



Special Event Application Application must be submitted, and requirements met three (3) weeks **PRIOR** to the scheduled event.

CITY USE ONLY: PERMIT NO.

Person/Organization that will be present at the Event/Parade

Name:	
Street Address:	
City, State, ZIP	
Contact Phone No .:	

Person/Chair in Charge of Event - <u>NOTE</u>: If applying on behalf of a person or organization, applicant must provide a written statement authorizing the applicant to apply for the permit on the person/organization's behalf.

Name:	
Street Address:	
City, State, ZIP	
Contact Phone No.:	

Availability

Date(s) of the Event/Parade:				
Hours of duration?	Start	A.M. O P.M.O	Finish	A.M. OP.M.O
Detailed Description	of Event/Parade:			
Location to be held (or the route to be trav	eled: the starting n	oint and the termin	nation point.
		cica, the starting p		
On a sife whether the Event/Denede will economy all an apply a particle of the width of any structure to the			of any atracta to	
Specify whether the Event/Parade will occupy all or only a portion of the width of any streets to be used:				
Anticipated Number of Persons:				
Number of Animals:		Type of Ani	mals:	
		•••		
Number of Vehicles:	:	Type of Ver	nicles:	

Location, by Streets of any assembly areas for event, and the time such assembly will begin:

Insurance: Will Alcohol be sold at this event? Yes _____ or No _____

The required insurance must be obtained and attached to this application before permit can be issued.

Vendor agrees to maintain, at their own expense, for the benefit of the City of Lynden, as additional insured, insurance against liability for damage or loss and against liability for personal injury or death, arising from acts or omissions of vendor, its agents, and employees. Such policy or policies shall contain a provision whereby the City of Lynden must receive at least thirty (30) days prior written notice of any cancellation of Vendor's insurance coverage. Prior to the commencement of the Agreement, Vendor shall deliver to the City of Lynden certificates or binders evidencing the existence of the insurance required herein indicating the City as an additional insured. Failure to provide proof of the insurance at any time to the satisfaction of the City of Lynden shall be grounds for termination of this Agreement.

Vendor shall provide insurance coverage in amounts not less than the following:

- a. Combined single limit of one million dollars; or
- b. One million dollars per occurrence/two million dollars aggregate

Annual Permits:

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In order to obtain a reoccurring/annual permit, the applicant must notify the City Administrator in writing no less than sixty days prior to the event. In addition to providing the current date upon which the event will be held, the applicant must inform the City Administrator, on an annual basis, of any changes between the previous year and the current year.

this Event:	One-time Occurrence	O Annual Permit
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Special Event Intake Checklist

When applicable - Attach copies of:	Applicant to Submit	City Received
Special Event Application		

Application Fee

\$25 Upon Submittal	
\$75 Upon Approval	
Site Diagram	
Route Map	
Security Plan (If Applicable)	
City of Lynden Business License	
Fire Department Permit(s)	
Applicable Parks Fee (Varies)	
Right-of-Way / Street Use Permit	
Temporary Structure Permit (Including Inflatable Insurance)	
Proof of Insurance Certificate with Endorsement Naming the City of Lynden as additional insured	
Private Property Event –Letter from property owner acknowledging their approval of the event	
Washington State Liquor Control Board Permit (45 days prior to Event). A copy is required, and the applicant/vendor must display the permit.	
Whatcom County Health Department Food Permit - A copy is not required. The Applicant/vendor must display the permit.	

	For City Use Only-	Applicant Do NOT Complete
Approved	Denied	
Fire Chief Signatu Comments/Requir		Date
	For City Use Only-	Applicant Do NOT Complete
Approved	Denied	
Police Chief Signa Comments/Requir		Date
_		
	For City Use Only-	Applicant Do NOT Complete
Approved	Denied	
Public Works Dep Comments/Requir		Date
	For City Use Only-	Applicant Do NOT Complete
Approved	Denied	
Other Department Signature Comments/Requirements:		Date
	For City Hos Only	Applicant Do NOT Complete
Approved	For City Use Only-	Applicant Do NOT Complete
City Administrator	Signature	Date

CITY OF LYNDEN POLICE DEPARTMENT (360) 354 - 2828



SPECIAL EVENTS FUN RUN SAFETY QUESTIONS

The City of Lynden Police Department is glad to assist you with your event as our workforce and call load allow. There are a few questions that may help you and the city prepare as you organize your event. We would like to ensure that race day goes very smoothly and safely for everyone.

1) If the route crosses another roadway at the beginning or the end of a race, how will traffic be controlled as the distance between stragglers/runners might be extended significantly?

2) How will traffic be controlled as runners cross intersecting roadways?

3) How will runners be instructed to remain out of the roadway, and how will the instruction be enforced?

4) Will there be spotters moving along the route on bikes at the front, and the rear as stragglers begin to spread the field?

5) Will the intersections along the course of the run be staffed with volunteers/flaggers wearing traffic vests?

6) Will there be cones or other delineators marking the course in order to help contain the runners from gradually moving into the roadway?

7) If a roadway contains an "S" curve, runners will commonly try and straighten the curves by crossing the roadway. This obviously becomes a safety concern. How will this issue be addressed?

8) Will there be stations for refreshments as the runners move along the course that may cause a group to form, or become a traffic problem?

We wish you and all the organizers a great race day!