# Special Event application

Event Name *  Colorado Parks and Wildlife 125th Anniversary Softball Tournament
Event contact name *  Kristin Cannon
Event contact email address * kristin.cannon@state.co.us
Event contact phone number * 303-877-6094
The following questions are similar to the questions that were answered in the online "Park rental and Special event request form". Please provide more detail in this application.
Event location  Marvin Park

Ev	on	+ c	+-	rt	4-	1
	eп	LB	ıια	L	uc	110

MM DD YYYY

06 / 07 / 2022

## Event start time

Time

08:00 AM ▼

## Event end date

MM DD YYYY

06 / 07 / 2022

## Event end time

Time

08:00 PM -

# Estimated number of people in attendance

200

# Please provide a short description of the event

Agency softball tournament

O Vaa	
Yes	
No	
Mayb	e
If VES EC	OOD AND SALES TAX LICENSES MUST BE OBTAINED AND POSSIBLY A MULTI
,	PERMIT . Contact the Colorado Department of Revenue for sales tax licenses at
	2-2416, and the Chaffee County Public Health Department for food licenses at (719)
	I. Vendors must have a fire extinguisher on site. Vendor booths are subject to on by the Salida Police and Fire Departments.
Multiple ven	•
County form	
	v.chaffeecounty.org/EndUserFiles/57096.pdf
Will Alcoh	nol be sold or distributed at your event?
Yes	
O No	
O Mayb	e

Liquor License permit is ONLY issued to incorporated non- profit organizations. EVENTS REQUIRING ALCOHOL LICENSES MUST SUBMIT THEIR APPLICATION AT LEAST 90 DAYS IN ADVANCE OF THE EVENT.

https://drive.google.com/file/d/1VGNG7tcBM4NP0KCIJ9hZqqrcvuypjPvu/view?usp=sharing

Will there be amplified sound at your event?
Yes
○ No
O Maybe
If yes, complete the Amplified Sound Permit available At the City Clerk's office.
Are any streets, sidewalks or other right of way closures required for your event?
O Yes
No
O Maybe
If yes, it is your responsibility to circulate and submit a petition signed by abutting residents/merchants as to their support or non-support of the closure.  https://drive.google.com/file/d/1V3xAFRIMqozcGrAQsk9QC3BoCltmeO9V/view?usp=sharing
If yes, please describe the request.

Will you require any security or law enforcement services specific for your event?
○ Yes
No
O Maybe
If yes, for what purpose (security, traffic, parking or public control, Salida Trail System crossings, etc.? .
If additional City of Salida Police Officers are requested, they must be requested through the Salida Police Department (719-539-6880).
Where will people park for your event?
Park parking area, many will carpool
How many additional trash cans are needed for your event?
We can provide our own
Is a quote from a trash service included in your application packet?
○ Yes
No

Is the Emergency Action Plan included in your aplication packet?
<ul><li>Yes</li><li>No</li></ul>
Have you obtained insurance for your event that lists City of Salida as additionally insured?
<ul><li>Yes</li><li>No</li></ul>
Please check that you understand and will adhere to the following requirements:
Please check that you understand and will adhere to the following requirements:  Any violation of the City of Salida Municipal Code or agreements made in the application process are grounds for denial of the Special Events permit in the future.
Any violation of the City of Salida Municipal Code or agreements made in the application process are
Any violation of the City of Salida Municipal Code or agreements made in the application process are grounds for denial of the Special Events permit in the future.  You will be required to have insurance and name the City as an additionally insured party. Because this is often a lengthy process, the City will accept and approve applications pending receipt of proof
Any violation of the City of Salida Municipal Code or agreements made in the application process are grounds for denial of the Special Events permit in the future.  You will be required to have insurance and name the City as an additionally insured party. Because this is often a lengthy process, the City will accept and approve applications pending receipt of proof of insurance.  Applicants are also responsible for meeting any other agency requirements. For example, if you are
Any violation of the City of Salida Municipal Code or agreements made in the application process are grounds for denial of the Special Events permit in the future.  You will be required to have insurance and name the City as an additionally insured party. Because this is often a lengthy process, the City will accept and approve applications pending receipt of proof of insurance.  Applicants are also responsible for meeting any other agency requirements. For example, if you are serving food you must meet all Health Department requirements  Chaffee County Department of Health requires at least one restroom for every fifty people attending

All clean up must be completed within 24 hours after the event concludes. If the City has to clean up

after the event, a fee will be billed to the organizer.

Digital signature:	
Kristin Cannon	

This form was created inside of City of Salida.

Google Forms

DR 8439 (06/28/06)

COLORADO DEPARTMENT OF REVENUE
LIQUOR ENFORCEMENT DIVISION
1375 SHERMAN STREET
DENVER CO. 80261

# **APPLICATION FOR A SPECIAL EVENTS PERMIT**

Department	Hea	Only	,
Department	use	OHIN	,

303) 205-2300														
N ORDER TO QUALIFY FOR A SPECIAL EVENTS PERMIT, YOU MUST BE NONPROFIT AND ONE OF THE FOLLOWING. (See back for details.)  SOCIAL ATHLETIC PHILANTHROPIC INSTITUTION														
FRATERNAL CHARTERED BRANCH, LODGE OR CHAPTER POLITICAL CANDIDATE  PATRIOTIC OF A NATIONAL ORGANIZATION OR SOCIETY MUNICIPALITY OWN NG ARTS  POLITICAL RELIGIOUS INSTITUTION FAC LITIES														
LIAB TYPE OF SPECIA	L EVEI	NT APPLICANT I	S API	PLYING FO	OR:		DO	TON	WRITE	IN 1	THIS	SPACE		
TYPE OF SPECIAL EVENT APPLICANT IS APPLYING FOR:  2110 MALT, VINOUS AND SPIRITUOUS LIQUOR \$25.00 PER D  2170 FERMENTED MALT BEVERAGE (3.2 Beer) \$10.00 PER D									UOR PER					
1. NAME OF APPLICANT ORGANIZATION OR POLITICAL CANDIDATE  Colorado Parks and Wildlife  State Sales Tax Number (Require							ired)							
2. MAILING ADDRESS OF ORG (include street, city/town and 2		ON OR POLITICAL	CANE	DIDATE	T	3. ADDRESS (include stre				AL EVI	ENT			
6060 Broadway Denver, CO 80216					1	//arvin Park Salida, CO								
NAME			DAT	TE OF BIRT	н нс	OME ADDRESS	(Street, C	ity, Stat	te, ZIP)			PHONE N	IUMBEF	٦
4. PRES./SEC'Y OF ORG. or PC	LITICAL	CANDIDATE												
5. EVENT MANAGER Kristin Cannon												303-912-	9044	
Kristin Cannon 303-912-9044  6. HAS APPLICANT ORGANIZATION OR POLITICAL CANDIDATE BEEN ISSUED A SPECIAL EVENT PERMIT THIS CALENDAR YEAR?  7. IS PREMISES NOW LICENSED UNDER STATE LIQUOR OR BEER CODE?  NO YES HOW MANY DAYS?  7 NO YES TO WHOM?							E?							
8. DOES THE APPLICANT HAV	E POSS	ESSION OR WRITT	EN PE	RMISSION	I FOR TH	HE USE OF THE	E PREMIS	ES TO	BE LICENS	ED?	Yes	No No		_
	LIS	T BELOW THE EXA	CT DA	ATE(S) FOR	R WHICH	APPLICATION	I IS BEING	MADE	FOR PERM	ΛIT				
Date 06/07/2022	Date			Date			Date				Date			
Hours From 8:00 a .m. To 8:00 p .m.	Hours	From To	.m. m	Hours F	From To	.m. m	Hours	From		.m. m	Hours	From To		.m. m
OATH OF APPLICANT  I declare under penalty of perjury in the second degree that I have read the foregoing application and all attachments thereto, and that all information therein is true, correct, and complete to the best of my knowledge.														
SIGNATURE NOM OWO				1	TLE Deputy Reg	ional M	anag	er		- 1	05/12/20	22		
REPORT AND APPROVAL OF LOCAL LICENSING AUTHORITY (CITY OR COUNTY)  The foregoing application has been examined and the premises, business conducted and character of the applicant is satisfactory, and we do report that such permit, if granted, will comply with the provisions of Title 12, Article 48, C.R.S., as amended.  THEREFORE, THIS APPLICATION IS APPROVED.							',							
LOCAL LICENSING AUTHORITY (CITY OR COUNTY)  CITY  COUNTY  TELEPHONE NUMBER OF CITY/COUNTY CLERK														
SIGNATURE					T	ITLE						DATE		
DO NOT WRITE IN THIS SPACE - FOR DEPARTMENT OF REVENUE USE ONLY														
LIABILITY INFORMATION														
License Account Number Liability Date					State				Т	ОТА	.L			
						-750	(999)	\$						

