



Fluvanna County Parks and Recreation

Special Event Application

Thank you for choosing Fluvanna County as a venue for your upcoming event. Completion of the Special Event Application is the first step in the planning process to secure the necessary permits for your event. Our team of professionals is dedicated to assisting you through every step of the process.

Incomplete, illegible, and/or unsigned applications will NOT be processed. Information that's specific to your event may be added to the end of the application. You may submit the Special Event Application as early as twelve (12) months prior and no later than ninety (90) days in advance of your event date.

APPLICATION CHECKLIST:

- Event narrative and timeline
- Insurance information complete
- Copy of IRS 501(c) status
- Site map
- Traffic control and barricade plan
- Application signed and dated

Parking and shuttle plan

- Sample of communications to be distributed to impacted community

The following list of documents may be provided throughout the application process and a minimum of **30 days** in advance of the event:

- Certificate of insurance (*Listing Fluvanna County as Additional Insured.*)
- Additional permits and licenses

Applications and supplemental documents should be submitted to Fluvanna County Parks and Recreation. Delays in providing these documents impact the County's ability to review and approve the application in a timely manner. Additional information regarding Special Event applications and permits can be accessed by calling 434-589-2016.

FLUVANNA COUNTY PARKS AND RECREATION

P.O.Box 70

Palmyra, VA 22963

Phone: (434) 589-2016

Fax: (434) 589-1875

SPECIAL EVENT FEES
(Admission/Non-Admission Based Events)

A Special Event Application is required if your gathering has **any** of the following elements:

- Alcohol
- Inflatables
- Specific location reservations
- Tents
- Stages
- Any advertising or sponsorship activities
- Use of amplified sound
- Walk/Run Route
- Selling or distributing of food, goods, or merchandise (includes exercise classes or boot camps)

Event Participants	Standard Fees (1) (2)	Period	Reservation Fee (3)	Deposit (Min. \$100)	Setup/Breakdown/ Site Manager (4)
Up to 250	\$100	Per Day	\$25.00	50% of standard fee	\$25.00/hour per employee
251 - 500	\$150	Per Day	\$25.00	50% of standard fee	\$25.00/hour per employee
501 – 2,500	\$250	Per Day	\$25.00	50% of standard fee	\$25.00/hour per employee
2,501 – 5,000	\$500	Per Day	\$25.00	50% of standard fee	\$25.00/hour per employee
5,001 and up	\$1000	Per Day	\$25.00	50% of standard fee	\$25.00/hour per employee

- Notes:
- (1) Non-county based residents/groups – Add 15% to standard fee.
 - (2) **501 (c) XX** Non-Profit/Charitable Organizations – Subtract 50% off standard fee.
 - (3) Reservation fee will be deducted from standard fees unless event is cancelled within 10 days of event.
 - (4) Employee support fees apply when County staff support is required by the event holder.

APPLICANT INFORMATION

Applicant's Name: _____

Are you 18 years of age or older? Yes No

Business or Organization's Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Day Phone: _____

Evening Phone: _____ Fax: _____ Cell: _____ E-mail: _____

Manager On Site Day of Event: _____ Cell Phone: _____

**Please notify the Parks Department immediately if any change is made in the above information.*

Are you representing a for profit business? Yes No

Are you representing yourself/individual? Yes No

Are you representing a non-profit organization with 501(c) status? Yes No

**Please attach a copy of the 501(c) documentation.*

Are you representing a Charitable Organization? Yes No

Liability Insurance: Yes No

Applicants must submit a copy of their **Certificate of General Liability Insurance** in the amount of \$1,000,000 naming Fluvanna County as "additional insured" and the certificate holder for the date(s) of your event to include set up and tear down dates. Applicants must also have Fluvanna County listed on the applicants General Liability policy of insurance, including coverage for property damage while park property is occupied by the permittee.

ABOUT THE EVENT

Please check all that apply: This event is a....

- Parade/Run/Walk/Bike event Festival Private Party Trail Ride
 Carnival Sporting Event Concert Other Please explain: _____

The event is... Open to the General Public

Private (by invitation only)

Event Name: _____ Description: _____

Location (s): _____

(Please attach a detailed and legible Site Map)

Event Date(s): _____ Setup Time: _____ Start Time: _____ End Time: _____ Breakdown Time: _____

Rain Date

Please indicate the various event activities. Check all that apply.

