

# Special Event Application

Please take time to review the special event Permit Application and instructions before you begin completing the Application Form.

Weber County is proud to have its residents and visitors host a multitude of special events to contribute to the vitality of our community. The following pages include the Special Events Permit Application and accompanying instructions developed to guide you through the permit process.

The Special Events Permit Application can be found online by visiting the Special Events webpage on the County website at <u>webercountyutah.gov/special events</u>.

The Special Events Permit Application can also be printed online or picked up at and submitted to:

Attn: Special Event Permits Operations Division 2380 Washington Blvd Ste 240 Ogden UT 84401-1473 FAX (801) 399-8862

For more information, please contact (801) 399-8794.

Please allow a minimum of thirty (30) days for the processing of the special events permit application.

Additional fees may be charged by the Sheriff's Office, the County Fire District, Weber-Morgan Health Department, the County Parks and Recreation Division, or other county agencies for special services, equipment or facilities provided by these agencies. Such additional fees shall be specified at the time the agency approves the special event permit application and shall be paid directly to the agency prior to the issuing of the special event permit.

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#### **Permit Application Process:**

The Permit Application Process begins when the Event Organizer submits a Completed Special Events Permit Application and Non-Refundable Permit Fee. Upon receipt of your completed Permit Application, a representative from the Operations Division will be appointed as your contact for the processing of your permit and will be your primary point person for the processing of your permit; you will be able to follow your application on the County's Permit System Miradi.

Please be aware that in some cases you may need to contact Federal or State Agencies (U.S. Forestry, U.D.O.T, etc.) in addition and their letters of permits will be part of this application.

Throughout the Permit Application Process, you will be able to go through the County's Permit System known as Miradi to review the application process. You may also be contacted individually by the Departments or Divisions. Any questions that you have for the individual Departments or Divisions, you will be able to address with them.

Throughout the Permit Application Process, you will be notified if your event requires any additional information, Permits, Licenses, or Certificates.

#### Non-refundable Permit Fee:

The Fee is \$345.00 for a Large Special Event (over 200 people) and \$290.00 for a Small Special Event (200 or less people) per application and may not be waived except under extraordinary circumstances by the direction of the Operations Director.

Please keep in mind that acceptance of your permit application should in no way be construed as final approval just confirmation of your Permit Application.

#### **Cancellation Policy:**

Should for any reason the need to cancel the event, it must be done by Written Notice of Cancellation and be received in our office no later than ten (10) days prior to the event start date. Verbal Cancellation will not be accepted.

Please submit completed Special Evens Permit Application to the Operations Division. The Special Events Permit Application can be found online by visiting the Special Events webpage on the County webpage at <a href="https://www.webpage.org/webpage">webpage.org/webpage.o

# A Special Events Permit Application can also be printed online or picked up at and submitted to:

Attn: Special Event Permits Operations Division 2380 Washington Blvd Ste 240 Ogden UT 84401-1473 FAX (801) 399-8862

# **Section I Contact Information:**

Required information: Please complete entire section.						
Host Organization: This is the organization accepting all financial responsibility for the event and provides the required insurance.						
Organization Name: Utah High School Cycling League						
Type of Organization: Corporation OLLC Non-Profit						
Mailing Address: 758 Auto Mall Drive Suite 3, American Fork, Utah 84003						
Physical Address:						
(If different)						
Primary Phone Number: ( ) 385-227-5741 Fax Number: ( )						
Website Address: http://utahmtb.org						
Event Organizer:  Event Organizer is the applicant given authorization by the host organization to apply for the						
Special Even Permit, the contact person who will be available for all inquires prior, during, and post event.						
Name & Title: Brooke Howard, Central Region Race Director						
Mail Address: 758 Auto Mall Drive Suite 3, American Fork, Utah 84003						
Primary Phone Number: ( ) 385-227-5741 Cell Phone Number: ( ) 385-227-5741						
Fax Number: (Email Address: brooke@utahmtb.org						
Only those authorized as the event organizer will be able to make changes to the application or cancel the event.						

