

CITY OF OLEAN
SPECIAL EVENT APPLICATION
ALL APPLICATIONS ARE PREFERRED THIRTY (30) DAYS PRIOR TO THE SCHEDULED EVENT
(Incomplete applications will be returned)

Name of Renter/Sponsor (Primary Contact): _____ Phone Number (Day) _____
(Primary Contact must be readily identifiable the entire event – wearing safety vest/bright colored shirt/or other identifiable item.)

Address: _____ Phone Number (Evening/Weekend): _____

Organization – Profit _____ Non-Profit _____ Type/Name of Event: _____

Please describe what your event will entail: _____

Date of Event: _____ Location of Event: _____ City Property? Yes _____ No _____

Will there be alcohol at your event? Yes _____ No _____ If yes, complete the following:

Type of alcoholic beverage to be consumed: Liquor _____ Wine _____ Beer _____ (circle what applies)

Will you be **providing** alcohol to your group – Yes _____ No _____ (Insurance certificate **will be** required if on city property)

Will you be **selling** alcohol at your event – Yes _____ No _____ (Insurance certificate **will be** required with **liquor legal**)

Will people be **allowed to bring** alcohol to the event – Yes _____ No _____ (Insurance certificate **will be** required only if on city property and event is open to general public-advertised event.)

Who will be applying to the NYS Liquor Authority for the permit to sell? _____

Please attach copy of security plan that was submitted to the Liquor Authority.

Open Container Fee: Person renting/using a City park (\$20 fee)

Person having event involving city right-of-way (\$40 fee)

It is the Applicant's responsibility to police the area during the gathering to make sure all Alcohol Beverage Control rules are followed. Also, after the event Applicant responsible to dispose of all empty bottles and debris. The Open Container Law does not apply in Forness Park while Youth Leagues are in progress.

*****If you are contracting with a group to sell alcohol during your event on city property, separate insurance is required from them with Liquor Legal in addition to your insurance.*****

Park Rental Agreement to be Issued? Yes _____ No _____ Contract must be signed by Renter in advance and fee paid for rental.

Use of Disc Golf Area – located at Gargoyle Park Yes _____ No _____
located at Franchot Park Yes _____ No _____

Restrooms:

War Veteran's Park:

April thru Mid-June \$25 fee per hour. If restrooms needed, please indicate hours requested:
_____ a.m. to _____ p.m.

If restrooms not needed, please initial here _____

Mid-June thru October Restrooms open Noon to 5 p.m.
\$25 fee per hour for restrooms if needed outside these times. Please indicate times requested:
_____ a.m. to _____ p.m.

If restrooms not needed other than Noon to 5 p.m., please initial here _____

Franchot Park

Group will get a key for restrooms. When pool is open, lifeguards are responsible for them. When pool is closed, renter takes responsibility for restroom and any damages that occur.

OTHER PERSON TO BE CONTACTED DURING THE EVENT SHOULD THE NEED ARISE (if using City property):

NAME: _____ ADDRESS: _____ PHONE NUMBER: _____

Will he/she be on site?: _____ If so, where: _____

Set Up Date: _____ **Times:** _____ **to** _____ **Tear Down Date** _____ **Times:** _____ **to** _____

Hours of Actual Event: Date _____ From _____ to _____

Date _____ From _____ to _____

Estimated Crowd Size p/day _____ Admission Fee Charged? Yes _____ No _____ Money used for _____

Cattaraugus County Health Department Permit may be required if food is being served at your event. Please contact the Health Department at 716-373-8050 for requirements.

IN THE EVENT OF AN EMERGENCY – SUCH AS TORNADO WARNINGS, HIGH WINDS, ETC., above Contact Person will be notified by Police Dispatch of impending danger. – Please explain your plan of action for the participants of your event in the event you receive notification:

Please be aware that the City of Olean is not responsible for providing an evacuation site for your event.

