

# CITY OF ESCANABA - SPECIAL EVENT APPLICATION

## Festivals, Parades, Races, Walkathons, Temporary Road Closures

**Return to:** City Manager's Office  
410 Ludington Street, Escanaba, MI 49829  
**Phone :** 906-786-9402      **Fax:** 906-786-4755  
**E-mail:** citymanager@escanaba.org

### **PURPOSE of the Special Event Application**

The Special Events Application must be completed in order to receive approvals to operate an event on City Property. The management of special events on municipal properties requires the coordinated efforts of municipal staff to ensure safe event operation and adherence to applicable by-laws, policies and procedures.

Applications must be received **45 Days** in advance of the event to insure all appropriate approvals are acquired. This application **does not guarantee** park space, road closure approvals, requests for funding etc.

### **Step One: Special Event Application**

Complete and return to the City of Escanaba City Manager's Office at least forty-five (45) days prior to your event. *Please keep in mind that acceptance of your application should in no way be construed as final approval or confirmation of your request.* Throughout your review process you will be notified if your event requires any additional information, permits, licenses or certificates. During our initial application screening process you will be allowed time to provide us with pending documents (e.g. certificate of insurance, secondary permits, etc.). We must receive these items before approving your Special Event Application. Delays in providing these items often delay our ability to finish our review process and approve your application in a timely manner.

### **Step Two: Application Review**

The City Manager's Office will distribute copies of your application to staff from various departments within the City affected by your event. Each department will review the application only if all forms are completed and all necessary information and supporting documents are included. There will be no exceptions. You will be contacted individually by these departments if they have specific questions or concerns about your event.

When a completed Special Event Application has been reviewed, the City Manager's Office *may* schedule your attendance at a Special Event meeting.

### **Step Three: Application Notification of Approval or Denial**

*Notice of action on application:*

The City Manager's Office shall normally approve or disapprove a Special Event Application via an approval letter by e-mail or mail if the applicant has not supplied an email address.

*Revocation of Event Approval (prior to event occurrence):*

Event Approval may be revoked at the discretion of the City Manager's Office upon consultation with the appropriate staff members, when the health or safety of the public is threatened by an emergency, disorder or other unforeseen conditions that have arisen.

*Revocation of Event Approval (during event occurrence):*

Event Approval may be revoked during an event. If Event Approval is revoked, the event must be cancelled and activities must be terminated immediately. The City Manager's Office designee has the responsibility to revoke a permit for reasons of health, inclement weather, or public safety. This will be determined by the City Manager after consultation with staff members.

### **Insurance**

Applicants **MUST** supply certificate of insurance, 14 days in advance of the event, meeting City requirements – naming the City of Escanaba as additional insured.

### **Alcohol**

Alcohol requests must seek permission a minimum 45 days in advance. NO ALCOHOL is permitted in any City owned property (i.e. Facility, Park, Road) unless permission is granted by City Council.

### **Guidelines / By-laws**

All applicable City Ordinances must be upheld by event organizers. Please ensure your application is complete so that staff can advise you on specifics.

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**DATE(S) OF EVENT:** \_\_\_\_\_  
Day of Week, Month, Day, Year (Example: Saturday, October 29, 2016)

**NAME OF EVENT:** \_\_\_\_\_

**CONTACT INFORMATION:** (Please print clearly – Incomplete applications may be delayed)

Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

City, State Zip: \_\_\_\_\_ E-mail: \_\_\_\_\_

Website: \_\_\_\_\_ Event Phone: \_\_\_\_\_

Charitable Org #: \_\_\_\_\_ Fax: \_\_\_\_\_  
(If applicable)

Alternate Contact: \_\_\_\_\_  
(It is recommended that an alternative Name and Phone Number be provided)

Do you grant the City of Escanaba, City Manager’s Office permission to give your telephone number to the general public?  Yes  No

**LOCATION:**

- City Park                      Name of Park: \_\_\_\_\_
- Building/Facility              Name/Area: \_\_\_\_\_
- Road(s)                              Road Closure Required?     Partial     Full

