

Weber County welcomes a variety of Special Events to its communities and values the working relationships that it has with event organizers. The following pages provide general information and an application form that will help guide you through the Special Event application submittal and approval process.

Table of Contents:

General Application Information & Instructions

Section I - Contact Information

Section II – Event Information

Section III - Street Closure(s)

Section IV - Catering/Food & Beverage

Section V - Sanitation & Trash Removal

Section VI - Venue, Structures & Equipment

<u>Section VII – Parking & Shuttle Service</u>

Section VIII - Security & Safety

Section IX – Emergency Services

Section X – Event Signage Plan

Section XI - Proof of Insurance

Section XII - Miscellaneous

Indemnification Agreement

Applicant Agreement

Section I - Contact Information

NOTE: Please complete the entire application by providing information in all fields. You may mark areas that do not apply with an "N/A." Incomplete applications cannot be accepted.

Host Organization/Group/Person:

This is the organization/group/person accepting all responsibility for the event and providing the required proof of insurance.

Organization/Group/Person Name: GOAL Foundation
Type of Organization: Corporation LLC Non-Profit Other
Mailing Address: 2440 Washington Blvd, Ogden UT 84401
Physical Address (If different):
Primary Phone Number: 414 517-9308 Fax Number: ()
Website Address: http://www.oqdenmarathon.com
Event Organizer: The event organizer is the person representing the host as the contact person and who will be available for all questions prior to, during, and post event.
Name & Title: Alex Docta, Operations Manager, GOAL Foundation
Mail Address: 2440 Washington Blvd, Ogden UT 84401
Primary Phone Number: <u>414 517-9308</u> Cell Phone Number: <u>414 517-9308</u>
Fax Number: (Email Address: alex@goalfoundation.com
On – Site Contact: Contact information for the person who will be on-site and will be the primary contact on the day of the event if different than the event organizer.
Name & Title: Alex Docta - Same as above
Mailing Address: 2440 Washington Blvd, Ogden UT 84401
Primary Phone Number: (
Page 4

Section II - Event Information

Event Details:

If an event includes activities that occur within the boundary of an adjacent city, the event organizer must coordinate with the adjacent city to ensure that a similar Special Event application process IS or IS NOT required by the adjacent city.

Event Name: GET OUT AND LIVE WINTE	R RUNNIN	IG SERIES- Half Mara	ıthon			
Location and Type of Event: Running Ev	ent, Eden	UT (start/finish Eden	Park)			
Road Trail Combi	ination (Other)			
Event Description: Half marathon starting at Eden	Park, then runr	ning on the pineview loop parkw	ray to Hunts	sville and then b	ack to Ede	en Park.
Is this an annual event? Yes	ONo					
Is this a multi-day event? Yes	● No	If yes, how many	days?			
Is there an admission fee? Yes	ONo	If yes, provide adı	missior	fee. \$ <u>75</u>	.00	
What is the anticipated attendance?	Ove	erall: 320 /30 Participant/Spectator		,		/ :tator&Staff
Previous year's attendance (if applicab	ile): Ove			Daily:		tator&Staff
Event Setup & Tear Down:						
How many days will event require to:	Setup <u>Or</u>	neTear Do	own <u>O</u> r	ne	_	
Event Setup Date: Saturday 4/5 (Day of the Week)	5/25 (Date)	Event Setup Time:		to AM/PM	08:00	AM/PM
Event Start Date: Saturday 4/5 (Day of the Week)	/25 (Date)	Event Start Time:	08:00)		AM/PM
Event End Date: Saturday 4/5 (Day of the Week)	/25 (Date)	Event End Time:	12:00)		AM/PM
	4/5/25	Event Tear Down			to <u>02</u>	
(Day of the Week)	(Date)	go F		AM/PM		AM/PM
	ra	ge 5				

Section III - Street Closure(s)

Temporary Street Closure:

The County requires that all temporary street closures (Soft/Intermittent access during event or Hard/No Access during event) be approved by the appropriate agency; for example, the Utah Department of Transportation (UDOT) is responsible for State Roads and the Weber County Engineer is responsible for County Roads. Any road closure requires written approval from the responsible agency.

