	CS – Special Events A	Application		Community Services
ST. J@HN'S	Spo	ecial Eve	nts Applic	ation
Event Information				<b>SECTION 1</b>
To be completed a minimute the applicant to secure the				
Name of Event				
Location (i.e., park, playgro	und, road)			
Description of Event:				
Block Party/Play Stre	eets	Parade/P	rocession	
Concert/Festival		Commun	ity Fireworks	
Competition		Run/Walk		
Media (film, TV, com	mercial, photo shoot)	Other (Sp	oecify)	
Event Start Date		Event En	d Date	
Event Start Time		Event En	d Time	
Set Up Date & Time				
Event Rain Date				
Is there an admission fee to	the event?	Yes	No	
The City of St. John's Parks Bylaw prohibits the exchange of money in City Parks. No person shall sell or offer for sale in a park any commodity or thing, and no person shall solicit or collect any money in a park. This applies to the sale of food & beverages, admission fees for entertainment, events, or activities, etc.				
Total expected attendance,	at one time			
Total expected attendance,	throughout event			
ST. J@HN'S				

NEWFOUNDLAND AND LABRADOR, CANADA

CS – Special Events Application		Community	Services		
Contact Information		SE	CTION 2		
Corporate/Organization Information (If applicable)					
Name					
Address	Postal C	ode			
Website					
Main Contact					
Name					
Cell PhoneEmail					
Event Day Contact					
Name					
Cell Phone					
Provision of Services		SE	CTION 3		
Traffic & Parking         Does your event require the closure of roads, partial lane reduction, or sidewalk closure?       Yes       No         If yes, the submission of a traffic plan with this application is required. The traffic plan is to include:       • The route, outlining all closures (including start and end time for each closure).       • Identification of where all barricades will be placed for closure.         • The number of volunteers/security/marshals and their exact location.					
Does your event require the rental of parking spaces?	Yes	No			
<b>St. John's Regional Fire Department</b> Will your event utilize:					
Fireworks/Pyrotechnics	Yes	No			
Controlled Explosions	Yes	No			
Your event may be required to complete an Event Emerg plan will be provided to you.	jency Plan; if so	o a template for	<sup>-</sup> this		
<b>NL Liquor Corporation</b> Will your event provide alcohol?	Yes	No	-		
If yes, organizer must submit a <u>Special Event Liquor Lice</u>	nse Application	l			



CS – Special Events Application	Commun	ity Services
Provision of Services continued		<b>SECTION 3</b>
<b>Parks</b> For events being held in a City Park, do you require additional equipment (i.e., garbage containers)?	Yes	No
<ul> <li>Garbage collection and removal is the responsibility of the event org stations is strongly encouraged.</li> </ul>	anizer. The	use of recycling
If your event is being held in a City park, will you require vehicle access for equipment drop off/pick up?	Yes	No
<ul> <li>Vehicle access requests are not guaranteed.</li> </ul>		
If yes, please indicate approximate times		
Royal Newfoundland Constabulary		
Does your event require a police escort or a police presence?	Yes	No
<ul> <li>Provision is subject to availability. Fees may be associated and are in lf yes, please describe your request including the number of officers, requested arrival and departure time:</li> </ul>		
Does your event require traffic control at signalized intersections?	Yes	No
	Yes	No
Will food vendors be used?	Yes	No
If yes, please list all vendors: The organizer is responsible for ensuring all vendors are licensed under the	e City of St	lohn's and/or
Service NL.		
Please visit the <u>Service NL</u> website to access information on Temporary For health (i.e. handwashing and portable washroom requirements).	ood Applicati	on and public



CS – Special Events Application		Community Services	
Provision of Services continued		<b>SECTION 3</b>	
<b>Medical Coverage</b> Will medical coverage be provided by a First Aid Agency? If yes, please provide the name of the First Aid Agency	Yes	No	
Contact PersonContact Number			
If no, will you have volunteers/staff certified in First Aid?	Yes	No	
Quantity of volunteers/staff providing first aid			
SecurityWill your event utilize security?If yes, what type?Security CompanyVolunteer Security	Yes	No	
Security Company name, if applicable			
Contact Person Contact Numb	per		
<b>Audio/Visual</b> Will your event utilize a sound amplification system? Please refer to the City of St. John's website for <u>Noise By-Law</u>	Yes	No	
Are you requesting an extension to the City of St. John's Noise By-Law?	Yes	No	
If yes, to what time?			
Third Party Vendors		<b>SECTION 4</b>	
<ul> <li>Will your event utilize third-party vendors?</li> <li>Examples of third-party vendors include tent provider, bouncy castl audio/visual provider, portable washroom provider, etc.</li> </ul>	Yes e provider, o	No caterer,	
If yes, please list all third-party vendors:			
		-	

