



Event name _____

Date of Event _____

2011 Special Events

Event Application Booklet

Complete and return to:

Marketing Coordinator
City of Lebanon
50 S Broadway
Lebanon OH 45036

For City Staff Only

Date Received: _____

Meeting Date: _____

This packet must be received by the City of Lebanon no less than 60 days prior to your proposed event. If the application for permit is not received by that time, the City of Lebanon has the right to refuse to review for permit.

City of Lebanon Event Application

To be completed by event organizer and submitted with a \$25 application fee for parades/walks/runs or a \$50 application fee for one-day events no less than 60 days prior to the event.

Organization Background Information

Organization Name: _____

Describe the mission of your organization: _____

Contact Person: _____ Title: _____

Address: _____

Day Phone: _____ Evening Phone: _____

Email: _____

Is your organization a registered, nonprofit or charitable organization? No Yes

Event Background Information

Name of Event: _____

Date of Event: _____ Time of Event: _____

Location of Event: _____

Type of Event (check one): Run/Walk Parade Festival Special Event

Other (description): _____

Description of Event – *include purpose and target audience – be specific*

Provide the organization's information line, contact phone number and/or website that can be provided to the public/potential vendors for more information?

Info line: _____ Phone: _____ Website: _____

Does your event provide a handicapped parking area or drop-off location? Yes No

If so, please indicate: _____

Event Setup: Date/Times _____

Event Tear-Down: Date/Times _____

Rain Day(s) and Date (s) _____

Is this a first time event in Lebanon? Yes No

Previous Attendance (include date) _____

Estimated attendance: a. Spectators/visitors: _____
b. Participants/vendors: _____
c. Number of units (*for parades*) _____

At what point during the event will attendance peak: _____

What percentage of attendants will make up the following age groups:

15 & younger _____ % 16 – 20 _____ % 21 – 25 _____ %
26 – 35 _____ % 36-45 _____ % 45 & older _____ %

Will an admission fee be charged? No Yes - Fee: _____

Street Closure Information

List streets that will require closure for your event, include street name and times of each

Note: The event organizer must issue a "notice of street closure" letter to all affected residents and businesses by the street closure. The notice should list all roads that will be closed, date and times, and your contact information, including name, address and phone number. The event organizer is also required to post a notice of the street closure in the local "Western Star" newspaper, one week prior to the event.

Hours of street closure: Date: _____ Open: _____ am/pm Close: _____ am/pm

On-street parking removal requested: Yes No

Alcoholic Beverages

Will alcoholic beverage(s) be sold? No Yes

You will be required to obtain a temporary sales permit from the State of Ohio, carry liquor liability insurance, and submit a detailed plan for sales.

What types of alcohol do you intend to sell? Beer Wine Other (list below)

Who will be serving the alcohol?

Event Sponsors

Please list all event sponsors (list anticipated sponsors if not confirmed)

Do the event sponsors receive and special recognition/benefits for their contributions? Please explain.

Event Costs & Revenues

Estimated Cost of producing the event _____

Estimated Revenue generated from producing event _____

What does the organization intend to do with any expected revenue generated from the event? If the revenue will be donated, please list intended recipients and donation amounts. (If this is not known for this year's event, please estimate).

Does the sponsor/producer intend to generate revenue as a result of their own concessions, souvenir and/or program sales? No Yes Please list what will be sold by the sponsor/producer.

Acknowledgement

I understand that I will be provided a Special Events Guidebook and an application for Permit required of my organization. Additionally, I understand the City of Lebanon has final review and approval on all aspects of city services and public health and safety. Upon review and approval of these forms an estimated cost of city services* that my organization will be responsible for will be provided prior to the event. These costs may include expenses from the Police, Fire, Streets, and Electric divisions and any other city departments that provide service to the event. I understand I will be given an itemized bill after the event.

Signature of Applicant

Title

Date

**Organizers who receive In-Kind Services donations through the City's Civic Donation Program will not be provided with a cost estimate of city services.*

Please return the completed application no less than **60 days prior to the event** to:
City of Lebanon, Attn: Marketing Coordinator, 50 S Broadway; Lebanon, OH 45036.