UDOT Road(s):	Yes	● No	Street Name(s)/Location:
County Road(s): N 5500 E between E 2100 N and E 18	ooo s Yes	ONo	Street Name(s)/Location: E 2100 N between N 5500 E and N 5600 E
Closure Type: of event. Soft Closure on N 5500	Soft E to facilitate runner cros	Hard	Describe: Hard Closure on E2100N in front of Eden Park to facilitate start/finish the Pineview Parkway.
Closure Start Date: 5	Saturday (Day of the Wee	4/5/25 ek) (Date)	Closure Start Time: 06:00
Closure End Date: S	aturday (Day of the Weel		Closure End Time: 12:00 AM/PM
Does the event have	its own barrica	de equipme	ent? Yes No
Will event rent barrio			Yes No on and contact person below:
Company Name: Tra	ffic Safety Rental	s	
Address: 979 W 24th St,	Ogden,UT,84401		
Contract Number: Al	icia Helliksen - Cont	act Person	
Contact Person/Ema	il Address:		alex@goalfoundation.com
Phone Number: <u>801</u>	627-1970		_Fax Number: ()
-	-	•	nty review agency requires the event organizer submitted at least fourteen (14) days prior to the
traffic impacts and m	nitigation strate	gies. It is su	include a Traffic Plan Element that describes aggested that all traffic impact locations and plan/map or attached as a separate illustration.
		Pa	ge 6

Section IV - Catering/Food & Beverage

Weber-Morgan Health Department Coordination/Permits:

The event organizer must coordinate with the Health Department's Environmental Health Services Office when food and/or beverages will be sold or provided. For more information call 801.399.7160 or email: envhealth@co.weber.ut.us.

Weber-Morgan Environmental Health 477 23rd Street, Suite 200 Ogden, Utah 84401

Food and	d Beverage	Information:
----------	------------	--------------

Please	mark	which	one	applies:	
_					

Food and/or beverages WILL NOT be sold or provided at event.

Food and/or beverages WILL be sold or provided at event.

Describe food type and service method: <u>Food will be pre-packaged per Weber/Morgan</u>
Health Department quidelines.

Food Service Vendor List:

In addition to possessing temporary food permits appropriately issued by the Health Department, all food vendors must possess a valid business license issued by Weber County or the jurisdiction where the vendor's business is based. For more information go to: http://www.webercountyutah.gov/Engineering/business.php

1.	Pepsi	10	
2.	Daily Rise	11	
3.		12	
4.		13	
5.		14	
6.		15	
7.		16	
8.		17	
9.		18	

Alcoholic Beverages:

If alcoholic beverages will be sold at the event, a separate application requesting "local consent" must be submitted to the Weber County Public Works Office located in the Weber Center, Suite #240, 2380 Washington Blvd., Ogden, Utah. 84401. The application requesting local consent must be submitted concurrently with or prior to making application for a Special Event.

Please mark which one applies:

\odot	Alcoholic beverages WILL NOT be sold or provided at event.	
O Descr	Alcoholic beverages WILL be sold or provided at event. ribe alcohol type and service method:	
	Раде 7	

Section V - Sanitation & Trash Removal

Restroom and Hand-Washing Station Information:

Some events will require the presence of portable restrooms and hand-washing stations. The number of these facilities is based on event type and attendance. Compliance with the Americans with Disabilities Act (ADA) is required.

For information related to the required number/type of facilities, contact the Health Department's Environmental Health Services Office as describe above in Section IV. Restroom and hand-washing station information must be illustrated on event site plan/map submitted with the Special Event application.

Will event organizer provide portable restroom facilities? If yes, please provide rental company information and contact person below:
Company Name: United Site Services
Address:
Contract Number: Natasha Gordon: 208-616-4062
Contact Person/Email Address:
Phone Number: 360 333-8851 Fax Number: ()
Trash Removal: Trash removal includes, but is not limited to, emptying trash bins and removing all litter and debris from the event site and other affected areas. Please provide the following information for those responsible for trash removal.
How will event organizer provide trash removal? Event Staff Please provide staff member or company information below:
Staff Member/Company Name: Alex Docta+ Event Staff / Volunteers
Address: 2440 Washington Blvd. Ogden, Utah 84401
Contract Number:
Contact Person Name/Email Address: Alex Docta alex@goalfoundation.
Phone Number: 414,517-9308 Fax Number: ()
Page 8

Section VI - Venue, Structures & Equipment

Venue Information:

proof that permission has been given by the owner.

When a Special Event is held at a County park, the event organizer must contact the appropriate facility manager to coordinate a schedule and determine whether or not the event will require the execution of an agreement for use of the facility. If an agreement is necessary, the event organizer must ensure that the agreement receives an official County approval prior to the event taking place.

If an event is held on public, quasi-public or private property, the event organizer must provide

Will the event take place at a Weber County park? Venue Name or General Location if Not Properly Named: Eden Park Venue Address: 2100 N 5600 E, Eden UT Venue Description and Specific Locations within Venue: _ Vendor set up will be at Eden Park Bowery, along parking spaces. Start and Finish Line will be adjacent to the Bowery. Note: Please attach site plan/map to the Special Event Application Form and packet. **Structures and Equipment:** When a Special Event uses temporary structures and certain equipment it may be necessary for the event organizer to coordinate with the Weber County Building Official and Fire Marshal. It may also be necessary for the event organizer to address mitigation strategies when the event impacts neighboring properties. Please mark all that apply: Amplified Speakers Generator(s) **Bleachers** Stage Tents/Sun Canopy Start/Finish Line Structure Fencing Other (Please Describe)_ Playground Equipment Pepsi Daily Rise Note: Please show and dimension all structures on the Special Event site plan/map.

