

# City of Deadwood Special Event Permit Application and Facility Use Agreement for

Outlaw Square Shootout - July 22, 2023

Instructions:

To apply for a Special Event Permit, please read the Special Event Permit Application Instructions and then complete this application. Submit your application, including required attachments, no later than forty-five (45) days before your event. Facility Use Agreements should also be completed at this time (if applicable).

EVI	ENT INFORM	ATION		
Type of Event:         Run       Walk         Street Fair       Triathlon         Event Title:       Outlaw Square Shootout - July	_	ike Race	Parade	Concert
Event Date(s): <u>July 22, 2023</u> (month, day, year)	<u>Total</u> Antici	oated Attendan	nce: <u>450</u>	
(month, day, year)	(# of <u>Participant</u> s	,250	# of <u>Spec</u>	tators 200 )
Actual Event Hours: (from): 6 pm Outlaw Square Location / Staging Area:				AM/PM
Set up/assembly/construction Date:		Start Time:	6 am	AM / PM
Please describe the scope of your setup / assem Setting up mats on turf, stage bleachers, b	bly work (specific	details):		
Dismantle Date:	Completion	n time: Midnig	ht	AM / PM
List any street(s) requiring closure as a result of this event. Include <u>street name(s)</u> , <u>day</u> , <u>date</u> and <u>time</u> of closing and time of re-opening: Deadwood St closure - July 22 - 6 am until Midnight				
<ul> <li>Any request involving 25 or less motor vehicles will utilize Deadwood Street and will be barricaded at both ends of Deadwood Street.</li> <li>Any request involving 25-50 motor vehicles (not including motorcycles) - will park on the north side of Main Street, which will not require street closure.</li> <li>Any request involving 50 or more vehicles (which would require an entire street closure From Wall Street to Shine Street and security must be provided at Shine Street and Main Street and Wall Street and Main Street to direct traffic.</li> <li>Additional security maybe required at the discretion of the Event Committee.</li> </ul>				
APPLICANT AND SPONS	ORING ORG	ANIZATION		IATION
Commercial (for profit) AAU Wrestling			Noncom	mercial (nonprofit)
Sponsoring Organization: Mike Sno	eesbv			
Chief Officer of Organization (NAME):	-			
Applicant (NAME): Wade Morris aka Bobby	Rock	Business Phon	ne: ( <u>605</u> )	717-6848
Address: 703 Main St	Deadwood		SD	57732
Daytime phone: (605 ) 717-6848Even	c (c ning Phone: (	)	(state) Fax #:	(zip code)

Please list any **professional event organizer** or **event service provider** hired by you that is authorized to work on your behalf to produce this event.

Bobby Rock				
Address:	703 Main St	Deadwood	SD	57732
		(city)	(state)	(zip code)
Contact person "on	site" day of event or facility use	Mike Sneesby	er/Cell #:	645-1664

(Note: This person must be in attendance for the duration of the event and immediately available to city officials)

**<u>REQUIRED</u>**: Attach a written communication from the Chief Officer of the organization which authorizes the applicant or professional event organizer to apply for this Special Event Permit on their behalf.

- NO YES
  - Is your organization a "Tax Exempt, nonprofit" organization? If YES, you must attach a copy of your IRS 501C Tax Exemption Letter to this Special Event Permit application (providing proof and certifying your current tax exempt, nonprofit status).
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Are admission, entry, vendor or participant fees required? If **YES**, please explain the purpose and provide amount(s).:

General Admission fee for event. Participant fees charge for entrants - Fundraiser for AAU Wrestling

# OVERALL EVENT DESCRIPTION: ROUTE MAP / SITE DIAGRAM / SANITATION

Please provide a **detailed description** of your proposed event. Include details regarding any components of your event such as use of vehicles, animals, rides or any other pertinent information about the event:

This is an AAU wrestling tournament taking place at Outlaw Square with wrestlers participating from around the region. This is a fundraiser for Deadwood AAU Wrestling Club.

Bleachers will be placed at Outlaw Square for public seating at the event. This is a ticketed event with wrestliing club charging admisssion. Security gates will be placed along Main Street and down the curbside of Deadwood St. on Hickoks side to Pioneer Way and back across Deadwood St. to secure the venue.

