



**Community Services Department**  
 815 Mission St., South Pasadena, CA 91030  
 Phone: (626) 403-7380  
 Email: [specialevents@southpasadenaca.gov](mailto:specialevents@southpasadenaca.gov)

# SPECIAL EVENT APPLICATION

This application must be submitted for any special event held within the City. All co-sponsorships and special events are subject to approval by the City of South Pasadena and/or City Council. The action to approve an event will state conditions which must be met for the event to be held. Application must be submitted at least 3 months (90 days) prior to event date.

## SPECIAL EVENT CRITERIA CHECKLIST

Please check if you are seeking a Co-Sponsored or Special Event:

- Co-Sponsorship (may include fee reduction/waiver)
- Special Event

Proposed Co-Sponsorship applications must meet the following criteria:

- Applicant must show proof of 501(c)3 non-profit status from the IRS with an EIN.
- Applicant/organization must be based in the City of South Pasadena and hold a current business license. All vendors must hold current business license.
- Applicant's event must be open to all South Pasadena residents.
- Applicant's event must be a benefit to the South Pasadena community.
- Applicant must complete a Special Events Application and submit all supporting documentation.
- Special Events Application must be submitted to the Community Services Department by email to [specialevents@southpasadenaca.gov](mailto:specialevents@southpasadenaca.gov)

Please fill in the information below and answer all areas as thoroughly as possible. If the information does not pertain to your event, indicate *not applicable (N/A)*.

## EVENT INFORMATION

<b>Name of Event:</b>			
<b>Type of Event:</b>			
<b>Date of Event:</b>	<input type="checkbox"/> New Event	<input type="checkbox"/> Returning Event; # of years offered:	
<b>Proposed Set-Up Time:</b>		<b>Proposed Break-Down Time:</b>	
<b>Proposed Start Time:</b>		<b>Proposed End Time:</b>	
<b>Requested Location(s):</b>			

### ORGANIZATION CONTACT INFORMATION

<b>Organization Name:</b>					
<b>Contact Person Name:</b>					
<b>Street Address:</b>		<b>City:</b>		<b>Zip Code:</b>	
<b>Day Phone:</b>		<b>Evening Phone:</b>		<b>Cell Phone:</b>	
<b>Email:</b>					
<b>Alt. Contact Name:</b>				<b>Phone:</b>	

### ADDITIONAL INFORMATION

<b>Who is the target audience for the activity?</b>				
<b>Estimated Attendance:</b>				
<b>Will any fees be associated with the event?</b>	<input type="checkbox"/> Yes	If so, what fees will be charged?		<input type="checkbox"/> No
<b>Will fees be collected at the event?</b>	<input type="checkbox"/> Yes	Who will the proceeds benefit?		<input type="checkbox"/> No
<b>Will alcohol be served at the event?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<b>Will alcohol be sold at the event?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No

**ALCOHOL:** City Ordinance allows liquor on premises under special conditions. If selling alcohol, the organization is required to obtain an license by calling the Department of Alcoholic Beverage Control (ABC) and must provide a copy.

### FACILITY & PARK USE

**If requesting to use a park site or facility, please indicate the location:**

<b>Park:</b>	<input type="checkbox"/> Arroyo Park	<input type="checkbox"/> Eddie Park	<input type="checkbox"/> Garfield Park	<input type="checkbox"/> Orange Grove Park
	<input type="checkbox"/> Library Park	<input type="checkbox"/> Oak Lawn Park	<input type="checkbox"/> Skate Park	<input type="checkbox"/> Arroyo Seco Golf Course
<b>Facility:</b>	<input type="checkbox"/> Eddie Park House	<input type="checkbox"/> Garfield Youth House	<input type="checkbox"/> Senior Center	<input type="checkbox"/> War Memorial Building
	<input type="checkbox"/> Community Room* Note: For use of the Community Room, contact Library Administration at 626-403-7330			
<b>Green Space:</b>	Use of City greenspaces, i.e. Parks, Medians, or other areas may require irrigation equipment to be shut off during your event.			
	Please indicate here if you are requesting the use of a greenspace or if your event is adjacent to a City greenspace. <input type="checkbox"/>			

If not using any park or facility listed, please indicate the specific area of use:

**VEHICLES ON PARK GROUNDS**

*Vehicles, including catering vehicles, are not permitted to drive or park on public park grounds due to extensive underground irrigation systems that sustain damage when vehicles drive across control boxes and sprinkler heads.*

Are you requesting that vehicles be permitted to drive or park on public park grounds?  Yes  No

If yes, please attach a copy of a valid CA Driver's License and proof of Auto Insurance.

If yes, please indicate the type(s) of vehicles and the locations and times they would be driven or parked:

**PORTABLE RESTROOMS**

*Vehicles, including catering vehicles, are not permitted to drive or park on public park grounds due to extensive underground irrigation systems that sustain damage when vehicles drive across control boxes and sprinkler heads. Additional insurance will be required.*

Will additional portable restrooms be brought to the event site?  Yes  No

If yes, please indicate the Company Name and information below:

Company Name:		Phone Number:	
# of Restrooms:		# of ADA Restrooms:	
Drop-off Time:		Pick-up Time:	

**ASSEMBLIES, DEMONSTRATIONS, MARCHES, AND/OR PARADES**

Will your event feature an assembly, demonstration, march, and/or parade?  Yes  No

Will the assembly, demonstration, march, and/or parade be mobile or stationary?  Mobile  Stationary

If mobile, please indicate the route:

Please identify the cause for the assembly, demonstration, march, and/or parade:

Will the event feature music and/or sound amplification?  Yes  No

### EVENT SITE

A map of the event site is **REQUIRED** and should indicate the event layout with recommended street closures, parade or run/walk routes, etc. Please draw your map in the space provided below or attach your map to the application.