## 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: Tasha Heilweil, North Region Race Director
Mailing Address: 758 Auto Mall Drive Suite 3, American Fork, Utah 84003
Primary Phone Number: ( ) 801-448-2234 Email Address: tasha@utahmtb.org
Section II Event Information:
Event Details:
Event Name: Utah High School Cycling League Race 2 North
Type of Event: Utah high school cross country mountain bike race
Road Trails X
Event Description:  We offer races for 7th - 12th grade students. This event is a cross-country mountain bike race. Our league has racers for 7th & 8th grade in beginner, intermediate & advanced. For high school students, they will race with their grade level unless they have been bumped up based on ability. We have approx 6-7 waves and each wave has no more than 200 students. We have podiums at the end of the event for the top 5 participants in each division.  More information is attached.
Is this an annual event?  Yes  No  Is this a multi day event?  Yes  No If so, how many days?  Participants pay a race  Is there an admission fee?  Yes  No If yes, include admission fee \$ registration for 5 race  What is the anticipated attendance?  Overall: ~800/~1500  Daily: same  Previous year's attendance (if applicable): Overall: R1:769/1500 R2: 803/1500  Daily: same
Previous year's attendance (if applicable): Overall: R1:/69/1500 R2: 803/1500 Daily: Same

Event Setup &	Tear Down:							
How many days will your organization require to: Setup $\frac{7:00 \text{ am}}{\text{Tear Down}}$ $\frac{7:00 \text{ pm}}{\text{Tear Down}}$								
	e: <mark>Friday</mark> (Day of the Week)							
	(Day of the Week)	(Date)						
Event Start Date:	Saturday (Day of the Week)	9/15/18	Event Start Time:	7:00 am	AM/PM			
Event End Date:_	Saturday (Day of the Week)	9/15/18	Event End Time:	7:00 pm	AM/PM			
	(Day of the Week)	(Date)			_ // 1 141			
Event Tear Down	Date: Saturday (Day of the Week)	9/15/18	Event Tear Down	5:00 pm Time: t	9:00 pm			
	(Day of the Week)	(Date)						
Section III Stree	t Closure(s):							
Temporary Stre	et Closure: NA							
bermit nom the C	res that all tempora	Transportat	ion for State Roads	d) be accompanie	d by a			
authorization fror	n the County Engine	eer or his de	signee.	or so sourcy no	uus			
Street Closure(s):								
Name of Street: _								
Utah Department	of Transportation fo	or State Road	ds: Yes	○ No				
				<u></u>				
County Roads:	OYes O	No						
Street Closures:	OSoft O	Hard						
Closure Start Date:	Closure Start Date: Closure Start Time: AM/PM							
	(Day of the Week)	(Date)			_ (10)/1 101			
Closure End Date:		С	osure End Time: _		ΔΝΛ/ΟΝΛ			
	(Day of the Week)	(Date	_		_ \(\frac{1}{1}\)			
Does the Event have its own Barricade Equipment:								
Event will rent Barricade Equipment:								
			<u></u>					
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If renting please provide Company Information and Contact Person.
Company Name:
Contact Number:
Mailing Address:
Phone Number: ( ) Fax Number: ( )
Email Address:
<u>Traffic Plan:</u>
If the Engineering Division or Sheriff's Office in their professional opinion feel it is necessary for the Event Organizer to obtain a Professional Traffic Plan; this will have to be submitted at least ten (10) days prior to the event. Your Site Plan must include the Traffic Plan on your Site Map.
Section IV Catering & Food Vendors:
Catering/Food Vendor Details:
and the second seconds.
Event Organizer must obtain copies of current Food Handler Permits from all catering and food vendors and their staff to be submitted not later than ten (10) days before the event. If alcoholic beverages will be sold at the event, a Permit is required and application is separate from the Special Even Permit and will need to be submitted ten days prior to event or the event will not be able to have alcohol.
Alcoholic Beverages Pre-packaged Food/Soft Drink Beverage Items
Professional Catering Retail Food Vendors
Vendor Information Requirement:
All participating food vendors must have a valid Permit from the Weber County Environmental Health Department or their jurisdiction and valid Business License.
Number of Food Vendors: TBA-possibly one Powder Hountain Will Provide Food
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#### Section V - Venue & Staging:

