

CITY OF ALGONAC
805 St. Clair River Drive; P.O. Box 454, Algonac, Michigan 48001
PHONE: (810)794-9361 FAX (810) 794-4804
www.algonac-mi.gov

SPECIAL EVENTS PERMIT

Please complete all the requested information. Failure to complete the information may result in the rejection of the permit request.

Sponsoring Party: _____

Sponsor Address: _____

Sponsor City: _____ Sponsor Phone : _____

Sponsor Email Address (if applicable): _____

*If this information is the same as the Sponsor information – please indicate by putting SAME in first line.

*Event Chairman/Coordinator: _____

Address: _____ City and State: _____

Phone Number: _____ Email Address (if applicable): _____

Please describe the proposed Special Event and the requested location on City Property:

Please note that you are responsible to contact Miss Dig at 800-482-7171 or www.missdig.org if you are placing any type of stakes in the ground on City Property. By initialing this you are indicating that you are aware you need to call Miss Dig at least one (1) week prior to the event.

Applicant's Initials: _____

Please note that if your event requires rest room responsibilities you are required to secure an adequate number of porta-johns at your expense. You will be responsible to get your own bathroom facilities (porta-johns) for your event. You will need to review the placement of the Porta-John(s) with the DPW prior to having it placed on City property. By initialing below, you are indicating that you are aware of this requirement and will contact the DPW prior to placement of the Porta-John. The number for the DPW is 810-794-5451.

Applicant's Initials: _____

I have attached a copy of the Certificates of Insurance naming the City of Algonac as an additional insured for this event (please note this is REQUIRED in Chapter 14, Section 14-4, Paragraphs 7 and 8 – see attached please) which will be valid throughout the entire event.

Applicant's Initials: _____

Please identify the starting and ending dates and times of the proposed Special Event. Include the time required for set-up and clean-up on City Property:

Starting Date: _____ Ending Date: _____

Starting Time: _____ Ending Time: _____

Please identify the nature and amount of any rate or fee to be paid by participants. If you will be seeking donations to cover your costs, please describe method of solicitation:

Please make a statement concerning the benefit that this event will have on the general public within the City of Algonac.

Are you requesting the City to prohibit or restrict parking during the special event? _____

If yes, please explain:

Are you requesting permission for the consumption of alcoholic beverages on City property in conjunction with this event? _____

Please be advised that both the City Council and the Michigan Liquor Control commission must approve and sanction the consumption of alcoholic beverages on City property in conjunction with this event.

Please attach to this application your proposed plans to provide the necessary parking, security, crowd control, traffic control, refuse disposal, utility service, sanitation facilities, private property protection and restoration, noise control, staging areas, and personnel and equipment which may be reasonably necessary. Please make drawings conform to an identified scale.

PLEASE READ CAREFULLY:

I have reviewed the fee schedule adopted by the City Council and agree to pay the appropriate fees.

I agree to pay the appropriate surety bond or letter of credit requested by the City before the city grants permission for this Special Event.

I understand that the sponsoring organization will be required to file a copy of an insurance policy naming the City and any property owners abutting the affects street(s), road(s), or public rights-of-way as named or additional insured in the amounts and coverage determined by the City Council, and that such insurance must be filed with the city no later than forty-five (45) days before the starting date of the event. I understand that failure to file and insurance certificate within the deadline shall result in immediate revocation of the Special Event Permit.

I further understand that the City Administration may revoke any Special Event Permit at any time when by reason of emergency, disaster, calamity, disorder, riot, extreme traffic conditions, violation of the Special Event ordinance, permit conditions, or undue burden on public services, the City Administration may determine that the health, safety, tranquility, morals, or welfare of the public or property may require such revocation, and that any continuation of the event is unlawful.

I certify that _____ will indemnify and hold the City of Algonac harmless and defend it against any and all claims, lawsuits, or other liability arising from or an a result of the Special Event.

I further certify that I am authorized on behalf of the _____ to make application to the City of Algonac for this Special Event.

Print Name: _____ Title: _____

Signature: _____ Date: _____

FOR CITY USE ONLY

Date Application Received: _____ By _____

Deadline to respond (30 days from date received): _____

Administrative Approvals

City Manager: _____ Fire Chief: _____

Public Services Superintendent: _____

Is there any conflicting activity at City site that day (i.e.wedding)? _____

Code Official: _____ Permits Required: _____

City Council Date of Approval: _____

Liquor Control Commission Support (if necessary): _____

I hereby authorize the City Clerk to issue the requested permit:

City Manager

Date

I hereby deny authorization to issue the requested permit for the following reason(s):

CLERK'S USE ONLY

Permit Number Issued: _____ Date: _____ Clerk: _____

Permit Revoked Date: _____ By: _____

Whereas, Section 14-03 of the Code of Ordinances requires that Applicants shall reimburse the City for the costs of city employees and for all other expenses incurred by the City in preparing for and administering the special event at rates to be periodically set by the city council; and

Whereas, reimbursement shall include an administrative fee of fifteen percent (15%) of the total cost; now

Therefore, be it resolved that the Algonac City Council sets the reimbursement rates as follows:

- . 100 % of all charges for employees of the police department for overtime, including salary, shift premium, holiday pay, FICA, MERS and Workman's Compensation
- . 100% of all charges for employees of the department of public works for overtime, including salary, shift premium, holiday pay, FICA, MERS and workman's compensation;
- . 100% of all charges for employees of the fire department, including salary, FICA and workman's compensation, excluding regular time for full-time employees;
- . 100% of all City costs for equipment or supplies purchased for the benefit of the special event;
- . a first-year event charge of 35% instead of 100% and a second-year event charge of 65% instead of 100%.

(The administrative fee is included in the above charges.)