



# SPECIAL EVENT PERMIT APPLICATION

**PLEASE TAKE TIME TO REVIEW THE APPLICATION AND INSTRUCTIONS BEFORE YOU BEGIN COMPLETING THE APPLICATION.**

The City of Riverside is proud to have its residents and visitors host a multitude of community events in order to improve the quality of life and contribute to the economic vitality of the City. The following pages include the City of Riverside's Transitional Special Events Permit Application and accompanying instructions developed to guide you through the permit process.

Applications can be found at [www.riversideca.gov/](http://www.riversideca.gov/).

## CONTACT

Community & Economic  
Development Department  
Arts & Cultural Affairs Division

(951)826-2427

[specialevents@riversideca.gov](mailto:specialevents@riversideca.gov)

**ANY ORGANIZED ACTIVITY INCLUDING THE USE OF, OR HAVING IMPACT UPON PUBLIC PROPERTY, STREET AREAS OR THE TEMPORARY USE OF PRIVATE PROPERTY IN A MANNER THAT VARIES FROM ITS CURRENT LAND USE, REQUIRES A PERMIT. THERE ARE NO SHORTCUTS TO THE PROCESSING OF A TRANSITIONAL SPECIAL EVENTS PERMIT APPLICATION. COMPLETED APPLICATIONS MUST BE RECEIVED NO LATER THAN SIXTY (60) DAYS PRIOR TO AN EVENT START DATE AND MAY BE SUBMITTED AS EARLY AS (6) MONTHS PRIOR TO THE EVENT START DATE. FOR THE PROCESSING OF THE APPLICATION. A LATE FEE IN ADDITION TO THE APPLICATION FEE WILL APPLY TO ANY SUBMITTAL RECEIVED LESS THAN SIXTY (60) DAYS PRIOR TO THE EVENT DATE.**

Please review the application in its entirety.

## SUBMISSIONS

Submit your completed application via email to: [specialevents@riversideca.gov](mailto:specialevents@riversideca.gov) or in person to the address below:

Attn: Special Event Permits  
Arts & Cultural Affairs Division  
3900 Main Street, 5<sup>th</sup> floor  
Riverside, CA 92522

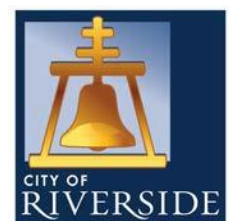


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**PERMIT APPLICATION PROCESS**

The Permit Application Process begins when the Event Organizer submits a completed Application and Non-Refundable Permit Fee. During the initial application screening process you will be allowed time to provide all pending documents (e.g. Liability Insurance, secondary permits, etc.). Upon receipt of your completed Application, a representative from the City will contact you. Thereafter, this person will serve as your City Liaison and will be your primary point of contact for the processing of your permit.

A completed application must have all applicable sections of the application complete and must include a detailed site plan / map including a side legend of the event layout. Any application that is submitted without a site plan / map of the event layout will be deemed incomplete and returned to the applicant.

Your City Liaison will distribute, for review, copies of your Application to all City Departments affected by your event. You may be contacted individually by these departments only if they have specific questions or concerns about your event. Please be aware that in some cases you may need to contact federal, state or county agencies in addition to the City of Riverside.

Throughout the Application Process you will be notified if your event requires any additional information, permits, licenses or insurance. Delays in providing the requested items often delay the ability to finish the Application Process and approve an Application in a timely manner and could result in denial of the application.

**Note:** Keep in mind that acceptance of your Application should in no way be construed as final approval or confirmation of your Permit.

**NON-REFUNDABLE PERMIT FEE**

Fees are determined taking into consideration the status of the Host Organization. The Fee is established by resolution of the City Council and may not be waived. Payments must be made by check made payable to the "City of Riverside" or by credit card.

**\*A late fee will be applied in addition to the permit fee if the application is submitted less than sixty (60) days from the date of the special event.**

Non-Profit Organizations	
Permit Fee	Late Fee*
\$80.50	\$300.00
Professional Corporation/Business/Organization	
Permit Fee	Late Fee*
\$107.00	\$300.00

## **CANCELLATION POLICY**

Should Event Organizer, for any reason, need to cancel their event they must first notify their City Liaison. Written notice of cancellation must be received in our office no later than thirty (30) days prior to the event start date. Cancellations must be in written form; verbal cancellations will not be accepted.

Please keep in mind that Permit Fees are non-refundable. It is also possible that fees related to Police Services will still be incurred. Please contact your City Liaison for more details.

Should, before or upon the date of the event, Public Health Regulations change to prohibit such event or gathering, the City will notify Event Organizer of the public health closures via email by 3:00 pm on the reserved date.

## **INSURANCE**

Host Organization and/or Event Organizer must provide a General Liability Insurance Certificate providing evidence of general liability insurance coverage in the minimum amount of \$1,000,000 combined single limit, \$2,000,000 aggregate AND \$1,000,000 Auto Liability if the event includes any moving vehicles including golf carts AND an additional insured endorsement naming the City of Riverside, its officers, employees and agents' as additional insured. \$1,000,000 Liquor Liability if the event is selling alcohol. \$1,000,000 Liquor Host if the event is distributing alcohol at no charge. All vendors participating in the event and service providers must provide insurance as well as all contracted services for the event i.e. Security services, rentals, traffic management, etc. This document must be submitted no later than fifteen (15) days prior to the event start date.

**SPECIAL EVENT PERMIT APPLICATION**

**SECTION I: Contact Information.** Required information. Please complete entire section.

Host Organization: the organization accepting all financial responsibility for the event and provides the required insurance.

<b>Organization Name:</b>			
<b>Type of Organization:</b>	Corporation	Non-Profit <i>Must provide copy of determination letter</i>	LLC
<b>Address:</b>			
<b>Phone Number:</b>			
<b>Website Address:</b>			

**Event Organizer:** Only those authorized as event organizer and secondary event organizer will be able to make changes to the application.

<b>Name &amp; Title:</b>			
<b>Phone Number:</b>			
<b>Mobile Number:</b>			
<b>Email:</b>			

**Secondary Event Organizer:** Only those authorized as event organizer and secondary event organizer will be able to make changes to the application.

<b>Name &amp; Title:</b>			
<b>Phone Number:</b>			
<b>Mobile Number:</b>			
<b>Email:</b>			

**On-Site Contact:** person who will be on-site and will be the primary contact on the day(s) of the event.

<b>Name:</b>			
<b>Title:</b>			
<b>Check if same as above for Event Organizer or Secondary Event Organizer</b>			<input type="checkbox"/>
<b>Phone Number:</b>			
<b>Mobile Number:</b>			
<b>Email:</b>			

**SECTION II: Event Information.** Required Information. Please complete entire section.

**Event Details**

<b>Event Name:</b>			
<b>Type of Event:</b>	Athletic/Recreation	Farmers/Outdoor Market	Car/Motorcycle Show
	Festival/Celebration/Ceremony	Parade/Procession/March	Concert
	Other:		

**Detailed Event Description (50 word minimum):**

<b>Event Location:</b>			
<b>Is this an annual event?</b>	YES		NO
<b>Is this a multi-day event? If so, how many days?</b>			<b>No. Days:</b>
<b>Anticipated Attendance</b>	<b>Total:</b>		<b>Daily:</b>
<b>Previous Years Attendance</b>	<b>Total:</b>		<b>Daily:</b>

**Event Set-Up & Tear Down**

<b>Set-Up Date:</b>		<b>Time:</b>		AM	PM	<b>Day of the Week:</b>	
<b>Event Start Date:</b>		<b>Time:</b>		AM	PM	<b>Day of the Week:</b>	
<b>Event Ends Date:</b>		<b>Time:</b>		AM	PM	<b>Day of the Week:</b>	
<b>Tear Down Date:</b>		<b>Time:</b>		AM	PM	<b>Day of the Week:</b>	

If your event is a multi-day event, please complete the following information for each separate date. If event is longer than five (3) days, please attach additional sheets with the requested information.