### STREET USE PERMIT / BLOCK PARTY

Are you requesting any public streets to be closed for the event?  Yes  No

If yes, identify the streets/blocks and indicate the times the closure is requested:

<b>Start Time:</b>		<b>End Time:</b>	
<b>Location:</b>			
<b>Description:</b>			

Will your event require bins and roll-off containers?  Yes  No

**NOTE:** The City of South Pasadena has an exclusive agreement with Athens Services for refuse removal, as such if your event requires the use of a container you **MUST** use Athens Services. \*\*Applicant is required to rent or purchase all street closure materials and execute pre-approved street closure and traffic plan.

### STREET BANNERS

Are you requesting the use of a street banner for the event?  Yes  No

<b>Date of Event:</b>	
<b>Site Priority: Prioritize sites 1-4 with 1 being the first location</b>	
Fair Oaks @ Grevelia _____	Mission @ Fremont _____
Fair Oaks @ El Centro _____	Mission @ Meridian _____

**NOTE:** The City of South Pasadena **MUST** review street banners prior to printing to ensure compliance with City branding guidelines.

### TENT PERMIT

Will your event use canopies, EZ-ups, or any large tents?  Yes  No

<b>If yes, please indicate the number of canopies/EZ-ups (10'x10' or smaller):</b>	
<b>If yes, please indicate the number of large tents (larger than 10'x10'):</b>	

### FOOD VENDORS

**Applicant is required to contact Los Angeles County Public Health Department in advance of their event for required permits and guidelines. The applicant shall obtain copies of temporary food service licenses from food vendors prior to the event. In addition, all vendors selling food or other products must have a City of South Pasadena Business License. Additional Insurance will be required.**

<b>Will food be served at the event?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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<b>If yes, the food is:</b>	<input type="checkbox"/> Provided Free	<input type="checkbox"/> Cooked or Prepared On-Site	<input type="checkbox"/> Cooked on an Open Flame* (Barbeque)
	<input type="checkbox"/> Available for Purchase		

<b>Please provide a menu of the food your event will be serving:</b>	
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<b>Are you requesting approval to offer other items for sale at the event?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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<b>If yes, please indicate the items for sale:</b>	
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**NOTE: All persons or companies conducting business within the city limits of South Pasadena are required to obtain a City business license. This includes but is not limited to retailers, wholesalers, manufacturers, service providers, professionals, non-profit organizations, independent contractors, home businesses, food vendors, etc.**

### NON-FOOD VENDORS

<b>Do you possess a City of South Pasadena Business License?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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<b>Are you requesting approval to offer other items for sale at the event?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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<b>If yes, please indicate the items for sale:</b>	
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**NOTE: All persons or companies conducting business within the city limits of South Pasadena are required to obtain a City business license. This includes but is not limited to retailers, wholesalers, manufacturers, service providers, professionals, non-profit organizations, independent contractors, home businesses, food vendors, etc.**

### BUSINESS LICENSE

<b>Do you possess a City of South Pasadena Business License?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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**NOTE: All persons or companies conducting business within the city limits of South Pasadena are required to obtain a City business license. This includes but is not limited to retailers, wholesalers, manufacturers, service providers, professionals, non-profit organizations, independent contractors, home businesses, food vendors, etc.**

### PROOF OF NON-PROFIT STATUS

<b>Do you possess proof of non-profit status?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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<b>Employer ID Number (EIN):</b>	
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**NOTE: All organizations must present a *letter* from the Internal Revenue Service indicating exemption from Federal Income Tax as described in Internal Revenue Code Section 501(c)(3).**

## BOUNCE HOUSE / INFLATABLES

Will your event require a bounce house or an inflatable?

Yes

No

Please provide the name of the company where you are renting the bounce house or inflatable.

Address:

Phone:

**NOTE:** All additional vendors or subcontractors must present the organization a certificate of insurance naming the City of South Pasadena additional Insured with a minimum amount of \$2 million per occurrence and \$4 million aggregate along with Automobile liability and endorsements. Additional limits may be required.

When turning in your application, you must:

- Complete the application. Incomplete applications will not be accepted and will delay processing, which may affect the availability of the event date and or location.
- Applications accepted a minimum of 3 months (90 days) prior to the event and no more than eighteen (18) months in advance of the event date.
- Upon submission of the application a review process will be initiated. A team comprised of a representative from City Departments will review the application. You may be asked to submit additional supporting documentation to your application due to unique or changing circumstances related to the event.
- After the review process and the event is approved, the applicant will be issued a Conditions of Approval for the event. The conditions of approval issued by the City of South Pasadena is valid only for the venue area(s) and event activities including set-up and tear-down, depicted on your site plan described in the application.
- Failure to comply with the Conditions of Approval, may result in the immediate cancellation of the event or denial of future applications.

If the applicant has multiple vendors, the applicant shall act as the coordinator between the City and the vendors. The applicant will provide the City with a list of vendors that will participate in the event, a copy of the certificate of insurance, and the business license for each vendor.

Applicant must present a copy of the insurance to the City with a certificate of insurance naming the City of South Pasadena additional insured with a minimum amount of \$2 million per occurrence and \$4 million aggregate along with Automobile liability and endorsements. Additional limits may be required.

**PLEASE NOTE:** All applicants will be notified by the Community Services Department regarding the status of the application upon the conclusion of the review period by City Departments.

Applicant Signature:

X

Date:

Applicant's Name:

Title: