



Special Event Application

Name of Event _____

Type of Event _____

Event Description, be specific; attach additional pages if needed:

Date of Event _____ Start Time _____ am/pm End Time _____ am/pm

Location of Event (be specific) _____
(Attach a map showing location and/or route)

Number of participants expected _____

Name of Organization _____

Contact Person _____ Title _____

Address _____

City _____ State _____ ZIP _____

Home Phone (_____) _____ Work Phone (_____) _____

Cell Phone (_____) _____ Fax (_____) _____

Email Address _____



Please answer each of the following questions.

1. Community event on public property? Yes No
If yes, you must complete attachment A
2. Event using Clearfield City parks or trails or adjacent parking lots Yes No
If yes, you must complete attachment B
3. Event involving more than 50 participants on private property Yes No
If yes, you must complete attachment A and attachment D
4. Event is a level 2 or 3 as defined in the Special Events Policy Yes No
If yes, you must complete attachment C in addition to any other(s) listed above

Complete the appropriate supplemental forms based on the type and scope of your event.

The undersigned acknowledges that the information in this application is true and correct and agrees to adhere to all rules, regulations, and policies established by Clearfield City Corporation. Applicant also understands that an Event Permit does not authorize any violation of the provisions of Clearfield City Code or any other code or law, rules, regulations or ordinances. The undersigned agrees to waive and release all rights and claims that might be had against Clearfield City facilities or services.

Signature of Applicant _____ Date _____

Please print and mail or hand deliver the application and all attachments to:

Clearfield Community Services Department
55 South State Street, Clearfield, Utah 84015

Fax to 801-525-2863

Email to recdesk@clearfieldcity.org

**Advertising and/or ticket sales should not begin until application is approved.
Allow 30 days for application and approval process.**

Payment must be received before application will be processed. Include a check, payable to Clearfield City, with your application. Or you may call Clearfield Community Services at 801-525-2790 to pay with a credit card.



Attachment A: Community Event

Attach a detailed map of the location showing where activities will take place.

Will this event interfere with or interrupt pedestrian traffic? Yes No

Will this event interfere with or interrupt vehicle traffic? Yes No

Will this event require closing a street? Yes No

Road closure requires the applicant to rent barricades. Please show proposed barricade location on the map.

Will this event involve music or other amplified sound? Yes No

If yes, please describe the source of music or amplification: _____

Will you be serving and/or selling food or drinks? Yes No

If yes, appropriate permits must be obtained, even if you are a caterer or operator/owner of a restaurant.

Please note: Clearfield City has a contract with Pepsi which does not allow non-Pepsi products to be sold or advertised in our parks.

Will you be serving and/or selling beer or alcohol? Yes No

If yes, appropriate permits must be obtained, even if you are a caterer or operator/owner of a restaurant.

Will any funds or proceeds be collected from this event? Yes No

If yes, will a fee or donation be charged for admission? Yes No Fee or donation amount \$ _____

What will the proceeds be used for? _____

If yes, will products be sold at the event? Yes No

Products to be sold _____

If yes, does your organization have an IRS 501(c)3 or similar designation? Yes No

If yes, will any of your proceeds benefit a charitable/non-profit organization? Yes No

Please name the charity or non-profit _____

Will sales tax be collected? Yes No

If yes, you must get a temporary sales tax number from the State Tax Commission, or fill out a TC69B if using a current sales tax number and file with the City.

Are you expecting more than 50 participants? Yes No

If yes, you must contact the North Davis Fire District for an on-site inspection.

Are you expecting more than 500 participants? Yes No

Events with over 500 participants will require a mass gathering permit. For more information, please contact the Davis County Health Department at 801-525-5000.

Will a tent(s) be used for this event? Yes No

If yes, you must contact the North Davis Fire District to obtain a Tent Permit.

Will there be use of any open flame devices or use of pyrotechnic special effects material? Yes No

If yes, you must contact the North Davis Fire District.

Please provide additional information about the event and include any services requested from the Parks (electrical power, water, stage, sound system, garbage cans, etc.), Police, Fire, Public Works, or other City departments. Attach additional pages if necessary.



Attachment B: Park or Trail Use

Park or trail area requested _____

Pavilion(s) needed _____

Attach a detailed map of activities and their specific locations.

Will this event involve music or other amplified sound? Yes No

If yes, please describe the source of music or amplification: _____

Will you be serving and/or selling food or drinks? Yes No

If yes, will the food be served by a caterer? Yes No

If yes, will the food be cooked on site? Yes No

Please note: Clearfield City has a contract with Pepsi which does not allow non-Pepsi products to be sold or advertised in our parks.

Will any funds or proceeds be collected from this event? Yes No

If yes, will a fee or donation be charged for admission? Yes No Fee or donation amount \$ _____

If yes, will products be sold at the event? Yes No

Products to be sold _____

If yes, does your organization have an IRS 501(c)3 or similar designation? Yes No

If yes, will any of your proceeds benefit a charitable/non-profit organization? Yes No

Please name the charity or non-profit _____

Will you be bringing in or setting up any special equipment?

Bounce house or inflatables Yes No

Tent or shading awnings Yes No

Booths Yes No

Dunk tank Yes No

Carnival games Yes No

Other _____

Please provide additional information about the event and include any services requested from the Parks (electrical power, water, stage, sound system, garbage cans, etc.), Police, Fire, Public Works, or other City departments. Attach additional pages if necessary.



Attachment C: Insurance Requirements for Event Levels 2 & 3

For all level 2 and level 3 events, the City requires event insurance. The applicant must execute an indemnification agreement prepared by the Legal Department and signed by applicant.

Level 2 Event: Contractors, subcontractors, vendors shall be required to have liability limits of at least \$1,000,000 per Occurrence and \$2,000,000 Aggregate for Premises & Operations, Products and Completed Operations, Personal and Advertising Injury. There shall also be at least \$5,000 for Medical Payments to Others. Clearfield City must be named as an additional insured limit naming Clearfield City, its officers, employees and volunteers as additional insureds. The certificate must also state that coverage will not be cancelled without ten days prior written notice to the City. ***Level 2 events including the use of inflatable bounce houses or other similar equipment will be subject to the same insurance requirements as a level 3 event.***

Level 3 event: A certificate of insurance with coverage of at least \$2 million per occurrence with a \$3 million aggregate limit naming Clearfield City, its officers, employees and volunteers as additional insureds. The certificate must also state that coverage will not be cancelled without ten days prior written notice to the City.

Signature _____ Date _____



Attachment D: Property Owner Authorization

Property Owner Name _____ Phone _____

Property Owner Home Address _____ Phone _____

Property Address _____

Name of Event Organization _____ Date _____

Representative/Manager _____ Title _____

Address _____ City _____ State _____ ZIP _____

Work Phone(____) _____ Home/Cell Phone(____) _____

Event Description _____

Dates Approved: Start _____ End _____

Time Frame: Start _____ End _____

No. of Attendees Authorized _____

Additional Information _____

As the above listed property owner, I hereby give my permission for the event listed above to be held at the above address during the listed dates and times.

I acknowledge that the information given is true and correct and agree to adhere to all rules, regulations, and policies established by Clearfield City Corporation. The undersigned agrees to waive and release all rights and claims that might be had against Clearfield City Corporation for any and all injuries or losses suffered because of participation in or use of Clearfield City facilities or services.

Signature _____

Date _____