**Additional Day One:**

<b>Set-Up Date:</b>		<b>Time:</b>		AM	PM	<b>Day of the Week:</b>	
<b>Event Start Date:</b>		<b>Time:</b>		AM	PM	<b>Day of the Week:</b>	
<b>Event Ends Date:</b>		<b>Time:</b>		AM	PM	<b>Day of the Week:</b>	
<b>Tear Down Date:</b>		<b>Time:</b>		AM	PM	<b>Day of the Week:</b>	

**Additional Day Two:**

<b>Set-Up Date:</b>		<b>Time:</b>		AM	PM	<b>Day of the Week:</b>	
<b>Event Start Date:</b>		<b>Time:</b>		AM	PM	<b>Day of the Week:</b>	
<b>Event Ends Date:</b>		<b>Time:</b>		AM	PM	<b>Day of the Week:</b>	
<b>Tear Down Date:</b>		<b>Time:</b>		AM	PM	<b>Day of the Week:</b>	

### SECTION III: Site Plan/Map Instructions

To ensure appropriate review of your event, it is preferred that you submit blueprints or computer assisted drawings (CAD) of the event site plan.

If a blueprint or CAD plans are not submitted, all site plans/maps must be produced in a clear and legible manner using 8 ½" x 11" or 8 ½" x 14" white paper. **All applicants are required to submit a detailed Site Plan/Map.**

\*Site plans/maps must also include a key showing the use of symbols for people, vehicles, first aid station(s), cooking station(s), food tables, stage(s), platform(s), barricades, 12 foot fire lane, etc.

If using CAD for the site plan/map please ensure the use of Arial Fonts no smaller than size 10.

- Must include names of ALL street closures.
- Events with moving parade or procession, please include start/end locations and direction of travel.
- Location of street closure barricades.
- Designated twelve foot (12') emergency access lane throughout the length of the street closure(s).
- Location of first aid station and emergency services (if applicable).
- Location of stage(s) (include dimensions), platforms, canopies and tents (include sizes), portable toilets, vendor / exhibitor booths, alcohol gardens, cooking areas/vendors, trash/recycle dumpsters and any other temporary structures.
- Generator locations.
- Location of inflatables, animals, carnival rides, pyrotechnics, vehicles (if applicable).
- Other related event components not listed above.

**SECTION IV: Parking & Shuttle Service.** Required information, Please complete entire section.

**Parking Encroachment Details.** Be advised that no parking zones, disabled parking and loading zones may not be reserved.

- Temporary No Parking Signs must indicate the Date and Time of Restriction AND the RMC 10.52.100 and CVC 22651 (l), (n).
- Temporary No Parking Signs must be posted by the permittee a maximum of 72 hours and a minimum of 24 hours before the date and time they are to take effect. Per California Vehicle Code Section 22651 (l) and (n).
- Temporary No Parking Signs SHALL NOT cover or obscure existing signs or parking meter heads.
- Temporary No Parking Signs must be unobstructed and clearly visible by drivers on the street or affected parking patrons. Post the Temporary No Parking Signs:
  - Facing oncoming traffic, directly below the existing signage, and at a 45-degree angle to the street
  - Fastened at both top and bottom
  - Signs must include "Entire Parking Lot" if an entire parking lot will be closed
  - Signs must include "Entire Block" if an entire block will be closed
- All Temporary "No Parking Signs" must be removed by the permittee upon the expiration of the signs or at the end of the event, whichever comes first.



YES	NO		
		Parking Garage?	Location:
		Metered on street?	Location:
		Street Parking?	Location:
		Parking Lot?	Location:

Impacts ADA/Disabled Parking Stall(s) or Pedestrian Access Ramps?			
Date/Time Meter Encroachment Begins:		AM	PM
Date/Time Meter Encroachment Ends:		AM	PM

For Metered Areas - Please note that meter rates may apply. Please describe Public Parking arrangements. (Please indicate location(s) on Site Plan/Map) If parking is located on private property, please provide a copy of written authorization.

**Shuttle Service Details.** Complete if shuttle services is provided for this event. If providing a private shuttle service, please provide the following information and attach copies of the company's Business Tax Certificate, Liability Insurance Certificate and California State License.

Please describe plan:

Company Name:	
Contact Name:	
Address:	
Phone Number:	
Email:	



**SECTION V: Street Closure(s)**

Complete this section only if your event will include a street closure, if not please proceed to Section VI.

<b>Does host organization have its own barricades and signage equipment?</b>	YES		NO	
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<b>Host Organization will rent barricade and signage equipment.</b>	YES		NO	
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If renting from or hiring a private company, please provide the following information.

<b>Company Name:</b>	
<b>Contact Name:</b>	
<b>Address:</b>	
<b>Phone Number:</b>	
<b>Email:</b>	

**Notice of Temporary Street Closure**

The City of Riverside requires that all affected residents/businesses both on and adjacent to a proposed street closure be notified of such a street closure.

Please use the "Notice of Temporary Street Closure" form located in the Appendix as proof of notice of the proposed street closure. This "Notice of Temporary Street Closure" document may be reproduced as needed.

**Closure(s)**

<b>Closure Start Date:</b>		<b>Closure End Date:</b>	
<b>Closure Start Time:</b>	AM PM	<b>Closure End Time:</b>	AM PM

If your event requires multi-day street closures, please complete the following information for each separate date. If your event requires street closures longer than five (5) days, please attach an additional sheet of paper with the requested information.

**Additional Day One**

<b>Closure Start Date:</b>		<b>Closure End Date:</b>	
<b>Closure Start Time:</b>	AM PM	<b>Closure End Time:</b>	AM PM

**Additional Day Two**

<b>Closure Start Date:</b>		<b>Closure End Date:</b>	
<b>Closure Start Time:</b>	AM PM	<b>Closure End Time:</b>	AM PM

**Additional Day Three**

<b>Closure Start Date:</b>		<b>Closure End Date:</b>	
<b>Closure Start Time:</b>	AM PM	<b>Closure End Time:</b>	AM PM

**Additional Day Four**

<b>Closure Start Date:</b>		<b>Closure End Date:</b>	
<b>Closure Start Time:</b>	AM PM	<b>Closure End Time:</b>	AM PM

**Traffic Plan**

It may be necessary for the Event Organizer to obtain a Professional Traffic Plan.

Please keep in mind that streets must be closed from intersection to intersection; streets cannot be closed mid-block. Event Organizer is responsible for posting Temporary "No Parking" Signs according to requirements on page 7.

Please list the streets, from intersection to intersection, which will be closed for your event. Space is provided for up to five (7) entries. If you need more space, please attach an additional sheet of paper with the requested information. Your Site Plan/Map must show all streets, street closures, and must include a designated 12-foot wide emergency access lane.

1	Street Name:			
	From (cross street):			
	To (cross street):			
Type of Closure:		Street Closure	Sidewalk Closure	Lane Closure
2	Street Name:			
	From (cross street):			
	To (cross street):			
Type of Closure:		Street Closure	Sidewalk Closure	Lane Closure
3	Street Name:			
	From (cross street):			
	To (cross street):			
Type of Closure:		Street Closure	Sidewalk Closure	Lane Closure
4	Street Name:			
	From (cross street):			
	To (cross street):			
Type of Closure:		Street Closure	Sidewalk Closure	Lane Closure
5	Street Name:			
	From (cross street):			
	To (cross street):			
Type of Closure:		Street Closure	Sidewalk Closure	Lane Closure
6	Street Name:			
	From (cross street):			
	To (cross street):			
Type of Closure:		Street Closure	Sidewalk Closure	Lane Closure
7	Street Name:			
	From (cross street):			
	To (cross street):			
Type of Closure:		Street Closure	Sidewalk Closure	Lane Closure

**SECTION VI: Venue & Staging. Required information. Please complete entire section.**

<b>Will this event take place in a park?</b>	YES	NO
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If yes, a Facility Permit Application must be submitted.

If you plan to hold your event at a City park it is your responsibility to contact the appropriate division or facility manager within the Parks, Recreation and Community Services Department to coordinate the schedule of your event. Rules, regulations and restrictions unique to each site/facility may apply. For more information please contact the Parks, Recreation & Community Services Department at (951) 826-2000.

**Staging Details**

<b>Please mark all that apply:</b>	Amplified Music	Bleachers	Dance Floor(s)	Live Entertainment
	Microphone(s)	Disk Jockey (DJ)	Balloons	Animals
	Loud Speaker(s)	Jumper	Moving Vehicles (including golf carts)	Stage

<b>Stage Number &amp; Size:</b>	
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<b>Provided by:</b>	
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<b>Balloons/Balloon Launching: Will balloons be launched/sold at event?</b>	YES	NO
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It is required that the Event Organizer contact the Riverside Airport at (951) 351-6113 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.

<b>Animals: Will there be any kind of animals at this event?</b>	YES	NO
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If animals will be present, please list the type of animals:

Food service canopies/tents must be at least fifty (50) feet away. It will also be required that Event Organizer provide portable hand-washing stations.

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 Event Organizer to meet Fire Department, ADA regulations, and insurance requirements.

**SECTION VII: Catering, Food & Retail Vendors. Required information. Please complete entire section.**

**Vendor Details**

Event Organizer must obtain a health permit for the event including all food providers. If alcoholic beverages will be provided or sold at the event, an ABC Permit is required. ABC Permit application must be submitted to the city for approval a minimum of 30 days prior to the event. Police services may be required.

**Event will include the following (please mark all that apply):**

<b>Alcoholic beverages</b>	<b>Beer</b>	<b>Wine</b>	<b>Both</b>
<b>Food vendors</b>	<b>How many vendors:</b>	<b>How many food trucks:</b>	
<b>Professional Catering</b>	<b>How many booths:</b>	<b>Prepackaged Items</b>	<b>How many booths:</b>
<b>Pot Luck Items</b>	<b>How many booths:</b>	<b>Retail vendors</b>	<b>How many booths:</b>

**NOTE:** A complete list of all vendors / exhibitors must be provided a minimum of 15 working days prior to the event. All participating vendors must have a City of Riverside Business Tax Certificate, and Liability Insurance.

**SECTION VIII: Sanitation & Waste Removal**

**Will Event Organizer provide portable restroom facilities?** YES NO

If yes, a copy of the rental company's City of Riverside Business Tax Certificate and Liability Insurance must be attached to Permit Application. Please indicate location(s) on your Site Plan/Map.

<b>Company Name:</b>	
<b>Contact Name:</b>	
<b>Address:</b>	
<b>Phone Number:</b>	
<b>Mobile Number:</b>	
<b>Email:</b>	

**Waste Removal Details**

Event Organizer is responsible for arranging for the removal of all waste related to the event. This includes, but is not limited to emptying of trash bins and the removal of waste from the event site and other affected areas. A copy of the sanitation company's City of Riverside Business Tax Certificate and Liability Insurance must be attached to Application. If not hiring a professional sanitation company, please provide the following information for the person(s) responsible for waste removal.

<b>Contact Name &amp; Title:</b>	
<b>Phone Number:</b>	
<b>Mobile Number:</b>	
<b>Email:</b>	

If hiring a professional sanitation company, please provide the following information.

<b>Contact Name &amp; Title:</b>	
<b>Phone Number:</b>	
<b>Mobile Number:</b>	
<b>Email:</b>	

**SECTION IX: Security, Police & Fire. Required information. Please complete entire selection.**

**Security and/or Police**

<b>If necessary, in the case of an emergency, the On-Site Contact will call 911.</b>	YES		NO	
<b>Event Organizer is requesting assistance from the Riverside Police Department. The Riverside Police Department will require a signed contract for services provided.</b>	YES		NO	
<b>Event Organizer will provide a private security company.</b>	YES		NO	

If providing a private security company, please provide the following information and attach copies of the company's City of Riverside Business Tax Certificate, Liability Insurance and California State License.

<b>Contact Name:</b>	
<b>Address:</b>	
<b>Phone Number:</b>	
<b>Mobile Number:</b>	
<b>Email:</b>	

**Fire (Fire and Building & Safety Permits may be required)**

<b>Will there be fireworks, pyrotechnics, mock gunfire/other weaponry for special effects?</b>	YES		NO	
<b>Will event require the use of electrical generators?</b>	How many?		Size(s):	

**Note:** Please be advised that a police officer is required to be present any time weapons are loaded and/or discharged. Please contact your City Liaison for more information.

If hosting the use of fireworks, explosive devices, pyrotechnics, mock gunfire and/or the use of weaponry for special effects, please provide the following information.

<b>Date and Time of Demonstration:</b>	
<b>Company Providing Demonstration:</b>	

**Demonstration & Location Description (Please indicate the location of the show and/or launching on the Site Plan/Map):**

**SECTION X: Emergency Services. Required information. Please complete entire section.**

**Medical Plan**

All events are required to have a First Aid Station on-site. Please indicate the location on the Site Plan/Map.

<b>If necessary, in case of an emergency, the On-Site Contact will dial 911.</b>	YES		NO	
<b>Event Organizer will provide an ambulance company to be on site.</b>	YES		NO	
<b>Event Organizer will provide a medical doctor, registered nurse, and /or EMT staff to be on site.</b>	YES		NO	

If providing an ambulance company, please provide the following information and attach copies of their City of Riverside Business Tax Certificate, Liability Insurance and California State License.

<b>Ambulance Company:</b>	
<b>Contact Name &amp; Title:</b>	
<b>Address:</b>	
<b>Phone Number:</b>	
<b>Mobile Number:</b>	
<b>Email:</b>	

If providing a medical doctor, RN, and/or EMT Staff, please provide the following information and attach a copy of their identification credentials.

<b>Contact Name &amp; Title:</b>	
<b>Address:</b>	
<b>Phone Number:</b>	
<b>Mobile Number:</b>	
<b>Email:</b>	

**SECTION XI: Miscellaneous**

**Public Health Regulations**

Host Organization and Event Organizer(s) must read and adhere to all federal, state, and local guidelines with regards to COVID-19, including the regulations and guidelines attached hereto to this application (collectively "Public Health Regulations"). Host Organization and Event Organizer(s) are responsible for ensuring the safety of event participants and agree to abide by all Public Health Regulations that are in place as of the date of this Application and as of the date of the event. Failure to do so may result in a revocation of access and/or denial of future special event permit applications.

INDEMNIFICATION AGREEMENT INDEMNIFICATION AGREEMENT

Host Organization and/or Event Organizer agree, in consideration of the granting of this Application and Special Event Permit for:

\_\_\_\_\_ to be held on \_\_\_\_\_  
Event Name Event Date(s)

by \_\_\_\_\_ of \_\_\_\_\_  
Event Organizer/Primary Applicant Host Organization

Host Organization and/or Event Organizer(s) agree to defend, indemnify and hold harmless the City of Riverside, and the City of Riverside’s employees, officers, managers, agents, council members, and volunteers harmless from any and all losses, damages, claims for damage, liability, lawsuits, judgment expense and cost(s) arising 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, costs and expert fees) arising out of or attributed to the issuance of Applicant’s 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 City. Host Organization and/or Event Organizer(s) voluntarily assume the risk that they may be exposed to or infected by COVID-19 by participating in the event, and that such exposure or infection may result in personal injury, illness, permanent disability, and/or death.