WILL THE EVENT INCLUDE:

PARADE YES _____ NO _____ (MAP OF DESIRED ROUTE MUST BE ATTACHED)

RUN OR WALK YES _____ NO _____ (MAP OF DESIRED ROUTE MUST BE ATTACHED)

OTHER _____ (MAP OF DESIRED ROUTE MUST BE ATTACHED)

Fireworks or Hazardous Materials? Yes _____ No _____ **Carnival or Amusement Rides?** Yes _____ No _____

Name of Company supplying above: _____

Address _____ Phone No. _____

Will the event include music? Yes _____ No _____ **Live Group?** _____ **Recorded?** _____ **Amplifier used?** Yes _____ No _____

Where will music/band be located? _____ **Stage Needed from City?** Yes _____ No _____

Date Stage to be set-up? _____ **Taken Down?** _____ **Size:** 12x12 _____ 12x 24 _____

Cost of Stage is \$200 for delivery/setup/pickup.

The following items if requested – must be picked up / returned at the Olean City Garage on N. Barry Street -

Will extra trash cans be requested from the City? Yes _____ No _____ **How Many?** _____ **No Charge**

Please state the date and time you will pick up this item – Date _____ Time _____

Please state the date and time you will return the items – Date _____ Time _____

Will cones be requested from the City? Yes _____ No _____ **How many?** _____ **No Charge**

Please state the date and time you will pick up this item – Date _____ Time _____

Please state the date and time you will return the items – Date _____ Time _____

The City also has “Race In Progress” signs that can be used along your route. Do you want to use these?

Yes _____ No _____ **No Charge**

Please state the date and time you will pick up this item – Date _____ Time _____

Please state the date and time you will return the items – Date _____ Time _____

Is there any other city equipment (fork lift, etc.) or city personnel required for your event (there may be additional cost):

FOR EVENTS ON CITY PROPERTY, GARBAGE PICK-UP WILL BE MADE ONLY TO GARBAGE CANS ON SITE.

ADDITIONAL GARBAGE MUST BE BAGGED AND TAGGED OR REMOVED FROM PREMISES.

ADDITIONAL CHARGES WILL BE BILLED TO THE SPONSOR IF GARBAGE/ GROUNDS NOT PICKED UP.

See Park/Facility Rental Contract for more info.

WILL ELECTRIC BE NEEDED FOR EVENT? Yes _____ No _____

If yes, location where electric would be needed: _____

What would electric be used for? _____

WILL GENERATORS BE USED? Yes _____ No _____ If yes, where will they be located? _____

WILL TENTS/CANOPIES OR OTHER MEMBRANE STRUCTURES EITHER PERMANENT OR TEMPORARY BE ERECTED AT EVENT? (NYS Codes requires inspection of all tents, etc. to make sure they are secured and erected properly.)

Yes _____ No _____ **If yes, list size of tents & submit plot plan. If not on city property, building permit must be obtained from Code Enforcement Office. If on city property, approval from both the City of Olean Electrical Division and Code Enforcement Office must be obtained (No cost). BOTH SPONSOR/RENTER AND CONTRACTOR (Person installing tents) MUST call 376-5683 (Codes) and 376-5662 (Electrical) at least 1 week in advance to schedule on-site meetings. Underground utilities must also be contacted by CONTRACTOR – 1-800-962-7962 (5 days in advance). Contractor to provide Sponsor/Renter with ticket number given by underground.**

Size of Tent	Size of Tent	Size of Tent	Size of Tent	Size of Tent
Enclosed Yes ___ No ___ Location _____	Enclosed Yes ___ No ___ Location _____	Enclosed Yes ___ No ___ Location _____	Enclosed Yes ___ No ___ Location _____	Enclosed Yes ___ No ___ Location _____

Date tents to be installed? _____ Date tents to be re-moved? _____

WILL STREET(S) BE CLOSED FOR YOUR EVENT? Yes _____ No _____ Reason _____

If yes, please specify streets to be closed and desired location for barricades to be delivered. *Submit a map/diagram of proposed street closures and desired location of barricades.* Barricade fee is \$30. THE CITY DELIVERS AND PICKS UP BARRICADES – BARRICADES MUST BE RETURNED TO THE PLACE THEY ARE DROPPED OFF AT. NO ANCHORING INTO BLACKTOP. As a courtesy to the neighbors, please notify everyone on the street that you will be closing the street, giving dates and times.