- Alcohol Bleachers Petting Zoo Staging Barricades
 Generator(s) Tent(s) Banners/Signs Food Vending Live Music
 Shuttles/ Satellite Parking Vendors (non-food/beverage) PA System
 Mechanical Rides/ Devices Other: _____

Please note the range of TOTAL ANTICIPATED participants. (Include spectators and event personnel):

- 1 - 250 251 - 500 501 - 2500 2501 - 5000 5,001 +

FOOD, NON-FOOD, AND OTHER VENDOR INFORMATION

A vendor is anyone who is serving, selling or sampling food, beverages or merchandise. Please note, any individual or organization cooking food on site to be sold to the general public on County property MUST obtain a permit through the Health Department (434) 972-6259 and present a copy of endorsement with this application along with your *Coordinators Check List*.

Check here if there is no food being served or distributed at your event.

FOOD (Check all that apply):

Food will be... Served Sold Catered Prepared in a Kitchen: _____
 Prepared Outdoors Delivered from another location

Check here if there are no non-food items being sold or distributed at your event.

NON-FOOD (Merchandise, Crafts, etc.):

Please indicate the number and types of vendors you will have at the event: _____

ALCOHOL

To serve alcohol at a public event, you will need a permit from Virginia ABC. A copy of the ABC license must be filed with the Parks and Recreation office.

Check here if there is no alcohol being served or distributed at your event.

Check all that apply: Draft Beer Bottled/Canned Beer Wine Liquor
Alcohol Will Be: Sold Served

Is a vendor providing the alcohol? No Yes Name and phone # of Vendor(s): _____

SECURITY

As an event organizer, you are responsible for the actions and conduct of any and all persons and organizations (participants, spectators, sponsoring organization, its officers, employees, agents or person under their control as permitted by law) associated with the permitted event. The event organizer is also responsible for and will accept all costs related to policing, cleaning and restoring the park upon conclusion of the event or activity and will reimburse Fluvanna County for any such costs incurred.

Please provide a detailed security plan for your event if alcohol is being served, materials or equipment are left overnight and/or live entertainment is provided. This document should indicate the number of security personnel per shift throughout each day of the event. The County reserves the right to require security at any special event if deemed necessary.

Will you be hiring a private security company for your event? Yes No

If yes, provide the security company's contact information.

Name of Security Company: _____

Contact Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Phone: _____ Cell: _____ Fax: _____

Day of Event Contact: _____ Day Phone: _____ Cell: _____

**Additional information may be requested upon review of any and all security plans.*

MEDICAL

Please indicate the location(s) on your site map.

Please include the event's medical communication plan, contact number, first aid station location, and types of resources that will be at the event, description of how resources will be managed and deployed as well as hours of set-up and dismantle of medical aid stations as applicable.

MAPS AND LOGISTICS

SITE MAP *(Required for all Applicants)*

Please attach a site map clearly indicating the layout of the event. An example would be the Start/Finish of a walk, run, race event and/or the set-up area of a festival or cultural event. The site map should indicate the relative location of the following: all sources of amplified sound, tents and canopies with sizes; stages, promotional vehicles, inflatables, portable toilets, dumpster, fencing, barricades, and other structures; proposed driving paths for all equipment and supply vehicles; location of vehicles you wish to retain on county property pre, during, and post event date; locations of alcohol, food and merchandise service/sale; and proposed trail or street closures. All site maps are subject to the approval of the Fluvanna County Parks and Recreation Department.

ROUTE MAP (Runs, Walks, Bike Rides, Horse Trail Rides)

All events that will be a run, walk, or other activity in which participants will be following a course will be required to attach a route map and a written document of the proposed route of the event. All proposed route maps are subject to the Fluvanna County Parks and Recreation Department approval.

For a more detailed route map, please use mapmyrun.com, Bing maps or Google maps. (Which are all free websites.)

STRUCTURES, TENTS, BLEACHERS, AND STAGES

Please note that any structure, tent, bleacher or stage that will be inspected prior to the event may require additional forms and permit requests. Please display locations on your site plan.