Checklist: all must be included before application will be reviewed for permit

Completed Application

Site Map

Application Fee

** PLEASE NOTE: The above recommendation approves the event host to continue with the event process. The Marketing and Media Relations Coordinator will assist in the planning and coordination effort between the event organizer and City of Lebanon services. If your application is denied, you may formally appeal to the City Manager.

FOR OFFICE USE ONLY

The Board of Festival and Tourism, has;

Recommended this event to continue with the application process

Not Recommended this event to continue with the application process

Date: _____

Board of Festivals & Tourism

City of Lebanon

Hold Harmless/Indemnity Agreement

To the fullest extent by law, the undersigned Organization agrees to indemnify and hold the City of Lebanon, its respective officers, agents and employees and volunteers harmless from and against all loss, cost, expense, damage, liability or claims, whether groundless or not, arising out of bodily injury, sickness, or disease (including death result at any time there from) which may be sustained or claimed by any person or persons, or the damage or destruction of any property, including the loss of use thereof, based on any act or omission, negligent or otherwise, of the Organization, or anyone acting in its behalf in connection with or incident to the scheduled for _____ Event Name _____, except that the Organization shall not be responsible to the City on indemnity for damages caused by or resulting from the City's sole negligence; and the Organization shall, at its own cost and expense, defend any such claim and any suit, action, or proceeding which may be commenced there under. And the Organization shall pay any and all judgments that may be recovered in any suit, action or proceeding, and any and all expense, including but not limited to, costs, attorney's fees and settlement expenses that may be incurred therein.

Organization Name: _____

Authorized Signature: _____ Date: _____

Administrative Information

The following pages **MUST** be completed if you are requesting city services for your event.

Location of Command Post: _____

Location of First Aid Service: _____

Will tents be used? Yes No Size(s) _____

Will temporary structures be used? Yes No

Size(s) & Location(s) _____

Please list the name(s) of the person(s) who will be in charge during the event.

Name _____

Addresses _____ Day Phone _____

Please list locations and types of signage to inform motorists of re-routed traffic/parking/shuttle _____

What type(s) of vehicles (trucks, golf carts, etc.) will you need to have access to the event area?

Electric Department Services Request

All vendor electrical fees shall be collected by the Event Organizer. The Event Organizer shall then make payment to the City of Lebanon Service Department with one check and supply copies of vendor electric request forms no later than 7 days prior to the event.

The Event Organizer shall complete the supplied vendor layout map to the Electric Department no later than 7 days prior to the event for electric service.

Other Electricity

Specifications _____

Electricity for Stage Light & Sound

Will you be using any of the following?

Extension Cords Existing Electric Generators

Set-up Information:

Date and Times of Set-up

Sound Equipment Contact and Telephone Number

Lighting Equipment Contact and Telephone Number

Other Information:

VENDOR ELECTRIC REQUEST

(To be completed by event/festival vendors and submitted to event organizer)

Event _____ Date(s) _____ Booth# _____

Booth Name: _____ Contact Person: _____

Address : _____ Day Phone: (____) _____

City: _____ State: _____ Zip _____

Procedure for Electric Service for Festival Booths & Small Electric Requests

1. Determine your electric needs by using the guidelines provided:

A. **120 volt, 20-amp.** Maximum of two 20-amp circuits provided per customer. One circuit means one duplex outlet.

B. **240-volt, 50-amp.** Please note locations and allotments for the 240-volt service are limited. Those requesting 240-volt service must supply a 50 amp NEMA 14-50p plug with at least 15 feet of UL listed cable rated for service required. (See page 2 diagram)

2. Determine total cost:

A. Base fee - \$25.00

B. 120 volt, 20 amp = base fee + \$10.00 per circuit

C. 240 volt, 50 amp = base fee + \$20.00

3. Service Required:

120 volt, 20 amp - 1 circuit = **\$35.00**

120 volt, 20 amp - 2 circuit = **\$45.00**

240 volt, 50 amp – 1 circuit = **\$45.00**

Total Cost: \$ _____

Your Electrical connection point will be within 100 ft, of your booth space.