# Parks, Recreation & Community Services Events may apply:

If you plan to hold your event at a County/City Park, it is your responsibility to contact the appropriate facility manager to coordinate the schedule of your event. Rules, regulations, and restrictions unique to each site will be your responsibility and a notice from the respective facility manager must accompany your application. Will this event take place at a County/City Park? No Venue Details: This event will take place at Powder Mountain on the grassy area of the resort. Venue Address: 6965 East Powder Mountain Road, Eden Utah 84310 (Street Address) Venue Description: (Please attach your Site Plan/Map to your Application Packet): See attached **Staging Details:** The following items will be used at the event (Mark all that applies): ✓ Amplified Music Bleacher(s) Dance Floor Live Entertainment Loud Speakers Microphone(s) 2 Stadium Canopy Number & Size: 10x10/20x20 (For teams/reg/pitzone, merch, etc) Stage(s) Note: If any of the above items will be used, please indicate their location on your

attached Site Plan/Map with legend. Use of the above items may require the Building Official to meet On-Site and approve ADA Regulations and use of electricity.

# Section VI – Parking & Shuttle Service(s):

### Parking Details:

We utilize the parking lots at the resort and along the road where permittable. Please refer to operations plan for more details.
Shuttle Service Details:
Will a Shuttle Service be provided from parking to the event site? Yes No
If yes, describe the shuttle plan. (Please indicate pick-up and drop-off location(s) on Site Plan/Map)
Summit Mountain Holding ginup will provide shuttle (3) from parking lots to raw course/infield.
If providing a Private Shuttle Service, please provide the following information:
Company Name: Summit Movintain Holding GINDP / Pouder Mountain
Contact Number: 801-745-3772 JP bouldt 84-ext. 115 cell 801-389-413
Mailing Address: 1945 E. Pander Mountain Road
Phone Number: (90) 145-3722 Fax Number: ( )
Email Address: <u>JP Govlet @ Powder Mountain. com</u>
Parking Encroachment Details:
No Parking Signs 36 hours before event.
County Roads: Yes No Location:
Off Street Parking: Yes No Location:
On Street Parking: Yes No Location:
Marked Stalls: Yes No Location:
mpacts ADA/Disabled Parking Stall(s) or Pedestrian Access Ramps: ( )Yes No

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How do you plan to utilize the parking space? Please provide specific details:
Pleae see our attached operations plan for parking.  We will have parking attendants that will guide cars through the parking lots. We will also have
signs to help direct traffic to appropriate lots.
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Section VII – Sanitation & Waste Removal:
Restroom Facility Details:
Some event will require the presence of portable restrooms and hand-washing stations. Use of these items will require ADA Regulations. If you are not sure on restroom ratios, please contact the Weber County Environmental Health Department. Indicate location(s) on your Site Plan/Map.
Will Event Organizer provide portable restroom facilities?  ONO  No
If so, please provide the following information.
Company Name: Honey Buckets- Steve Boyce
Contact Number: 801-835-0481
Mailing Address: 4267 West Central Ave, SLC, Utah 84103
Phone Number: ( )801-835-0481 Fax Number: ( )
Email Address: www.honeybucket.com
This includes, but is not limited to emptying of trash bins and the removal of all waste from the event site and other affected areas. Please provide the following information for person(s) responsible for waste removal.
Company Name: Honey Bucket
Contact Number: 801-835-0481
Mailing Address: 4267 West Central Ave, SLC, Utah 84103
Phone Number: ( ) 801-835-0481