**DATE/TIME:**

<p><b>EVENT TIME</b></p> <p><small>This is the time your event would be ready to accept participants or general public.</small></p>	<p><b>Event Begins</b></p> <p>DATE: _____</p> <p>TIME: _____</p>	<p><b>Event Ends</b></p> <p>DATE: _____</p> <p>TIME: _____</p>
<p><b>SET-UP TIME</b></p> <p><small>When you want the area reserved for your organization to ensure you have adequate time for set-up and tear-down.</small></p>	<p><b>Set-up Start</b></p> <p>DATE: _____</p> <p>TIME: _____</p>	<p><b>Tear-down End</b></p> <p>DATE: _____</p> <p>TIME: _____</p>

The collection, use and disclosure of personally identifying information submitted on this form will be used to facilitate the request to host a special event within the City of Escanaba. Applicants may, from time to time, be contacted by the city or a City-contracted third-party for the express purposes of gathering information about the proposed event, assessing satisfaction and/or obtaining feedback on services related to special events, Questions about this collection should be directed to the City Manager.



**RESERVATION FEES:** (Check applicable box(es))

Ludington Park – Pavilion (1/2 Day)	<input type="checkbox"/> \$75 (Resident)	<input type="checkbox"/> \$100 (Non-Resident)
Ludington Park – Pavilion (Full Day)	<input type="checkbox"/> \$100 (Resident)	<input type="checkbox"/> \$125 (Non-Resident)
Ludington Park – Bandshell (1/2 Day)	<input type="checkbox"/> \$75 (Resident)	<input type="checkbox"/> \$100 (Non-Resident)
Ludington Park – Bandshell (Full Day)	<input type="checkbox"/> \$100 (Resident)	<input type="checkbox"/> \$125 (Non-Resident)
Ludington Park – Gazebo (2 Hour Block)	<input type="checkbox"/> \$50 (Resident)	<input type="checkbox"/> \$75 (Non-Resident)
Other Picnic or Gathering Area (Full Day)	<input type="checkbox"/> \$35	
John D. Besse Park – Pavilion (1/2 Day)	<input type="checkbox"/> \$75 (Resident)	<input type="checkbox"/> \$100 (Non-Resident)
John D. Besse Park – Pavilion (Full Day)	<input type="checkbox"/> \$100 (Resident)	<input type="checkbox"/> \$125 (Non-Resident)
Lemerand Field – Pavilion (1/2 Day)	<input type="checkbox"/> \$75 (Resident)	<input type="checkbox"/> \$100 (Non-Resident)
Lemerand Field – Pavilion (Full Day)	<input type="checkbox"/> \$100 (Resident)	<input type="checkbox"/> \$125 (Non-Resident)
Lemerand Field – Entire Complex (Full Day)	<input type="checkbox"/> \$250	

\*\*\* Half-Day Reservations Cut-off Time is 4:00PM. Half-day reservations can be made before or after 4:00PM.

**EVENTS REQUESTING ROAD CLOSURE:**

**Road closures must be approved by City Council. Once City Council has approved your road closure, changes cannot be made to your route without notification to the City Manager as a secondary Council Approval will have to be sought.**

A detailed map of road closures **MUST** be included. Applicants must notify abutting properties of the closure at least 14 Days in advance of the event. This notification letter must be approved by the City Manager’s Office. If there are any SPECIAL REQUESTS that you would like the City to consider, please outline them on a separate piece of paper and attach.

**DEFINE THE CLOSURE LIMITS – ATTACH A DETAILED MAP**

**I have read and understood the Special Events Application.**

**I will notify the City Manager’s Office of any changed to my event application at least fourteen (14) days in advance of the event.**

**I have received a copy, read and understand the contents of the City of Escanaba Policy and Procedures No. 060101-10 – Alcohol in Public Places (if applicable).**

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Event Organizer Signature

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Print Name

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Date