Name of street to be closed: _____ between _____ Street and _____ Street.
Time from _____ a.m./p.m. to _____ a.m./p.m. on _____ (date). Barricade should be left at _____.

Name of street to be closed: _____ between _____ Street and _____ Street.
Time from _____ a.m./p.m. to _____ a.m./p.m. on _____ (date). Barricade should be left at _____.

Right of Way for emergency vehicles must be maintained at all times.

Will special parking accommodations for vehicles be required? Yes _____ No _____ If yes, please specify:

(RV / Tractor Trailer etc.)

TYPE OF VEHICLE
PARKED

LOCATION

TYPE OF PROPERTY

TIMES
FROM / TO

DATES
FROM / TO

Trailer Fee Required – permit can be obtained from Codes Enforcement Office. Cost is \$25 p/trailer.

WILL THERE BE VENDORS? YES _____ NO _____ Number of Vendors Expected: _____ **Sponsor/Host Application required. (Fee applies when on City owned property). (Sponsor/Renter will be required to obtain and fill out appropriate form. If sponsor/renter prefers to have each individual vendor obtain their own permit for sale, you should refer them to the City Clerk's Office so they can obtain a Vendor's Application and submit same with the \$7.50 per day vendor fee to the City Clerk's Office in advance.)**

WILL POLICE OFFICERS BE REQUIRED FOR EVENT SECURITY PURPOSES? YES _____ NO _____ If yes:

How many requested? _____ From _____ am/pm to _____ am/pm Location _____

How many requested? _____ From _____ am/pm to _____ am/pm Location _____

How many requested? _____ From _____ am/pm to _____ am/pm Location _____

Cost for officers if \$65 p/hr. per police officer needed.

Will additional police officers be required for traffic control? Yes _____ No _____ If Yes,
How many requested? _____ From _____ am/pm to _____ am/pm Location _____
How many requested? _____ From _____ am/pm to _____ am/pm Location _____

WILL FIRE/AMBULANCE BE REQUIRED AT YOUR EVENT? YES _____ NO _____ If yes:
From _____ to _____ Location _____ Cost is \$300 (half day) / \$600 (full day)

Will security be required for over-night? Yes _____ No _____ If yes,
How Many? _____ From _____ a.m. to _____ p.m. on _____
How Many? _____ From _____ a.m. to _____ p.m. on _____

If you plan to use other than City of Olean Police – please list firm contracted with: _____
Total Number of Security _____

FINAL DETERMINATION FOR AMOUNT OF REQUIRED POLICE OFFICERS and WHO WILL BE USED WILL BE MADE BY THE CITY POLICE CHIEF.
NOTE: CHARGES INCURRED BY THE CITY OF OLEAN POLICE DEPARTMENT WILL BE BILLED TO THE SPONSOR IN THE
AMOUNT OF \$65 P/HOUR P/PERSON.

PLEASE NOTE:

1. FIRE HYDRANTS, CROSS STREETS/ALLEYS AND STORE FRONTS **SHALL NOT BE BLOCKED** BY ANY VEHICLE OR CONCESSION AT ANY TIME.
2. FUEL CONTAINERS MUST BE OF AN APPROVED TYPE & MUST BE PROPERLY SECURED.
3. DEEP FRYERS MUST BE APPROVED / COMMERCIAL TYPES REQUIRE A **TYPE K PORTABLE FIRE EXTINGUISHER**. ALL FOOD VENDORS MUST HAVE **TYPE ABC FIRE EXTINGUISHER**. ALL FIRE EXTINGUISHERS MUST BE INSPECTED WITHIN LAST YEAR. Valid Health Department Permit must be displayed.
4. AN EMERGENCY VEHICLE SAFETY LANE MUST BE MAINTAINED AT ALL TIMES AT ALL LOCATIONS.
5. NO GREASE OR SUBSTANCE OF ANY KIND CAN BE DISCHARGED UPON THE STREETS, SIDEWALKS, OR INTO THE STORM DRAINS AND SEWERS.
6. CITY SIGN ORDINANCES SHALL BE COMPLIED WITH AT ALL TIMES AND IN ALL REGARDS.