Check here if there are no TENTS being used at your event.

TENTS: Please provide an outline of your tent plan. List the type using the codes below, number, and size(s) of tents to be set up.

Tent Codes: **C** - Cooking underneath **S** - Sales of food, merchandise, etc. **D** - Displays, informational, registration, non-sales

Tent Code:	Number of Tents:	Sizes (square footage):	Phone Number:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

BLEACHERS, STAGE(S), SCAFFOLDING:

Check here if there are no BLEACHERS, STAGE(S), OR SCAFFOLDING being used at your event.

Size:	Supplier:	Phone Number:
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please list the number of and types of mechanical rides or other amusement devices, i.e. moon bounce, that will be used:

RESTROOMS AND WASTE DISPOSAL

Please indicate the location of portable restrooms and trash receptacles on your site map.

Check here if there are no PORTABLE RESTROOMS being used at your event.

How many trash receptacles will your event require? _____

How many portable restrooms will you have delivered? _____ How many Handicapped Portable Restrooms? _____

Please provide the name of the company that will be providing the restrooms, delivery date, pick up date, and phone number:

Phone: _____

**Pick-up date and time must be within 2 days of event conclusion.*

PARKING & TRANSPORTATION

Please note that special parking permits and signage may be required. Please display location(s) and organizations name on your site plan if applicable.

How will people get to/from your event?

- Personal Vehicles
- Shuttle/ Satellite Parking
- Other; Explain: _____

Where will the event attendees/participants park?

- On-Street/ Public Parking
- Reserved Parking
- Satellite Parking Location: _____
- School Grounds
- Church Grounds

Will you require special parking? (RV's, trailer, support vehicles)

Vehicle Description	Location (Provide on site map)	Purpose
_____	_____	_____
_____	_____	_____
_____	_____	_____

Will your event require additional traffic/parking control at the entrance or anywhere on the grounds? No Yes

OTHER PERMITS

In addition to a Special Event Application, other County, State, and private agencies may require a permit relative to your event. Please indicate if you have applied or will be applying for a permit from each agency. Please use the following codes:

HA – Have Applied **WA**- Will Apply **DNA**- Does Not Apply to this Event

Code **Permit-Department/ Agency**

- _____ Noise Ordinance - *Department of Planning and Zoning*
- _____ Food Concessions/ Food Sampling - *Health Department*
- _____ Fireworks, pyrotechnics, Emergency Plan - *Fire Department*
- _____ Alcoholic Beverages - *Virginia ABC Department*
- _____ Equipment Inspections: tents (900 + sq. ft.), bleachers, amusement devices (Carnival, Bull rides, etc.), generators (30 amp's +) - *Department of Building Inspections*
- _____ Request for Street, road, and/or Parking Lot Closures - *Sheriff Department*

HOLD HARMLESS CLAUSE

The responsible party / renter agrees to hold harmless the Department of Parks and Recreation, Fluvanna County, its' officials and employees from and against any and all claims, suits, actions, damages and/or causes of action during the term of this agreement, for any personal injury, loss of life, property and/or damage to property sustained in or about the said premises, and from and against all cost, expenses and liability incurred in and about any such claims the investigation thereof or the defense of any action process brought thereon, and from and against any orders and/or judgments that may be entered therein including court costs and attorneys' fees, arising out of or resulting, directly or indirectly, from the Service Provider's (or Service Provider's subcontractor's) performance or breach of the contract. The responsible party / renter also agrees that by signing below they will pay for any damages incurred while using the park. Also, by signing below, this certifies that the rules for use have been read and understood.

Applicant's Name (Print Neatly), Title, and Signature

Date

OFFICE USE ONLY	Rental Deposit: \$ _____ Check # _____ Rental Amount: \$ _____ Check# _____ Staff Initials: _____
	<input type="checkbox"/> Reservation Fee <input type="checkbox"/> Certificate of Liability Provided
	<input type="checkbox"/> On Site Required <input type="checkbox"/> Security/Off Duty Officers Required Park Admin Approval: _____
	<input type="checkbox"/> Deposit Returned: Date: _____