Payment of fee should be returned with this application to your festival organizer. **Make checks payable to your Event Organizer.** Your organizer will coordinate your services and location with the City of Lebanon Electric Department. **All requests must be made no later than four (4) weeks prior to the event. Requests after that date may not be honored.**

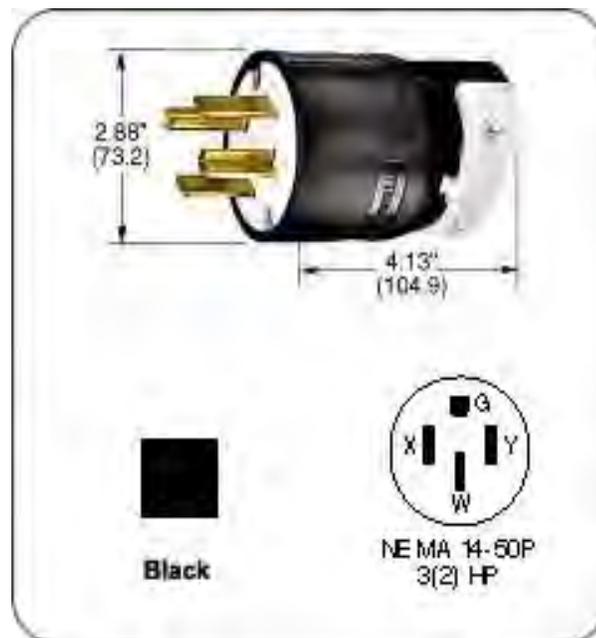
Read the following Agreement statement and sign:

I understand that overloading of electrical circuits is prohibited. If I have overloaded a circuit, I will be required to remove an appliance or appliances from service. If Electric Department Personnel are called for an overloading problem, I understand that I will be billed for a service call of \$40.00. I understand that electric heaters of any kind are prohibited. Under no circumstances will I be permitted to plug into street lighting.

Signature _____

Date _____

**50 Amp 240 Volt 4 Wire Plug
NEMA 14-50P**
Available at most Hardware stores



VENDOR ELECTRIC

BOOTH #	VENDOR NAME	120V-1	120V-2	240V	FEE
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
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33					
34					
35					

FESTIVAL BOOTH LAYOUT



Public Works Department Services Request

Street Department Services Requested:

- Barricades: Number of Barricades _____ *(note locations on site map)*
- Road Barrels Number of Barrels _____ *(note locations on site map)*
- Trash Barrels Number of Trash Barrels _____
- Trash Bags
- Trash Pick Up Number of Trash Pick-Ups Requested _____
- "No Parking" Signs Number needed (\$1/sign) _____
- Street Cleaning Times for Street Cleaning _____

Set-up Information:

***Please note that weather conditions may affect the dates and times of material drop off.*

Date and Times of Drop-Off

Other Information:

Organization responsible for cleaning and re-stocking restroom facilities and port-o-lets:

How often will this be done? _____

If not city crews, detail who will be collecting the trash, how often it will be collected, and where it will be deposited.

Location and size of the dumpster, the company, and delivery & pickup dates:

Who will be responsible for cleanup of the event area after the event is over?

Fire Department Services Request

Fire Department Services Requested:

EMS on Site

Please note that this request can only be provided if there is adequate staff available. You will be contacted prior to receiving your final permit if your request cannot be accommodated.

Times _____ Location _____

Fireworks*

Company _____ Date/Time _____

You must contact Fire Division for inspector to be on site during set-up and show.

Vendor Review: *Must be checked if vendors will be at the event.*

Non-food vendors must have a 5lb ABC fire extinguisher; food vendors must have a 10lb ABC fire extinguisher. All extinguishers must be in good working order and not past the expiration date. All tanks must be secure.

Who will be providing the staff and the equipment for the first aid facility?

Contact _____ Phone _____

Are these staff: Paid Volunteer

Police Department Services Request

Police Department Services Requested:

Event Security

Restricted Parking Streets and times where parking should be restricted

Traffic Control Location and times to re-route traffic

Other; Please note additional requests

Who will monitor the closed intersections? (Must be well-marked)

Please describe your traffic/parking procedures. Include shuttle information

Alcohol: Who will be serving?

What training will servers receive?

Please describe your security procedures. If you are not requesting to use the police department as event security or traffic control, please note who will be providing these services. The police department has final approval on all security issues and will give final approval upon review of the security plan.