Wrestling mats will be placed on the turf of Outlaw Square.

Regiistration will begin at NOON - wresting matches will begin at 6 pm.

Requesting Deadwood St closure begining at 6 am

# **OVERALL EVENT / FACILITIES RENTAL DESCRIPTION (CONTINUED)**

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NO I	YES	Does the event involve the sale or use of alcoholic beverages? If <b>YES</b> , please provide your liquor liability insurance information to the last page of this application.	
		Will items or services be sold at the event? If <b>YES</b> , please describe: Yes, event shirts will be sold by wrestling club	
NO I	YES	Does this event involve a moving route of any kind along streets, sidewalks or highways? If <b>YES</b> attach a detailed map of your proposed route, indicating the direction of travel and provide written narrative to explain your route.	
		Does this event involve a fixed venue site? If <b>YES</b> , attach a detailed site map showing all streets impacted by the event.	
		e route map required above, please attach a diagram showing the overall lay-out and set-up following items:	
	Alcohol	ic and Non-alcoholic Concession and / or Beer Garden Areas.	
	<ul> <li>Food Concession and / or Food Preparation Area(s).</li> <li>Please describe how food will be served at the event:</li> <li>wrestling club will be selling pizza slices and can soda</li> </ul>		
		If you intend to cook food in the event area, please specify the method to be used:	
		GAS ELECTRIC CHARCOAL OTHER (specify):	
	First Aic	Facilities and Ambulance locations.	
	Tables a	ind Chairs.	
	Fencing, Barriers and / or Barricades.		
	Generator Locations and / or Source of Electricity.		
$\triangleright$	Canopie	es or Tent Locations.	

- Booths, Exhibits, Displays or Enclosures.
- Scaffolding, Bleachers, Platforms, Stages, Grandstands or Related Structures.
- Vehicles and / or Trailers.
- Trash Containers and Dumpsters.

(<u>NOTE</u>): You must properly dispose of waste and garbage throughout the term of your event and immediately upon conclusion of the event, the area must be returned to a clean condition.

Number of trash cans: <u>8 on Site</u> Trash Containers w / lids: <u>N/A</u> Describe your plan for clean-up and removal of waste and garbage during and after the event or use of facility: Wrestling club will clean up Square - Square staff will stack garbage bags as usual for city pick up

> Other Related Event Components not covered above.

#### **SAFETY / SECURITY / ACCESSIBILITY**

Please describe your procedures for both **Crowd Control** and **Internal Security**: Outlaw Square Staff will handle security

Please describe your Accessibility Plan for access at your event by individuals with disabilities: Outlaw Square is ADA compatible

REQUIRED: It is the applicant's responsibility to comply with all City, County, State and Federal Disability Access Requirements applicable to this event.

NO	YES	
		Have you hired any Professional Security organization to handle security arrangements for this event? If <b>YES</b> , please list:
Security	/ Organiz	ation:
Security	/ Organiz	ation Address:

(state)

(zip code)

Security Director (Name): \_\_\_\_\_Business phone: \_\_\_\_\_

Is this a night event? If **YES**, please state how the event and surrounding area will be illuminated to ensure the safety of the participants and spectators: Outlaw Square lighting will be used

Please indicate what arrangements you have made for providing First Aid Staffing and Equipment?

Number  $\frac{N/A}{Ambulance(s) - How provided?}$ 

Number NA	Emergency Medical Technicians – How p	rovided?
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APPLICANT specifically acknowledges and agrees that it shall be solely responsible for any damage to personal property located in or stored in or upon DEADWOOD's property pursuant to the activity for which approval is being sought and that DEADWOOD shall not be responsible for any damage or loss to or of APPLICANT's property which results from any cause or reason with regard to personal property owned by APPLICANT stored or located on DEADWOOD's property pursuant to approval of the activity for which approval is being sought herein. Acknowledge acceptance with initial: WM

APPLICANT agrees to hold DEADWOOD harmless and indemnify DEADWOOD from any sums of money which DEADWOOD might have to pay to any person as a result of property damage, personal injury or death resulting from APPLICANT's use of the City property pursuant to approval of the activity for which approval is being sought herein.