# **APPLICATION INFORMATION AND CHECKLIST**

THE FOLLOWING SUPPORTING DOCUMENTS MUST BE ATTACHED TO THIS APPLICATION FOR A PERMIT TO BE ISSUED:						
Appropriate fee.						
Diagram of the area to be licensed (not larger that 8 1/2" X 11" reflecting bars, walls, partitions, ingress, egress and dimensions.						
Note: If the event is to be held outside, please submit evidence of intended control, i.e., fencing, ropes, barriers, etc.						
Copy of deed, lease, or written permission of owner for use of the premises.						
Certificate of good corporate standing (NONPROFIT) issued by Secretary of State within last two years; or						
If not incorporated, a NONPROFIT charter; <b>or</b>						
If a political Candidate, attach copies of reports and statements that were filed with the Secretary of State.						
APPLICATION MUST FIRST BE SUBMITTED TO THE LOCAL LICENSING AUTHORITY (CITY OR COUNTY) AT LEAST THIRTY (30) DAYS PRIOR TO THE EVENT.						
THE PREMISES TO BE LICENSED MUST BE POSTED AT LEAST TEN (10) DAYS BEFORE A HEARING CAN BE HELD. (12-48-106 C.R.S.)						
AN APPROVED APPLICATION MUST BE RECEIVED BY THE LIQUOR ENFORCEMENT DIVISION AT LEAST TEN (10) DAYS PRIOR TO THE EVENT.						
CHECK PAYABLE TO THE COLORADO DEPARTMENT OF REVENUE						
(12-48-102 C.R.S.)						
A Special Event Permit issued under this article may be issued to an organization, whether or not presently licensed under Articles 46 and 47 of this title, which has been incorporated under the laws of this state for the purpose of a social, fraternal, patriotic, political or athletic nature, and not for pecuniary gain or which is a regularly chartered branch, lodge or chapter of a national organization or society organized for such purposes and being non profit in nature, or which is a regularly established religious or philanthropic institution, and to any political candidate who has filed the necessary reports and statements with the Secretary of State pursuant to Article 45 of Title 1, C.R.S. A Special Event permit may be issued to any municipality owning arts facilities at which productions or performances of an artistic or cultural nature are presented for use at such facilities.						
If an event is cancelled, the application fees and the day(s) are forfeited.						

# Salida Special Event Emergency Action Plan

I, the undersigned, agree to comply with the following Emergency Action Plan to the best of my ability. The first person on this list will be the designated Emergency Manager and will take responsibility for public addresses and instruction to the event participants.

Emergency Manager (1 lead, 2 alternates)	Contact info 1	Contact info 2	Signature
1. Kristin Cannon	303-877-6094	303-912-9049	ANXIM Chron
2. Shannon Schaller	303-903-7951		Gannar Schiller
3. Scott Roush	303-204-096	720 557-2884	( Dur Bull
4.			

Please complete the following template according to your Events plan and location.