Host Organization and/or Event Organizer agree to provide satisfactory evidence of, and shall thereafter maintain during the specified special event, such insurance policies and coverages in the types, limits, forms and ratings required by the City’s Risk Manager or City Attorney or their designee.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## APPLICANT AGREEMENT

Please read each statement. Initialing next to each statement indicates your understanding and agreement to the statement.

\_\_\_ Host Organization and/or Event Organizer agree, upon request, to provide a General Liability Insurance Certificate providing evidence of general liability insurance coverage in the minimum amount of \$1,000,000 combined single limit, \$2,000,000 aggregate AND \$1,000,000 Auto Liability if the event includes any moving vehicles including golf carts AND an additional insured endorsement naming the City of Riverside, its officers, employees and agents' as additional insured. This document must be submitted no later than fifteen (15) days prior to the event start date.

\_\_\_ Host Organization and/or Event Organizer agrees, upon request, to submit a Security Plan setting forth the proposed security measures to be taken to protect the health, safety and welfare of the participants, spectators, bystanders and passersby. This plan may be reviewed by the Police Department who may require alterations to the plan. Security measures may include but are not limited to the hiring of a private security or Riverside Police Officers at the expense of the Event Organizer.

\_\_\_ Host Organization and/or Event Organizer agrees, upon request, to provide a copy of their Determination Letter, as issued by the Internal Revenue Service of the United States or State of California, if the application is made on behalf of any organization representing itself as a tax-exempt, non-profit and/or charitable organization.

\_\_\_ Host Organization and/or Event Organizer agree, upon request, to pay a refundable Cleaning Deposit no later than ten (10) days prior to the event as a condition of the issuance of the Special Event Permit. Applicant also agrees to pay any clean-up costs, in excess of the deposit, incurred by the City as a result of additional clean-up required to return the event location and surrounding area to its previous condition.

\_\_\_ Host Organization and/or Event Organizer agree to notify all residents and businesses that will be affected by street/sidewalk closures and/or amplified sound. Notification also includes the posting of official temporary "No Parking" signs on streets involved in closures for the event.

\_\_\_ Host Organization and/or Event Organizer agree to supply warning signs and/or barricades and to situate them in such a position that the road closure may be maintained in a safe and orderly manner. Barricades must be manned at all times during street closures.

\_\_\_ Host Organization and/or Event Organizer 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 City of Riverside ordinance number 6102, known as the "Special Events Ordinance", or any conditions or restrictions imposed upon the permit by the Riverside Police Department or the Community and Economic Development Department, is cause for revocation of the Special Event Permit. Applicant further agrees that the Special Event Permit may be revoked at any time by any supervisor of the Riverside Police Department or the Community and Economic Development Department.

By signing below, Host Organization and/or Event Organizer indicate understanding and agreement to the above statements.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



## APPENDIX

This section provides you with documents that you may need to complete the application process. This section includes:

- Block Party Petition for Temporary Street Closure
- Notification of Temporary Street Closure
- Notice of Temporary Parking Encroachment
- Participating Vendor List

For more information please contact (951) 826-2427 or [specialevents@riversideca.gov](mailto:specialevents@riversideca.gov).

**BLOCK PARTY PETITION FOR TEMPORARY STREET CLOSURE**

The City of Riverside requires that all affected residents/businesses both on and adjacent to a proposed street closure sign this petition. Therefore, this document serves as a petition for the following proposed street closure.

Name of Person Responsible for Initiating this Petition: \_\_\_\_\_

A temporary street closure has been requested for the following date(s)/time(s) for the streets listed.