Page 9

<u>Section VII - Parking & Shuttle Service</u>

Possible the everall public parking plan including specific information about each parking area
Describe the overall public parking plan, including specific information about each parking area, and provide a count for parking spaces in each:
Parking for this event will be avalible on 5700 E and 2100 N
Parking for this event will be avalible on 5700 E and 2100 N
Note: Please show all parking areas, including ADA accessible spaces on the Special Event site plan/map.
Shuttle Information:
Will shuttle service be provided from a parking area to the event site? No Yes, provided by event staff. Yes, provided by professional shuttle service. If yes, describe the shuttle plan and provide contact information below:
At the state of th
Note: Please show all pick-up and drop-off locations on the Special Event site plan/map.
Staff Member/Company Name:
Address:
Contract Number:
Contact Person/Email Address:
Phone Number: () Fax Number: ()
Page Page

Section VIII – Security & Safety

Public Safety Services:

Weber County Sheriff's Office

Ogden, Utah 84404

1400 South Depot Drive (700 West)

The County, as part of an event approval, may impose conditions in order to protect public and private property, ensure the proper management of traffic, and reduce the possibility of a public safety resource shortage in the community.

The event organizer may request the use of the Weber County Sheriff's Office resources or the County may require the use of Sheriff's Office resources if the Special Event warrants a moderate to high level of police protection. A fee, in addition to the Special Event application fee, will be charged by the Sheriff's Office and the cost may be based on number of officers needed, type and quantity equipment required, event date, time, location, and length, anticipated traffic and weather conditions, estimated number of participants and spectators, and the nature, format, and configuration of the event.

The event organizer must contact the Weber County Sheriff's Office to coordinate the use of County resources and fees must be paid prior to the issuance of the special event permit.

Lieutenant Pledger

801.778.6910

jpledger@co.weber.ut.us

For Weber County Sheriff's Office participation information visit, email, or call:

OR

Please describe security plan and the coordination of law enforcement response:
Attached letter of support.
Does event organizer request assistance from Weber County Sheriff Office? Yes No
Does the event organizer propose the use of a private security company? Yes No If using a private security company, please provide company and contact person information below:
Company Name:
Address:
Contract Number:
Contact Person/Email Address:
Phone Number: (Fax Number: ()
Page

Section IX - Emergency Services

Fire Prevention Plan:

All events are required to submit a fire prevention plan and be available to coordinate the review of the plan with the Weber Fire District if necessary. An additional fee may be charged for fire prevention services and equipment provided by the Weber Fire District.

Please describe any p suppressing a fire:	possibility of igniting a fire and the event's plan for preventing, mitigating, ar
No fires or fire pits	

Emergency Medical Plan:

All events are required to submit an emergency medical plan and be available to coordinate the review of the plan with the Weber Fire District if necessary. An additional fee may be charged for medical services and equipment provided by the Weber Fire District.

The level of medical service that is available at an event is dependent upon the size and type of event. The minimum plan for providing medical services for small events, with a low medical risk, may be the designation of an event staff member who can call 9-1-1 and is certified in CPR. Events that are larger and/or have a higher medical risk may be required to provide more services such as paramedic, ambulance, advanced life support, and on-site physician.

It is responsibility or the event organizer to ensure that all medical support personnel, whether paid or volunteer, are familiar with the Utah Health Code and have the appropriate licensing, certifications, and insurance to provide services at a Special Event.

Emergency medical plans should include but are not limited to:

- Name, contact number, and certification type/level for all medical services providers.
- Description of communication type/method.
- Description or illustration (on Special Event site plan/map) of first aid and/or other medical service or staging locations.
- Description or illustration (on Special Event site plan/map) of medical evacuation strategies and/or staging locations.

medical services will be provided by individu lease provide name(s), contact number(s), ar	nals other than Weber Fire District personnel, and certification type/level below: Certification Type/Level
none Number: <u>801+821-8319</u>	Fax Number: ()
ontact Person/Email Address:	clark.madsen@imail.org
ontract Number:	
ddress: 4401 Harrison Blvd. Ogden Utah 84403	
ompany Name: Intermountain Healthcare	
ledical Provider Information: medical services will be provide by an entity rovide the following information:	other than a Weber Fire District resource, please
efer to the table on page 14.	tte level of medical services for all event, piedse
OTF: To posite in determining the engrousing	ite level of medical services for an event, please
	d, or if an ambulance is required.
ommunication with IHC medial staff in medical situ ne mdical tent to determine if further care is neede	ations. IHC will transport (if needed) runners to finish