Note: If any services are requested on this form, you are required to complete the following "Agreement for Special Police Services." Services will not be scheduled unless this form is completed. Any applicable fees will be determined as part of the application process, and the event organizer will be notified of any such fees before actual services are rendered.

AGREEMENT SPECIAL POLICE SERVICES

This agreement entered into this _____ day of _____, 2008 by and between the City of Lebanon, Ohio
(Day) (Month)

and _____, for the provision of special police services by the City.
(Recipient Name)

(1) The City shall provide the following services and equipment under this Agreement:

(Please list number of officers and/or equipment needed and for what services)

(2) The aforesaid services shall be rendered at the following address:

(Please list the address or location where services will be needed)

(3) The aforesaid services shall be rendered on the date and at the times specified as follows:

(Please list date and times services are needed)

(4) The aforesaid services shall be provided by the following number of officers: _____
(# of officers)

(5) In consideration of the provision of special services by the City as aforesaid, Recipient shall pay to City the following fees:

- (a) For the first two (2) hours or less of each duty, \$90.00 per officer;
- (b) For each additional hour, \$45.00 per officer.

(6) Recipient shall indemnify and hold harmless from any liability, including the cost of defense that may arise from the provision of services, under this Agreement by City, its employees, agents or assigns.

(7) City shall retain all responsibility for control of personnel performing services under this Agreement including, but not limited to, hiring, training, assignment, disciplining, and dismissal of said personnel.

(8) City shall be responsible for maintaining records concerning performance of services including, but not limited to, number of calls for service, nature of calls, numbers of arrests, number of persons arrested by sex and age, number of non-criminal calls, and assistance given.

IN WITNESS WHEREOF, the parties have hereunto set their hands on the day and year aforesaid.

RECIPIENT:

CITY OF LEBANON, OHIO

Name

Kenneth Burns
Chief of Police

Signature

Recipient's Billing Address

Contact Phone Number

xc: Ms. Pam Stotts, Payroll/Personnel (billing)
Police Department

City of Lebanon

50 S. Broadway, Lebanon, Ohio 45036
(513) 932-3060 fax (513) 932-2493
www.ci.lebanon.oh.us

TENT PERMIT

PARCEL ID.# _____

Application No. _____

Building Department

Residential Application For

New Construction, Accessory Buildings, Garages, Decks, Etc.

Application MUST be filled out COMPLETELY to be reviewed.

Date _____

Folio No. _____

Permit Number _____

Location of Structure (St. & No.) _____ LOT NO. _____

NAME	ADDRESS	CITY	STATE	PHONE NO.
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Owner _____

Agent _____

Contractor _____

Plans By _____

Type of Work:

- 1) ___ New Construction
- 2) ___ Addition
- 3) ___ Alteration
- 4) ___ Detached Garage
- 5) ___ Tool Shed
- 6) ___ Fireplace
- 7) ___ Swimming Pool
- 8) Other (specify)
TENT

Type of Construction:

- 1) ___ Frame
- 2) ___ Other (specify)

Floor Area Square Feet:

- 1) _____ Basement
- 2) _____ 1st Floor
- 3) _____ 2nd Floor
- 4) _____ Garage

Type of Use:

- 1) ___ One Family
- 2) ___ Two Family
- 3) ___ Three Family
- 4) ___ Other (specify)

Drawings:

- 1) Plot Plan (3)
- 2) Construction (2)

TOTAL _____

Additional permits may be required: Electric ___ HVAC ___ Plumbing ___ Comprehensive ___

Estimate of cost: \$ _____ Owner's and agent's estimate of cost. (Estimate of cost shall include entire cost including owner's or agent's labor for all items except land, plumbing, electrical, landscaping or other items specifically determined by Building Official not to be applicable.)

Remarks: _____

Owner/Agent _____

Approved _____

FEE \$ _____

Receipt No. _____

Building Official _____ Date: _____

Tent Permit Guidelines

If you plan to erect a tent or canopy over 120 sq ft in the event area, it will be necessary to complete a Tent Permit from the Lebanon Department of Planning and Development. The fire department requires proof of flammability standards on tenting material; certification for this must be provided at the time of application for permit. Each staked tent must have a minimum clearance of three feet surrounding it on all sides. In the case of multiple tents this means a total of six feet or more between each structure.

Below are the requirements contained in the Ohio Building Code for permitting tents.