Closure Start Date: \_\_\_\_\_ Closure Start Time: \_\_\_\_\_AM/PM  
(Day of Week) (Date)

Closure End Date: \_\_\_\_\_ Closure End Time: \_\_\_\_\_AM/PM  
(Day of Week) (Date)

Street Name(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The purpose of the proposed street closure is (Event Description): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By signature of this "Petition for Temporary Street Closure," the undersigned hereby agrees to defend, indemnify and hold harmless the City of Riverside, its officers, employees and agents from any and all losses, damages, claims for damages, liability, expense or cost arising from any accident or occurrence causing any injury or damage of any person or property arising out of or attributed to the closure of the above-noted street(s) or the authorization therefore.

1. \_\_\_\_\_  
Print Name Signature  
\_\_\_\_\_  
Address ( )  
Phone Number

2. \_\_\_\_\_  
Print Name Signature  
\_\_\_\_\_  
Address ( )  
Phone Number

3. \_\_\_\_\_  
Print Name Signature  
\_\_\_\_\_  
Address ( )  
Phone Number

4. \_\_\_\_\_  
Print Name Signature  
\_\_\_\_\_  
Address ( )  
Phone Number

**NOTICE OF TEMPORARY STREET CLOSURE**

The City of Riverside requires that all affected residents/businesses both on and adjacent to a proposed street closure be notified of such a street closure. Therefore, this document serves as proof of notice of the proposed street closure listed.

A temporary street closure has been requested for the following date(s)/time(s) for the streets listed.

Closure Start Date: \_\_\_\_\_  
(Day of Week) (Date)

Closure Start Time: \_\_\_\_\_AM/PM

Closure End Date: \_\_\_\_\_  
(Day of Week) (Date)

Closure End Time: \_\_\_\_\_AM/PM

Street Name(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The purpose of the proposed street closure is (Event Description): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Host Organization Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(Street Address) (City) (State) (Zip)

**Acknowledgement:**

By signing below, the undersigned acknowledges receipt of the above "Notice of Temporary Street Closure."

1. _____ Print Name	_____ Signature	_____ Title	_____ Date
_____ Business Name	_____ Address	(_____) _____ Phone Number	

2. _____ Print Name	_____ Signature	_____ Title	_____ Date
_____ Business Name	_____ Address	(_____) _____ Phone Number	

**NOTICE OF TEMPORARY PARKING ENCROACHMENT**

The City of Riverside requires that all affected residents/businesses both on and the adjacent to a proposed parking encroachment be notified. Therefore, this document serves as a template of proof of notice of the proposed parking encroachment listed.

A temporary parking encroachment has been requested for the following date(s) and time(s) at the location listed below:

Parking Encroachment Start Date: \_\_\_\_\_ Parking Encroachment Start Time: \_\_\_\_\_AM/PM  
(Day of Week and Date)

Parking Encroachment End Date: \_\_\_\_\_ Parking Encroachment End Time: \_\_\_\_\_AM/PM  
(Day of Week and Date)

<b>Garage:</b> YES <input type="checkbox"/> NO <input type="checkbox"/>	Location (Address, Lot or Garage):
<b>Meters On-Street:</b> YES <input type="checkbox"/> NO <input type="checkbox"/>	
<b>Parking Lot:</b> YES <input type="checkbox"/> NO <input type="checkbox"/>	
<b>On-Street Parking (not marked):</b> YES <input type="checkbox"/> NO <input type="checkbox"/>	
<b>Marked Stalls:</b> YES <input type="checkbox"/> NO <input type="checkbox"/> <b>Impacts ADA/Disabled Parking Stall(s) or Pedestrian Access Ramps:</b> YES <input type="checkbox"/> NO <input type="checkbox"/>	

The purpose of the proposed parking encroachment is (Description):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Host Organization Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

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

**Acknowledgement:**

By signing below, the undersigned acknowledges receipt of the above "Notice of Temporary Parking Encroachment."

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

Business Name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