EMERGENCY MEDICAL SERVICES RESOURCE MATRIX

Event Type	Anticipated Crowd size	Knowledge of 9-1-1 and CPR	Basic First Aid Stations	Mobile First Aid Stations	ALS First Aid Stations	Ambulance	Mobile ALS Teams	On- site physi cian
Concert/ Music Festival/ Street Fair	<800	*						
	800-1,500	*	*					
	1,500-3,000	*	*	*	*			
	3,000-5,000	*	*	*	*	*		
	5,000-10,000	*	*	*	*	*	*	
	Over 10,000	*	*	*	*	*	*	
Athletic/ Sporting Event	<800	*	*					
	800-1,500	*	*	*				
	1,500-3,000	*	*	*	*			
	3,000-5,000	*	*	*	*	*		
	5,000-10,000	*	*	*	*	*	*	
	Over 10,000	*	*	*	*	*	*	*
Confere nce/ Convent ion	<800	*						
	800-1,500	*						
	1,500-3,000	*	*					
	3,000-5,000	*	*	*				
	5,000-10,000	*	*	*	*			
	Over 10,000	*	*	*	*	*	*	

SECTION X – Event Signage Plan

Standards for Temporary Signs:

Temporary Special Event signs are permitted when meeting the standards found in the County's Land Use Code. Please illustrate the type, dimension, and location of all proposed signs on the event Site Plan/Map or submit a separate sheet serving as a signage plan.

The unincorporated County is divided into two planning areas. All of the unincorporated area of the County located westerly of the Mount Ogden ridgeline, except for the Ogden Canyon, is the Western Weber County Planning Area. All of the unincorporated area of the County located easterly of the Mount Ogden ridgeline, including the Ogden Canyon, is the Ogden Valley Planning Area.

For events taking place in the Western Weber County Planning Area, refer to Weber County Sign Code Section 110-1-3 (6) - Special Provisions.

https://library.municode.com/ut/weber county/codes/code of ordinances?nodeId=PTIILAUSC O TIT110SI CH1WEWESI S110-1-3SPPR

For events taking place in the Ogden Valley planning area, refer to Weber County Sign Code Section 110-2-11 - Temporary Sign Usage.

https://library.municode.com/ut/weber county/codes/code of ordinances?nodeId=PTIILAUSCO TIT110SI CH2OGVASI S110-2-11TESIUS

What date will event signs be displayed:	Setup	Take Down	
Must date will exell signs he dishiased.	Jetup	rake bown	

Section XI - Proof of Insurance

Insurance:

The host organization and/or event organizer must submit a certificate of insurance, listing the County as an additional insured, on an occurrence policy issued by an insurance company authorized to do business in Utah, showing comprehensive general liability and property damage coverage in the minimum amount of:

- 1. \$1,000,000.00 for injury or death for one person in any one occurrence; and
- 2. \$3,000,000.00 for injury or death for two or more persons in any one occurrence; and
- 3. \$500,000.00 for property damage in any one occurrence.

Section XII - Miscellaneous

Animals:

If animals will be present, food service canopies/tents/areas must be located at least fifty (50) feet away. The event organizer is required to provide hand-washing stations near animal attractions or enclosures.

Will there be any kind of animals at this event (i.e. petting zoo, pony rides, etc)?	O Yes	● No
If yes, please illustrate the location of all animal attractions and enclosures on the	Special Eve	ent
site plan/map.		

Indemnification Agreement

Host organization and event organizer(s) agree to defend, indemnify, and hold harmless Weber County and its employees and volunteers from any injury or death to any person or damage to any property including all reasonable costs for investigation and defense thereof (including but not limited to, attorney fees, investigation costs, expert witness costs, etc.) arising out of the issuance of applicant's Special Event Permit regardless of where the injury, death, or damage may occur.

Host organization and event organizer further agree to provide and maintain, during the proposed special event, the appropriate comprehensive general liability insurance and property damage coverage in an amount required by Weber County Code.

Alex Docta	Operations Manager
Print Name	Title
	1/2/25
Signature	Date
Applicant Agreement	
misrepresentation made in this application Applicant also agrees that failure to complete conditions, established by the County, is Applicant further agrees that the Special	r(s) agree that any false statement or material on is cause for denial of a Special Event Permit. ply with relevant codes, policies, procedures, and cause for revocation of the Special Event Permit. Event Permit may be revoked, at any time, by any y and welfare of the public and willful destruction of
Alex Docta	Operations Manager
Print Name	Title
	1/2/25
Signature	Date
	Page
	16