



County of Monterey - Parks Facility Use Application

Application Date: _____

Thank you for selecting a County of Monterey Park as the site for your special event. The information requested in this application will be used to determine your need for a standard reservation or special event agreement to conduct the proposed event. Please answer all questions. If a question is not applicable, please indicate by answering "No" or N/A". Your application will not be processed until all information is completed and received.

1. EVENT SUMMARY

- a. Park Name: _____
- b. Park Area(s): _____
- c. Set Up Date(s): _____
- d. Setup Time(s): _____
- e. Event Date(s): _____
- f. Event Time(s): _____
- g. Cleanup Date(s): _____
- h. Cleanup Time(s): _____
- i. Event: _____

2. APPLICANT ORGANIZATION

- a. Applicant _____
- b. Applicant Type
___ Private/Commercial ___ Non-Profit (# _____) ___ Government Agency
- c. Address: _____

- d. Event Contact Name: _____
- e. Phone Number: _____
- f. Email Address: _____

3. EVENT DESCRIPTION

a. Event Description (including programs, activities, entertainment, schedule, etc.):

b. Special Requests or Accommodations:

c. Total Attendance (including staff, spectators, participants): _____

Minimum Attendance: _____ Maximum Attendance: _____

Method of limiting attendance to the maximum number of persons permitted by the County of Monterey: _____

d. Is the event open to the public? (free or with purchase of ticket/pass) _____ Yes _____ No

e. Applicant will have not less than _____ employees and _____ volunteers in the Monterey County Park facility during the entire duration of the event.

f. Is the primary purpose of this event to serve as a fundraiser? _____ Yes _____ No

If yes, list the beneficiaries: _____

4. VENDORS AND EQUIPMENT

a. Event will have amplified Music or Sound? _____ Yes _____ No

If yes, describe: _____

List Company/ Service (DJ, Announcers, etc.):

b. Is Electricity required for event? _____ Yes _____ No

If yes, describe: _____

c. Will additional lighting be required? _____ Yes _____ No

If yes, describe: _____

- d. Will Special Activities be used during the event such as inflatables or rock-climbing wall, etc.?
_____ Yes _____ No

If yes, describe (Include any vendors providing equipment):

- e. Food and non-alcoholic beverage will be prepared or served at the event? _____ Yes _____ No

- f. Will food be offered to the public? _____ Yes _____ No

- g. Food and non-alcoholic beverage will be sold at the event? _____ Yes _____ No

If yes, please list all vendors: _____

- h. Equipment will be used at the event (such as tents, stages, canopies)? _____ Yes _____ No

If yes, describe: (indicate size and quantity of equipment) _____

If equipment is being provided by a company, please list company name: _____

- i. Alcohol will be sold and/or served at the event? _____ Yes _____ No

If yes, please list vendors selling and/or serving alcohol: _____

5. EVENT PLANS AND OPERATIONS

- a. Purpose of the proposed event, the necessity therefore, and the reason why it is compatible with the use of the Monterey County Park System.

- b. List of applicants proposed fees/ charges:

Admission/ Entrance Ticket: _____

Vendor Space: _____

Participation: _____

Other: _____

c. Estimate of gross receipts: _____

d. Estimate net profit: _____

e. Submit information on all the organizations involved, whether sponsors, recipients, or promotional firms and their objectives, purposes, and financing:

f. List in detail all vendors and items they are selling during the event (event and vendors must have permits as required by Monterey County Health Department and Fire Department):

g. Parking and Traffic Plans and Personnel, as required for traffic control (provided by applicant and at applicant's expense):

h. Additional Sanitary facilities as required by the Environmental Health Department for Occupancy (outdoor activities). (provided by applicant and at applicant's expense)

Vendor(s) providing Services: _____

Please attach a Map of placement location(s) of additional facilities

Date of placement: _____

Date of removal: _____

Date(s) of service: _____

Portable Toilet Units: _____

ADA Accessible Portable Toilet Units: _____

Handwashing Stations: _____

Drinking Fountains: _____

Other: _____

i. Method of garbage collection and disposal to be used:

j. Proposed first-aid service to be supplied by applicant, including ambulance services, doctors, nurses, first responders, and medically trained personnel:

k. Additional police protection or security, including security for events with alcohol. (provided by applicant and at applicant's expense):

l. Proposed fire control measure and additional firefighting equipment to be furnished by applicant as required by the Director of the Public Works, Facilities and Parks his designee, or the local Fire Marshal:

m. Does the event require vehicle access other than on roads/parking lots? (e.g. moving vehicles through grassy or unpaved areas to set up equipment.) Yes No

If yes, describe: _____

6. ADDITIONAL TERMS

- a. Applicant may be required to post security deposit or a bond with the County, depending on circumstances of the special event and probabilities of damage.
- b. Applicant will be required to provide insurance covering their special event.
- c. The Director of Public Works, Facilities & Parks, or his designee, may terminate any special event activity when deemed necessary for the protections of resources, or for violation of any rules and regulations of the Monterey County Parks System.
- d. Additional details will be addressed if an agreement between parties with additional detailed plans is required. Applicant does not have a binding agreement with County until the application has been duly accepted and any required Special Event Agreement has been signed by both County and Applicant.
- e. Contacts in regard to the permit generally may be made through the Monterey County Parks Department by calling (831)755-4895 or emailing Parks@co.monterey.ca.us

7. INDEMNIFICATION

STATEMENT OF INDEMNIFICATION AND HOLD HARMLESS

Applicant agrees to indemnify, defend and hold harmless the County of Monterey (County), its officers, employees and agents from and against any and all loss, damage, liability, claims, demands, detriments, costs, charges, expense (including attorney’s fees) and causes of action of any character which the County may incur, sustain or be subjected to on account of Applicant’s use of the above listed County premises, including loss or damage to property or the loss of use thereof and for bodily injury to or death of any persons (including but not limited to the property, employees, subcontractors, agents and invitees of the Applicant) to the extent permitted by law.

8. SUBMITTAL INSTRUCTIONS

When you submit this application, it is considered a request for a facility permit only; submission does not mean that the event has been approved. For an event to be approved, all required permits must be obtained, and fees paid.

This application will be distributed to County departments, and possibly other entities such as the local fire district, that may be involved in permitting and/or supporting the event described in this application. The application will be reviewed by these departments to determine required conditions, the scope and estimated cost of County support services, and the permits that will be required. Failure to submit a complete application could result in delay of processing the application.

Please sign and date the application by hand in blue or black ink. Submit the application and all required attachments to:

Via Mail/In Person:
County of Monterey
Public Works, Facilities & Parks
Attention: Parks
1441 Schilling Place- South 2nd Floor
Salinas, CA 93901

Email:
parks@co.monterey.ca.us

Any misrepresentation in this application or deviation from the final permit conditions may result in immediate revocation of the event permit and the canceling of the event.

I agree to the terms and conditions as set forth in this Facility Use Application and the Parks Facility Use Rules and Policies incorporated by reference herein.

REQUESTED BY:

Signature	Print Name	Date	
Address	City	State	Zip
Phone	Email		