The following procedures should be followed in the event of an emergency.

#### Communications

- 1. The manager or designee will communicate the designated evacuation space to participants at the beginning of the event.
- 2. The Emergency Manger will communicate to the event participants in an emergency with a
  - ☐ Bull Horn
  - PA system
  - Emergency level voice

#### Fire

- 1. Call 911
- 2. Assist injured or disabled personnel.
- 3. Evacuate the building. Activate emergency shutoffs if available.
- Attempt to use a fire extinguisher only if you have been trained.
- 5. Evacuate participant to

### Medical Emergency

- Identify the medical emergency.
- If life threatening, call 911.
- 3. Administer first aid if properly trained.
- 4. Evacuate the injured person to Heart of the Rockies Regional Medical Center lent incident

  1. Call 911 Violent incident
  - 1. Call 911.
    - 2. Attempt to avoid the situation move participants away
  - 3. Try to deny contact-evacuate to Colorado Parks and wildlife Service Center lock/block doors, turn off lights, silence phones. 7405 us 50 719-530-5520
  - 4. If necessary defend distract, attack, subdue.

#### Severe Weather/Natural incident

- 1. Move participants away from threat if possible.
- 2. Evacuate to lightning vehicles, flooding CPW office of other higher ground

## Urgent Situation (suspicious person, package, activity or bomb threat)

- 1. Call 911.
- 2. State who, what, where, when, why, and how situation occurred.
- 3. If bomb threat, turn off all electronics.

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. It does not amend, extend or alter the coverage afforded below.

#### INSURED

The State of Colorado, its departments, institutions, agencies, boards, officials, employees and authorized volunteers (except all entities of the University of Colorado, CSU-Fort Collins, University of Northern Colorado, Colorado Mesa University, Fort Lewis, Adams State University and Western State Colorado University).

INSURED (Re: certificate) SOURCES OF COVERAGE

Cov A... State Risk Management Office Cov B... State Risk Management Office

Department of Natural Resources Cov B... State Risk Management Office

All coverages are effective continuously per State Law.

#### **COVERAGES**

Self-insured coverages and limits shown on this certificate are those for which the State accepts responsibility pursuant to the Colorado Governmental Immunity, Risk Management, and Workers' Compensation Acts. Notwithstanding any requirement, term or condition of any document to which this certificate may be issued or may pertain, the coverage afforded herein is controlled and limited by the above laws. Commercial coverages are subject to policy terms and conditions.

COV	DESCRIPTION		LIMITS		
A	State Self-Insured Liability Fund		Per CRS 24-30-1510(3)(a)		
В	State Self-Insured Worker Compensation		Standard Limits (State Law)		
	Fund				
PROPE	ERTY LEASES:	This certificate does not apply CRS 24-30-1510(3)e.	to a lease agreement that does not conform strictly to the requirements of		
ADDIT	TIONAL INSUREDS:	The Colorado constitution prol	hibits including certificate holders as additional insureds.		
			provisions only to the extent permitted by Colorado law; including the vernmental Immunity Act, and the Risk Management Act.		

#### **CANCELLATION**

Should any of the above coverage change, the insured State of Colorado will endeavor to mail notice to the certificate holder named, but failure to mail such notice shall impose no obligation or liability of any kind upon the State.

#### **DESCRIPTION OF OPERATIONS** to which this certificate pertains:

Agency softball tournament at Marvin Park in Salida, CO on June 7, 2022.

CERTIFICATE HOLDER	Certificate #:
City of Salida 448 E First Street, Suite 112 Salida, CO 81201	Issue Date: 03/18/22
Attn:	Eileen Taylor
Mike Post	AUTHORIZED REPRESENTATIVE

marvin park - Google Maps

5/12/22, 1:10 PM

https://www.google.com/maps/search/marvin+park/@38.5430022,-105.9973971,437m/data=!3m1!1e3



#### **CITY OF SALIDA**

#### **NOISE PERMIT APPLICATION**

Please fill out the form completely, including by signing and dating the application. Submitting an incomplete application is a basis for denial of a noise permit. Listing a particular type of audio amplification equipment, hours of operation, or any other information below does not guarantee the applicant's right to use such equipment or have an event at a particular time. Whether such application requests have been granted will be indicated in the issued permit.