Note: Wind Load for this area is 90 MPH.

3102.1.1 Approval required.

Tents and membrane structures having an area in excess of 200 square feet (19 m²) and canopies in excess of 400 square feet (37 m²) shall not be erected, operated or maintained for any purpose without first receiving plan approval in accordance with the provisions of Chapter 1.

Exceptions:

1. Tents used exclusively for recreational camping purposes.
2. Canopies open on all sides which comply with all of the following:
 - 2.1. Individual canopies having a maximum size of 700 square feet (65 m²).
 - 2.2. The aggregate area of multiple canopies placed side by side with a minimum clearance of less than 12 feet (3658 mm), not exceeding 700 square feet (65 m²).
 - 2.3. A minimum clearance of 12 feet (3658 mm) to all structures and other tents.

3102.1 General.

The provisions of this section shall apply to tents, air-supported, air-inflated, membrane-covered cable, membrane-covered frame structures, and tensioned membrane structures, collectively known as membrane structures, including circus and carnival tents, entertainment, recreational and food service establishments and other similar structures.....

TENT. A structure or shelter constructed of fabric or other pliable material supported by any manner except by air or the contents that it protects.

3102.6.1 Noncombustible membrane.

A noncombustible membrane shall be permitted for use as the roof or as a skylight of any building or atrium of a building of any type of construction provided it is at least 20 feet (6096 mm) above any floor, balcony or gallery.

3102.6.1.1 Flame-resistant membrane.

A flame-resistant membrane shall be permitted to be used as the roof or as a skylight on buildings of Type IIB, III, IV and V construction provided it is at least 20 feet (6096 mm) above any floor, balcony or gallery.

3102.7 Engineering design.

The structure shall be designed and constructed to sustain dead loads; loads due to tension or inflation; live loads including wind, snow or flood and seismic loads and in accordance with Chapter 16.

SECTION 1605 LOAD COMBINATIONS

1605.1 General.

Buildings and other structures and portions thereof shall be designed to resist the load combinations specified in Section 1605.2 or 1605.3 and Chapters 18 through 23, and the special seismic load combinations of Section 1605.4 where required by Section 1620.2.6, 1620.2.9 or 1620.4.4 or Section 9.5.2.6.2.11 or 9.5.2.6.3.1 of ASCE 7. Applicable loads shall be considered, including both earthquake and wind, in accordance with the specified load combinations. Each load combination shall also be investigated with one or more of the variable loads set to zero.

1. Floor and roof live loads.
2. Ground snow load, P_g .
3. Basic wind speed (3-second gust), miles per hour (mph) (km/hr) and wind exposure.
4. Seismic design category and site class.

Attachments (required):

Be sure to include:

- A. Layout map, including command post, first aid area, vendor sites, locations of sanitation facilities and logistical needs
- B. Deposit
- C. Zoning Permits
- D. Security Plan
- E. Plan for Liquor Sales
- F. Parking and Shuttle Plan
- G. Fireworks permit, if applicable

Signatures

Event Organizer

By signing below, I understand the City of Lebanon has final review and approval on all aspects of city services and public health and safety. Upon review and approval of these forms an estimated cost of city services* that my organization will be responsible for will be provided prior to the event. These costs may include expenses from the Police, Fire, Streets, and Electric divisions and any other city departments that provide service to the event. I understand I will be given an itemized bill after the event.

** Organizers who receive In-Kind Services donations through the City's Civic Donation Program will not be provided with a cost estimate of city services.*

Event Organizer: _____ Date: _____

Event Organizer: _____ Date: _____

Event Organizer: _____ Date: _____

City of Lebanon City Staff Contact List

Application & Final Permit

Karen Graves
Marketing and Media
Relations Coordinator
513-228-3110

Electric

Tom Diegel
Division of Electricity
513-228-3210

Fire & EMT

Fire Chief Mike Hannigan
Division of Fire
513-228-3850

Safety/Traffic/Parking

Dave Gehringer
Division of Police
513-228-3312

Street Closure

Dan Wilson
Public Works Dept.
513-228-3701

Signage (Promotional)

Jason Millard
Department of Planning & Development
513-228-3172

Tent Permits

Scott Brunka
Deputy City Manager
513-228-3103