



SPECIAL EVENT APPLICATION

CITY OF TOMBALL, TEXAS | 401 Market Street | Tomball, Texas 77375 | 281-351-5484

An application to stage an event within the City of Tomball shall be filed with the Community Events Coordinator at least 180 days prior to the event. This application is not to be construed as authorizing or agreeing to any event until formally approved by Tomball City Council.

Date: 08 April 2022 Is this event Co-City sponsored? Yes ☐ No ☒

Request for permission to use a public venue for the following type of event (please check one):

Festival ☒ Community Event ☐ Arts & Crafts Event ☐ Music Event ☐ Other (specify) ☐

Event title: Fiesta de Tomball

1. Sponsoring entity: Progreso Multicultural Foundation
2. Is this organization based in Tomball: Yes ☒ No ☐
3. Is this organization *non-profit* ☒ or *for-profit* ☐ *Attach 501 (c) (3) tax exemption if applicable
4. Contact: Amy Lopez Phone: 346-322-7663
5. Contact address: 1100 S. Cherry St. Apt 1301 Tomball, Tx 77375
6. Contact email: my2ds1s@gmail.com
7. Event date: 24 September 2022
8. Event times: Start 1100 Finish 1700 Set-up 0800 Breakdown 1800
9. Event location: Tomball Depot
10. Is this event for charity? Yes ☒ No ☐
11. If yes, what charity? Progreso Multicultural Foundation Tax ID
12. If yes, what percentage of net proceeds will be donated to the charity? 10%
13. On-site contact: Amy Lopez Mobile Phone: 346-332-7663
14. Estimated number of attendees: 200+
15. Detailed site map in attached: Yes ☒ No ☐
16. Is this event open to the public: Yes ☒ No ☐
17. Admission fee: \$ Free ☒
18. Time at which event staff will begin to arrive: 0800
19. The applicant will defend and hold harmless the City of Tomball from all claims, demands, actions or causes of action, of whatsoever nature or character, arising out of or by reason of the conduct of the activity authorized by such application including attorney fees and expenses.
Initial AL
20. The applicant will provide proof of general liability insurance for the event naming the City of Tomball as additional insured.
Initial AL
21. Name of insurance carrier: Kaiff Insurance
22. Organization has secured date with the Public Works Dept. and has paid deposit.

Signature: 

FOR OFFICIAL USE - Fee required: Yes ☐ No ☐

Amount Due: \$

Special Events Liability Insurance

Form fields not fillable? [Download Adobe Acrobat Reader](#)

Please complete the following application. As special events vary, some questions may not be applicable. Please indicate "N/A" where necessary.

General Information

Please print or type

Name of Applicant

Amy Lopez

Phone Number

346-332-7663

Email Address

my2ds1s@gmail.com

Dates and Times of Event

24 September 2022 1100-1700

Set Up/Tear Down Dates and Times if Different

0800-1800

Name of Event

Tomball Latino Festival

Location of Event

Tomball Depot
201 South Elm,
Tomball, TX 77375

Does the Facility Carry Liability Insurance?

☐ YES ☐ NO

Estimated Daily Attendance

200+

Estimated Total Gross Receipts (\$)

\$1000+

Detailed Description of Event Including list of activities and attractions

Coverage desired (choose all that apply)

☒ General Liability ☒ Liquor Liability ☒ Accident Coverage ☒ Excess Liability

Total Liability Limits Required (excluding liquor liability)

Per Occurrence

General Aggregate

To Be Completed if Event Includes Alcohol

Is Alcohol to be Sold at this Event? ☒ YES ☐ NO

Does Applicant (Insured) have a valid liquor license or permit? ☐ YES ☒ NO
(Note: If yes, a copy will be requested to have on file)

Have all servers and bartenders completed a certified alcohol training course/alcohol awareness program such as TIPS, TAMS or other state accepted courses? ☒ YES ☐ NO