Acknowledge acceptance with initial: WM

#### PARKING PLAN / SHUTTLE PLAN / MITIGATION OF IMPACT

Please describe your plans to notify all residents, businesses and churches impacted by the event: Residents and businesses notified through public hearing announcements

Attendees will use Deadwood Public Parking

### **ENTERTAINMENT / ATTRACTIONS / RELATED EVENT ACTIVITIES**

NO	YES			
		Are there any <b>musical entertainment</b> features related to your event or facilities rental? If <b>YES</b> , please state the number of bands and type of music.		
Num	ber of Stag	es: Number of Bands:		
Туре	of Music:			
		Will <b>sound amplification</b> be used? If <u>YES</u> , please indicate: Start Time: <u>12 pm</u> AM / PM – Finish Time: <u>10 pm</u> AM / PM		
		Will <b>sound checks</b> be conducted prior to the event? If <u>YES</u> , please indicate: Start Time:AM / PM – Finish Time:AM / PM		
		Please describe the sound equipment that will be used for your event:		
		Will any fireworks, rockets or other pyrotechnics be used? If <b>YES</b> , please attach a copy of your permit (issued by the State Fire Marshall's office) to this application.		
		Will any signs, banners, decorations or special lighting be used? If <b>YES</b> , please describe:		

# **PROMOTION / ADVERTISING / MARKETING / INTERNET INFORMATION**

NO	YES	
		Will this event be promoted, advertised or marketed in any manner? If <b>YES</b> , please describe: Wrestling club promoting through flyers, social media
		Will there be any live media coverage during your event? If <b>YES</b> , please explain:
		Applicant acknowledges and agrees to allow the City to publish the Contact Person and media referral telephone numbers on the internet in conjunction with the Calendar of Upcoming Events in the City of Deadwood. If you have a home page and want us to link with our Calendar, please provide the Internet address for your homepage:
Refer al	ll event pu	blic inquiries and / or media inquiries for this event to:
NAME:	Mike Sn	eesby PHONE:
		INSURANCE REQUIREMENTS
REQUIR	RED: Insur	ance for your event will be required before final permit approval.
Name o	of Insurand	Hub Insurance Chris Roberts Agent's Name:
Busines	s Phone:	Policy Number: Policy Type:
Address	s:	
		(city) (state) (zip code)

For final permit approval, you will need commercial general liability insurance that names "the City of Deadwood, its officers, employees and agents" as an additional insured. Insurance coverage must be maintained for the duration of the event. To determine the amount of insurance coverage necessary, please contact the Finance Office at (605) 578-2600 – Fax # (605) 578-2084.

The City must be named as an "additional insured." Please obtain the required insurance and mail an original insurance certificate to: <u>City of Deadwood, Finance Office, 102 Sherman Street, Deadwood, SD 57732</u>.

#### LIQUOR LIABILITY INSURANCE

**REQUIRED:** This insurance coverage is required if you are planning to sell alcoholic beverages at your event or facilities rental.

Name of Insurance Company:		_Agent's Name:		
Business Phone:	Policy Number:		_ Policy Typ	e:
Address:		(city)	(state)	(zip code)
Please obtain the required insurance and Office, 102 Sherman Street, Deadwood, Si	•	(= -//	()	· · · · ·

#### **AFFIDAVIT OF APPLICANT**

**ADVANCE CANCELLATION NOTICE REQUIRED:** If this event is cancelled, notify the Deadwood Police Department. Otherwise, City personnel and equipment may be needlessly dispatched.

I certify that the information in the foregoing application is true and correct to the best of my knowledge and belief and that I have read, understand and agree to abide by the rules and regulations governing the proposed Special Event and I understand that this application is made subject to the rules and regulations established by the City Commission of Deadwood. I agree to abide by these rules and further certify that I, on behalf of the organization, am also authorized to commit that organization, and therefore agree to be financially responsible for any cost and fees that may be incurred by or on behalf of the Event to the City of Deadwood.

Name of Applicant (PRINT):	•	Title:
	5/12/2023 Date:	
(Signature of Applicant / Sponsoring Organization)		(Signature of Professional Event Organizer or Renter of City-owned Facilities)