Waiver and Release of Liability

Whereas, _____ is sponsoring the _____ at _____, and hereby certifies that the information contained in this application is accurate and complete. Any willful false statements of fact or withholding of information shall be grounds for immediate denial or revocation of event permit. Further, it is agreed that sponsor shall indemnify and hold harmless the City of Olean, its employees and agents for all proceedings, causing of action, suits, damages, losses, liability, costs and expenses including reasonable attorney's fees and costs, whatsoever may arise, either directly or indirectly, in connection with the event, or the negligence or willful conduct of sponsor, its employees, representatives, agents, vendors and independent contractors in conducting the event, regardless of whether such proceedings arise in tort, contract, equity, under any statute, common law, or otherwise. In addition, sponsor acknowledges that the City of Olean does not maintain insurance to cover sponsor, its employees, representatives, agents, vendors and independent contractors.

Name: _____ Address: _____ Phone: _____

Signature: _____ Date: _____

RETURN THIS APPLICATION TO: OFFICE OF THE OFFICE OF YOUTH AND RECREATION
OFFICE MANAGER RM 109, 101 E. STATE STREET OLEAN, NY 14760

SPECIAL EVENT APPLICATION SUMMARY – FOR OFFICIAL CITY USE ONLY

Date Application Received _____

Date Application Reviewed _____

(Youth & Recreation – 716-376-5666)

Contract Sent Yes _____ No _____ **Costs:** Rental Fee \$ _____
Contract Received Back Yes _____ No _____ Security Deposit Required \$ _____
Restroom Fee \$ _____
Alcohol Fee \$ _____
Insurance Certificate Required Yes _____ No _____

Amt. Due \$ _____
Billed _____
Paid _____

(Police Department – 716-376-5677)

ESTIMATED CHARGES No. _____ x \$65 p/hr. from _____ to _____ on _____
FOR POLICE No. _____ x \$65 p/hr. from _____ to _____ on _____
COVERAGE No. _____ x \$65 p/hr. from _____ to _____ on _____
Special Requirements needed: _____

\$ _____

Usage Approved – Yes _____ No _____

Reason Not Approved _____

Signature: _____

(Fire Department / Codes Division – 716-376-5683)

DATE APPLICATION RECEIVED: _____
No. of Trailers _____ @ \$25 each _____
Permits/Applications to be submitted - Tent – Bldg. Permit Yes _____ No _____
Trailer Application Yes _____ No _____
Parade/Walk Route Approved Yes _____ No _____
Charges for Fire Coverage \$400 p/person (4 hour minimum)
Special Requirements needed _____

\$ _____

Usage Approved – Yes _____ No _____

Reason Not Approved _____

Signature: _____

(Public Works Department / Electrical Division 716-376-5650 / 716-376-5662)

ESTIMATED TOTAL CHARGES (TO BE BILLED) _____ tables @ \$20 each \$ _____
_____ barricades @ \$30 each \$ _____
Stage Size _____ \$ 200.00
_____ cones _____ barrels _____ benches N/C
Permits/Applications to be submitted _____
Special Requirements/Equipment Needed _____

\$ _____

Cost for Equipment \$ _____

Personnel Cost: \$40 p/hr daytime \$80 p/hr. evening

Usage Approved – Yes _____ No _____

Reason Not Approved _____

Signature: _____

(City Clerk – 716-376-5604)

Alcohol Waiver Approved Yes _____ No _____
Gaming permits available in Clerk's Office _____
Usage Approved – Yes _____ No _____
Reason Not Approved _____

\$ _____

GAMES OF CHANCE & BELL JAR APPLICATIONS TO BE DONE BY SEPARATE PERMIT.

Signature: _____

Estimated Total Cost for Event \$ _____*(Mayor – 716-376-5615)** Usage Approved – Yes _____ No _____

Signature: _____