Email Address: www.honeybucket.com

# <u>Section VIII – Security Sheriff's:</u>

Security and/or Sheriff's:
Will Event Organizer require assistance from Weber County Sheriff Office? Yes No
The Sheriff's Office shall coordinate the use of professional peace officers if the special event requires traffic control or police protection. An additional fee shall be charged by the Sheriff's Office to cover the costs incurred. The Sheriff's Office shall specify the fee required upon its approval of the Special Event Permit Application, based upon the number of officers and amount of support equipment required by such factors as: the date and time of the event; the event location and length; the anticipated traffic and weather conditions; the estimated number of participants and spectators; the nature, composition, format and configuration of the event; and the estimated time for the event. The fee charged for traffic control or Sheriff's protection shall be paid prior to the issuing of the special event permit.
Will the Event Organizer provide a Private Security Company? Yes No
If providing a Private Security Company, they may still need to coordinate with the Sheriff's Office, and a fee may still be assessed. This is in order to promote, protect, and assure the safety and convenience of the people in their use of public streets, public places, and/or private property. The use of professional peace officers will be used if the special event requires traffic control or Sheriff's protection. Please provide the following information.
Company Name:
Contact Number:
Mailing Address:

Phone Number: ( ) Fax Number: ( )

Email Address: \_\_\_\_\_

### **Section IX – Emergency Services:**

### **Fire/EMS Medical Plan:**

All events are required to have a First Aid Station On-Site and must coordinate with Weber Fire District. An additional fee may be charged for any additional services and equipment used by the Weber Fire District.

### **Medical Guidelines**

All Special Events that meet permit thresholds must have a medical plan. The most basic plan for small events with a low medical risk assessment is the designation of an event representative to call 9-1-1, and a representative on-site with CPR training certification.

Events with a higher potential for risk are required to implement an appropriate medical plan that addresses the specific needs of the attendees and/or participants.

To assist you in determining the appropriate type of medical services for your event, the following matrix was developed which can be used as a guideline in determining your medical needs:

### **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
	<800	*						Claff
	800-1,500	*	*					
Concert/	1,500-3,000	*	*	*	*			
Music Festival/	3,000-5,000	*	*	*	*	*		
Street Fair	5,000-10,000	*	*	*	*	*	*	
	Over 10,000	*	*	*	*	*	*	

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
	<800	*	*					Clair
	800-1,500	×	*	*				
Athletic/	1,500-3,000	*	*	*	*			
Sporting Event	3,000-5,000	*	*	*	*	*		
	5,000-10,000	*	*	*	*	*	*	
	Over 10,000	*	*	*	*	*	*	*
	<800	*						
	800-1,500	*						
Confere	1,500-3,000	*	*					
nce/ Convent	3,000-5,000	*	*	*				
ion	5,000-10,000	*	*	*	*			
	Over 10,000	*	*	*	*	*	*	

It is your responsibility to ensure that all privately provided medical support personnel whether paid or volunteer have the appropriate licensing, certifications, and insurance to provide services at your event.

Should Advanced Life Support (ALS) staffing be needed at your event, you will be required to use the licensed provider (Utah Code 26-8a-402). Private companies that provide medical standby services should be familiar with these regulations and requirements.

#### Medical plans should include:

- Name and contact numbers for the medial services vendor
- Names and certification of the medical providers
- Dates and times the event will be held
- A map of the event with locations of first aid stations and other staging locations

•	Communications	plan	for	emergencies
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- GPS coordinates for first aid locations and important intersections
- If the event is remote/backcountry, GPS location for at least one suitable land zone (100' x 100' clear area that is flat)

**	Your local Medica	l provider will have final determination on resources r	reeded
		biograph and make initial defermination on tesources in	reeder