Estimated Number of Attendees Consuming Alcohol Daily 100+

Is Applicant the Sole Vendor of Alcohol at the Event? ☐ YES ☒ NO

If No, Please List Number of Vendors Serving Alcohol

NONPROFIT INFORMATION			
1. Type of Organization:	<input type="checkbox"/> Fraternal	<input type="checkbox"/> Religious	<input type="checkbox"/> Charitable
	<input type="checkbox"/> Nonprofit Historic Preservation	<input type="checkbox"/> Civic	<input type="checkbox"/> Political Party/Association
	<input checked="" type="checkbox"/> Nonprofit Corporation <input type="checkbox"/> Candidate/Officeholder		
2. Organization/Corporation/Candidate Name: Progreso Multicultural Foundation			
3. Federal Employer's ID# (FEIN):			
TEMPORARY EVENT INFORMATION			
4. Event Dates and Times (Dates and times must include delivery and/or storage of alcohol.)			
Start Date: 24 Sept 2022 Time: 1100 AM <input checked="" type="checkbox"/> PM <input type="checkbox"/> End Date: 24 Sept 2022 Time: 1700 AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>			
5. Type of Event (festival, picnic): Festival			
6. Event Address Street #:		Street Name:	
201		South Elm	
City:		County:	Zip Code:
Tomball		Harris	77375
7. Description of Event Location: (Ex: parking lot, north side of park, booth no., etc. Note: Submit site map.) Tomball Depot			
8. Does this event involve a promoter or an organizer?			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If "YES," Name of promoter or primary organizer: _____			
9. Does this event involve sponsorship from a license/permit holder?			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If "YES," enter license/permit number and tradename: _____			
License/Permit # _____ Trade Name: _____			
10. Other than the permission to sell alcohol on this property (question 13), do you have any other contracts and/or agreements (either verbal or in writing) associated with this event, such as sponsorship and/or third-party agreements? If "YES," attach copy, as applicable.			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
11. By checking "Yes" you confirm the event location address is wet for the sale of alcoholic beverages for which you are applying for in this application. This must be confirmed with the County Clerk.			<input type="checkbox"/> Yes
12. By checking "Yes" you confirm you have obtained all necessary authorizations from your municipality and county that may be required for your event.			<input type="checkbox"/> Yes
13. By checking "Yes" you have obtained permission to sell/serve alcohol from the owner of premise and have attached a copy from property owner.			<input type="checkbox"/> Yes
If "YES," attach copy.			
IF THIS EVENT IS AT A LOCATION WITH A PENDING ORIGINAL APPLICATION THAT IS REQUIRED TO POST A 60-DAY SIGN, STOP. CONTACT YOUR LOCAL TABC OFFICE.			
CONTACT INFORMATION			
By signing below, you affirm, and represent to TABC, that the above information is true and correct, and that you have the legal authority to request the privilege identified in this application on behalf of the organization named in this application.			
14. Name of Contact for this Application:		Position/Title:	
Amy Lopez		Founder/President	
Contact Phone No.:		Contact Email Address:	
346-332-7663		my2ds1s@gmail.com	
Mailing Address:		City:	County:
1100 S. Cherry St. Apt 1301		Tomball	Harris
			Zip Code:
			77375
WARNING: Section 101.69 of the Texas Alcoholic Beverage Code states: "...a person who makes a false statement or false representation in an application for a permit or license or in a statement, report, or other instrument to be filed with the Commission and required to be sworn commits an offense punishable by imprisonment in the Texas Department of Criminal Justice for not less than 2 nor more than 10 years."			
I, <u>Amy Lopez</u> swear that I have legal authorization to apply for and receive this permit.			
Print Name			
SIGN HERE		TITLE Founder and President of Progreso Multicultural Foundation	
Before me, the undersigned authority, on this _____ day of _____, 20____, the person whose name is signed to the foregoing application personally appeared and, duly sworn by me, states under oath that he or she has read the said application and that all the facts therein set forth are true and correct.			
SIGN HERE		SEAL	
NOTARY PUBLIC			