Applicants may apply for events which are recurring (*i.e.*, live music every Thursday). Any such events should be clearly described as recurring in the event description and should identify all dates on which the event will occur.

Completed applications can be submitted in-person to the City Clerk at 448 E. First Street, Suite 112, or via email to <a href="mailto:clerk@cityofsalida.com">clerk@cityofsalida.com</a>. Applications must be submitted at least five (5) working days prior to the date for which the permit is sought.

# Applicant Name: Applicant Business/Organization: Colorado Parks and Wildlife Applicant Phone: Applicant Email: Applicant Address: 6060 Broadway Sound Supervisor¹:

303-877-6094

#### II. Event Information.

Sound Supervisor Phone:

I. Applicant Information.

Description of Event: Softball Tournament, asking for amplified sound for announcements and music				
Estimated Attendance:	200			
Date(s):	6/7/2022			
Hours of Event:				
Location of Event:				

<sup>&</sup>lt;sup>1</sup> The sound supervisor will be responsible for responding to and immediately addressing noise or other complaints in the absence of the applicant/permittee.



## **III. Noise Information.**

<b>5</b> .	(e.g., live music, parade): ents and recorded music			
Type of Sound Amplification Equipment: blue tooth speakers (not commercial or professional)				
IV. Agreement.				
understand that it i the permit and all I I further agree an immediate revocat applicable laws sha	for this noise permit, I, Kristin Cannon, hereby agree and s my responsibility to ensure compliance with the conditions and limitations set forth in aws, rules, and regulations of the City of Salida, the state, and the federal government. d understand that any violations of the permit or applicable laws may result in the ion of the permit. Violations of the conditions and limitations set forth in the permit or all also be grounds for denial of future permit applications. I further understand and agree application fee are non-refundable and non-transferrable.			
Date:	03/17/2022			
Date.	0			
For use by the Cit	y Clerk only:			
Application fee	received: [ ] Yes			
Signature:				
Date:				



# CITY OF SALIDA NOISE PERMIT

Signature by the City Administrator on this noise permit indicates that the noise permit has been deemed granted to the applicant and the requested noise has been so authorized, subject to the conditions and limitations set forth below. Where the conditions or limitations set forth below contradict or conflict with the information contained in the application, the conditions and limitations will control.

## I. Conditions and Limitations Applicable to All Permits.

The following conditions and limitations are applicable to all noise permits:

- No noise is permitted after 10:00 PM, unless specifically authorized by the City Council following a
  public hearing. No noise is permitted after midnight on the Fridays and Saturdays of Memorial Day
  weekend, 4<sup>th</sup> of July weekend, and Labor Day weekend. No noise is permitted after midnight on
  the Thursday, Friday, and Saturday during the FIBArk festival.
- No noise is authorized in excess of the maximum limit of 85 dB(A), as measured from any point along the property line or within the property line of the receiving premises. Measuring devices shall be those specifically utilized by the City of Salida.
- All amplification equipment shall be arranged so as to minimize the disturbance to neighboring properties, and permittees shall take reasonable measures to baffle or reduce noise impacts to neighbors.
- No outdoor amplified sound shall be permitted between November 1 through May 1.
- A maximum of sixty (60) amplified sound permits may be granted to same location during a single calendar year, unless additional permits are specifically authorized by the City Council following a public hearing.

#### II. Conditions and Limitations Applicable to this Permit.

	ns and limitations are applicable to this holse permit:		
•			
III. Expiration.			
This noise permit is is	sued for the following dates and expires on the following date:		
Date(s):			
Expiration:			
For use by the City A	dministrator only:		
Application grante	d: [ ] Yes [ ] No		
Signature:			
Date:			