next return due date.

☐ Individual vendors will obtain a City of Englewood Special Event License, Fee $55.00 ($15.00 Application Fee; $40.00 License Fee). Vendors will remit sales tax individually. A ‘Special Event License and Sales Tax Form’ will be mailed to each vendor (a $60.00 sales tax deposit must be paid by each vendor, unless the vendor has an active City of Englewood Sales Tax License).

☐ Not applicable
XI. VENDOR INFORMATION

☐ Not applicable

Vendor/Business Name: ________________________________
☐ Food ☐ Goods ☐ Service

Contact Name: ________________________________

Email: ________________________________ Phone: ________________________________

COE Sales Tax License if applicable: ________________________________

Vendor/Business Name: ________________________________
☐ Food ☐ Goods ☐ Service

Contact Name: ________________________________

Email: ________________________________ Phone: ________________________________

COE Sales Tax License if applicable: ________________________________

Vendor/Business Name: ________________________________
☐ Food ☐ Goods ☐ Service

Contact Name: ________________________________

Email: ________________________________ Phone: ________________________________

COE Sales Tax License if applicable: ________________________________

Vendor/Business Name: ________________________________
☐ Food ☐ Goods ☐ Service

Contact Name: ________________________________

Email: ________________________________ Phone: ________________________________

COE Sales Tax License if applicable: ________________________________

☐ Additional vendors attached to application
XII. SANITATION PLAN

Briefly describe trash and recycling plan, include location of trash for event and disposal during and after event.

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Briefly describe greening efforts being made at the event such as transit use, composting, bicycling, etc.

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Briefly describe bathroom/portable toilet plan, include location and number of portable toilets with provider contact information.

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

XIII. PARKING PLAN

Briefly describe the parking plan for the event, include vehicle parking, bicycle parking, transportation to/from parking, overflow, etc.

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________
XIV. SAFETY/COMMUNICATION/MEDICAL

Briefly describe a medical plan, include number and location of first aid stations, any medical staffing information, emergency phone numbers and local hospital/clinics.

Provide a description and location of any recording equipment or sound amplification equipment, including the maximum anticipated decibel limits and duration of the sound amplification.

☐ Will a stage(s) or platform(s) be utilized for this event? If yes, please specify, including any high risk areas and/or protection of spectators, include barriers, security needs, restricted areas, etc.
☐ No security has been hired for the event. If Liquor is present, how will identification be checked?

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

☐ The proposed event will have professional security. Volunteers are not considered professional security.

Professional Security Company: ________________________________
Contact Name: ________________________________
Number of Security Personnel: ________ Hours of Coverage: ________

Describe the professional security plan, include where security will be and what guidelines will be provided, as well as how liquor (if applicable) boundaries will be enforced.

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

☐ Extra duty police officers will be hired for this event.

Number of Police Officers: ________ Hours of Coverage: ________

Have you contacted the City of Englewood Police Department at 303-761-7410, about hiring extra duty police officers?

☐ Yes ☐ No ☐ Not applicable

XV. ADVERTISING/MARKETING/SIGNAGE

Briefly described the target audience for the event.

________________________________________________________________________________________
Please check all advertising mediums that apply and include publication names

☐ Television: ____________________________

☐ Radio: ____________________________

☐ Newspaper: ____________________________

☐ Other Print Ad: ____________________________

☐ Internet: ____________________________

☐ Other: ____________________________

☐ None

Please check all applicable impacts.

Retail Impact:    ☐ Encourages Shopping    ☐ Hinders Shopping    ☐ None

None

Restaurant Impact:    ☐ 100 meals or more    ☐ 99 meals or less    ☐ None

The event will have event signage, banners, or other attention-getting devices.

☐ Yes        ☐ No

<table>
<thead>
<tr>
<th>Type: Sign, Banner, Other Device</th>
<th>Quantity</th>
<th>Size</th>
<th>Placement</th>
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**XVI. NEIGHBORHOOD IMPACTS**

Describe any anticipated neighborhood impacts associated with the event.
XVII. ADDITIONAL INFORMATION
Please describe how this event will promote Englewood and have a positive impact on the community. Provide any other information which may be helpful in reviewing the application.