Form last updated: 2022-04-13



CS – Special Events Applica	ation			Community Services	
Temporary Structures				<b>SECTION 5</b>	
Will your event utilize a gener	ator?		Yes	No	
If yes, what is the size (wattag	ge)				
Will your event utilize any of t	he following tem	porary structures?	(i.e., bouncy c	astles/archway)	
Bleachers T	ent(s)	Stage(s)	Fencing	Inflatables	
If your event will utilize a tent(	s) and/or stage(	s), please provide	detail on quant	ity and size:	
If your event will utilize any of proposed layout of the structu				indicating the	
Certain structures may require the provision of more detailed technical specifications, as well as a certification by a Professional Engineer, certified in Newfoundland Labrador. This will be discussed upon application review.					
Insurance Requirements				<b>SECTION 6</b>	
At least 10 days prior to the event, the Organizer must provide proof that they have obtained a Commercial General Liability Insurance Policy in relation to the special event with limits of not less than <b>TWO MILLION DOLLARS (\$2,000,000.00)</b> inclusive per occurrence for bodily injury, death, and damage to property, including loss of use thereof. The Policy must be in the name of the Organizer and must name the City as an additional insured. The Policy must include coverage for Cross Liability and shall contain an endorsement to provide the City with thirty (30) days written notice of cancellation or material change that would diminish coverage.					
<ul> <li>Additional Requirements <ul> <li>If your event is a film, commercial or photo shoot, certificate of insurance must also show Advertising Liability.</li> <li>If your event is a road race or higher risk activity, certificate of insurance must also show Participant Coverage.</li> <li>If you are providing food as part of your event, certificate of insurance must also show Products and Completed Operations.</li> <li>If you are providing liquor as part of your event, certificate of insurance must also show Host Liquor Liability.</li> </ul> </li> </ul>					
If fireworks or pyrotechnics ar certificate of insurance. As w activity and the limits of the G <b>MILLION DOLLARS (\$5,000</b> ,	ell, the certificat eneral Liability I	e must include fire nsurance Policy m	works or pyrote	chnics as an insured	



CS – Special Events Application	Commi	unity Services
nsurance Requirements continued		<b>SECTION 6</b>
The City of St. John's offers insurance coverage, at a fee, for non-profit organiz who do not otherwise carry insurance. Insurance coverage is not available for o ireworks. Do you wish to apply for insurance coverage under the City of St. John's Special Events insurance policy?	events in	
· · · · ·		
Responsibilities & Acknowledgement of Event Organizer/Applicant		<b>SECTION 7</b>
Jpon submission of the Special Event Application, the organizer agrees to the	following	:
<ul> <li>Ensure the physical setting is kept safe for participants and the general event.</li> </ul>	public att	ending the
<ul> <li>Take immediate and decisive action, if I/the Organization become aware could lead to injury or property damage.</li> </ul>	e of a situ	ation that
<ul> <li>Take immediate and decisive action to prevent participants and general event from engaging in activities or conduct that could cause property de themselves or others.</li> </ul>		
<ul> <li>In the event of an incident, I/the Organization will follow the 'Incident Re below. An incident includes bodily injury to participant, myself, the publi owned property or third party property:         <ul> <li>Call 911, Police, Ambulance, Fire etc., when assistance is require</li> <li>Within the next working day advise the following City of St. John's specialevents@stjohns.ca, Cooperate with City of St. John's authorities and the insurance companies involved.</li> </ul> </li> </ul>	c or dam ed s represe	age to City ntative:
<ul> <li>Use City of St. John's facilities and equipment provided to me/the Orgar a manner consistent with its intended use and application.</li> </ul>	nization, i	f applicable, i
<ul> <li>Abide by the by-laws, rules and regulations, policy and procedures of th</li> <li>I/the Organization understand that the approval of this special event in r approval to engage in any unlawful activity and hereby agree to conduct Organization in a manner that does not contravene any Federal, Province</li> </ul>	no way co t myself/tl	nstitutes he
Consent to Collection, Use and Disclosure of Personal and Other Information Personal information on this form is collected for the purposes of administration enforcement of the City's special events permits and applications. Personal in other information provided with this application will be shared among authorize Regulatory Committee members for the purposes of administering and managi- interest in the special event.	n, manag formation d Special	along with I Event



CS- Special Events Application		<b>Community Services</b>		
Responsibilities & Acknowledgement of Event Organizer/Applicant	Continued	<b>SECTION 7</b>		
Agreement to Indemnify and Hold Harmless Upon signing the application, the applicant agrees to save harmless and indemnify the City of St. John's and its elected representatives, officers, employees and agents from and against any and all claims, demands, suits, actions, causes of action and/or proceedings that may be brought against or made upon the City and/or its elected representatives, officers, employees or agents by any person arising out of matters in any way related to any act, failure to act or otherwise of the applicant and/or its employees, officers, servants, volunteers and agents in respect of, or pertaining to the special event described in this application or anything pertaining to the Special Events Permit should one be required and granted.				
<b>Release of Waiver of Liability</b> Upon signing the application, the applicant hereby releases, waives and forever discharges the City and its elected representatives, officers, employees and agents from all liability to itself and its heirs, executors, administrators and assigns for all loss or damage and any claims or demands for such loss or damage on account of injury to person or damage to property for which the City may be responsible in respect of the conduct of the said event.				
Applicant Declaration		<b>SECTION 8</b>		
I certify that I have read this entire application form and am fully aware of its terms and conditions and my obligations created by it. I certify that I am 18 years of age or older. By submitting this application electronically, I hereby agree to the terms and conditions on my own behalf, or on behalf of the organization that is being represented or for whom this application is being made.				
Applicant SignatureDate				
Privacy Statement		<b>SECTION 9</b>		
Collection of personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed for special event approval. Questions about the collection and use of the information may be directed to the Chair of the Special Events Regulatory Committee, <u>specialevents@stjohns.ca</u> .				
Submission Information				
Electronic	For More I	nformation		
Email specialevents@stjohns.ca	Email: <u>spec</u>	cialevents@stjohns.ca		
Emails including all attachments must not exceed 25MB. Acceptable file formats are: pdf, docx, xlsx, jpg, png, mp3, wav, mp4, mpeg, mov, zip	Call: (709)	570-2186		

