VILLAGE OF SUTTONS BAY
Ordinance No. 5 of 2017

420 N Front Street, P.O. Box 395
Suttons Bay, Michigan 49682

(231) 271-3051, Fax (231)-271-5904
suttonsbay@suttonsbayvillage.org

$50.00 Application Fee

Event Insurance: Use of Public Property requires liability insurance consisting of: Public Liability Insurance with limits of not less than $1,000,000 and, Property Damage Insurance with a limit of not less than $50,000 from a company authorized to do business in Michigan.

Please complete this application to reserve your date and receive a Mass Gathering license for your special event. If the application is not approved, the applicant will be notified by phone.

APPLICANT INFORMATION

Title of Event: ____________________________________________

Date(s) of Event: __________________________________________

Proposed Location of Event ___________________________________

Number of People expected to attend the event: __________________

Type of Event: _____________________________________________

Describe in detail the activities planned: _________________________

__________________________________________________________

APPLICANT

Name of Applicant: _________________________________________

Address: _________________________________________________

Phone #: ___________________ Email: _________________________

SPONSOR

Sponsoring Organization: _________________________________

Contact Name: __________________________________________

Address: _______________________________________________

Phone #: ___________________ Email: _________________________
SCHEDULE

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EVENT DETAILS

Please provide on a separate sheet of paper, a complete disclosure and description of the following:

1. Will alcohol be sold or provided? Yes No
   Description of any beverages to be provided or sold to public.

2. Will food or merchandise to be sold or provided? Yes No
   Description of food or merchandise to be provided or sold to public.

3. Procedures to manage parking, traffic, road closures, and circulation expectations for pedestrians and vehicles. Yes No
   Provide details of anticipated procedures and process.

4. Do you plan to have sound amplification? Yes No
   Provide description.

5. Are there sanitation requirements? Yes No
   Procedures and facilities to manage sanitation.

6. Is electrical power required? Yes No
   Describe power requirements and how power is to be provided.

7. Will any type of tent(s) or structure be setup or installed? Yes No
   Provide layout and description.

ADDITIONAL REQUIREMENTS

Miss Dig: You may be required to contact MISS DIG no less than 1 week prior to event. Failure to do so could result in license being withdrawn and cancellation/postponement of event. 1-800-482-7171

Clean Up: Licensees are responsible for cleaning and restoring the site after the event. The cost of any employee overtime incurred because of licensee’s failure to clean and/or restore the site following the event will be borne by the licensee.
SITE PLAN

Please provide a detailed site plan that includes the following:

1. Area/land layout
2. Required staging areas for event(s)
3. Parking areas
4. Vehicle and pedestrian circulation routes/travel lanes
5. Street, sidewalk, pathways, closure/reroutes (include sign requirements)
6. Location of all entrances and exits
7. Sanitation – Restroom facilities area locations
8. Solid waste disposal locations
9. Location of food and water facilities
10. Temporary fencing locations
11. Primary locations for Police, Security, Fire, Medical, Emergency and their staging locations
12. Event/tent, or temporary structure locations, as applicable
13. Event coordinators location

AFFIDAVIT OF APPLICATION

As the applicant, I hereby agree to abide by the terms set forth in this application and the Ordinances of the Village of Suttons Bay. I understand the failure to do so may lead to the cancellation of the event, or the denial of a future license. I certify that the information contained in the foregoing application is true and correct to the best of my knowledge and belief and I have read, understand, and agree to abide by the rules and regulations established by the Village Council and/or Village Manager.

_____ Yes, I agree to the above terms  _____ No, I do not agree to the above terms

I declare under penalty of perjury that the information provided in this application is correct.

Signature Applicant: ___________________________ Date: ______________

*For Office Use Only*

Date Received ______________ Fee Paid___________ Ck. #___________

Application Complete _____ Site Plan Provided _____ Date __________________

Reviews Completed ______ Hold Harmless Signed____ Expiration Date __________

License Approved: YES  NO  LICENSE NUMBER#________________________

Village Official Signature_________________________ Date: ______________

Additional Conditions of Approval: (attach conditions of approval)
HOLD HARMLESS AGREEMENT

This special event applicant or designees of the sponsoring organization(s) (hereafter called “licensee”) agrees to reimburse the Village of Suttons Bay (hereinafter called “Village”) for all loss incurred by it in repairing or replacing damage to Village property proximately caused by the licensee, its officers, employee, agents, monitors, or any other persons attending or forming the special event who were, or should have been, under the licensee’s control. Persons who merely attend or join in a special event are not considered by that reason alone to be “under the control” of the licensee.

The licensee further agrees to defend without costs, indemnify, and hold harmless the Village, its officers, agents, and employees from any liability to any persons, damages, losses, or injuries arising out of or alleged to arise out of the licensed event, which was proximately caused by the actions of the licensee, its officers, employees, agents, including monitors, or any other persons attending or joining in the event who were, or reasonably should have been under the control of the licensee. Persons who merely attend or join in an event are not considered by that reason alone to be “under the control” of the licensee.

I understand and agree to comply with all terms of the above Hold Harmless Agreement if my application has been approved and all special conditions and required advance payment have been met.

Signature of Applicant(s) ____________________________ Date________________

Signature of Officer Sponsoring Organization
__________________________________________ Date: _______________

Title: ___________________________________________