***	https://rules.utah.gov	/publicat/code/r392/r392-400.ttm#T11,	link to mass	gathering
	rule	,		54411611116

	Page	
Email Address: <u>JPgovlet@ Powdermountain.</u> com		
Phone Number: (90) 3745-3722 Fax Number: ( )		
Mailing Address: 4915 & Powder Hountan Ruad		
Contact Number: 801-745-3722 ext 115 Cell 801-389-4131 JP LOUET		
Company Name: Summit Mountain Holding group / Powder Mountain		
If providing a medical doctor, registered nurse and/or EMT Staff, please provide the following information:		
Will the Event Organizer provide a medical doctor, registered nurse and/or EMT Staff to be on-site?  No		
Please indicate the location on the Site Plan/Map.		
Please see attached.		
sweeps are all CPR certified. We also WFA certifiy our level 3 coaches. We do have a minimum of 6 medics at all races. All personal have radios for communication during the event.		
bones. In addition to our medics, all of our coaches, Cheif Course Marshal, and many of our		
We have medics available to assist with all sorts of injuries from scrapes to splinting broken		
Write in detail how you plan on meeting the medical plan		
Number of Spectators	~1500	
Number of Support Staff	~150	
Number of Participants	<u>~800</u>	

### **Evacuation Plan:**

Please provide a detailed description of your Emergency Evacuation Plan.			
See attached operations plan:			
On occasion we do have injuries that can occur on the trails. We do have medics and vehicles			
available if we need to evac a racer. If injury is severe, we will contact life flight as we are not			
permitted to have ambulances at this location due to the steep incline of the road. If we need to			
evacuate racers on course due to weather, we will radio course marshals and alert families with			
our speakers.			
SECTION X – Plans for Advertising Signs:			
All signs that are intending to support Special Events, Special Even Banners, Special Event Signs, and Special Event Directional Signs are subject to Title 110 Signs, Chapter 2-11. Please indicate the location of the Signs on the Site Plan/Map.			
What date will your signs be displayed: Setup 9/14/18 Tear Down 9/15/18			
Section XI – Proof of Insurance:			
Insurance:			
Host Organization and/or Event Organizer must provide a General Liability Insurance Certificate providing evidence of general insurance coverage in the minimum amount of one Million Dollars (\$1,000,000) for injury or death for one person in any one occurrence; Three Million Dollars (\$3,000,000) for injury or death for two persons in an one occurrence; Five Hundred Thousand Dollars (\$500,000) for property damage in any one occurrence.			
Section XII – Miscellaneous:			
Animals:			
If animals will be present, food service canopies/tents must be at least fifty (50) feet away. It will also be required that Event Organizer will provide hand-washing stations where animals will be stationed.			
Will there be any kind of animals at this event (i.e. petting zoo, pony rides, etc)?    Yes   No			
If so, indicate the location of the animals on the Site Plan/Map. Additional permitting may be required.			

# Balloons/Balloon Launching: It is required that the Event Organizer contact Aviation authorities to obtain information regarding weather and timing of air flights in the direction of the launch. Mylar balloons, string, ribbon and/or valves are not permitted when launching balloons. Will Mylar and/or Latex helium-filled be launched/sold at event? If so, indicate launch site on Site Plan/Map. How many balloons will be launched? \_ Host Organization and/or Even Organizer agree, in consideration of the granting of this Application and Special Event Permit for: \_\_\_\_\_ to be held on \_\_\_\_\_ **Event Name** Event Organizer/Primary Applicant **Indemnification Agreement:** Host Organization and/or 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 limited to, attorney fees, costs and expert fees) arising out of or attributed to the

issuance of Applicants Special Event Permit regardless of where the injury, death or damage may occur, unless such injury, death or damage is caused by the sole negligence or willful misconduct of the County.

Host Organization and/or Event Organizer agree to provide satisfactory evidence of, and shall thereafter maintain during the specified special even general liability insurance coverage.

#### Applicant Agreement:

Host organization and/or Event Organizer(s) agree that any false statement or material misrepresentation made in support of this application and permit is cause for denial of issuance of a Special Event Permit. Applicant also agrees that failure to adhere to the policies and procedures established by the County is cause for revocation of the Special Event Permit. Applicant further agrees that the Special Event Permit may be revoked at any time by the

Sheriff's Office, Health Department, Buildin Director for failure to adhere to the policies	ng Official, EMS, County Engineer, and Operations s and procedures established by the Ordinance for e of the public and willful destruction of property:
Brooke Howard	Central Region Race Director
Print Name Signature	Title  5 10 2018  Date
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