Riverfront Park Permit Application



☐ Short-Term Concessions

RETURN COMPLETED FORM TO:

EVENT INFORMATION

City of Salem, Public Works Department
555 Liberty Street SE Room 100
Salem OR 97301-3513
503-588-6261 (Monday-Friday, 8 a.m.-5 p.m.) • Fax: 503-584-4680
parksandrecreation@cityofsalem.net • After hours/weekend contact: 503-588-6311

Type of Event	☐ Company Picnic	☐ Product Fair	☐ Community Cele	ebration/Festival
☐ Run/Walk	☐ Concert	☐ Other (Specify))	
Event Name		· · · · · · · · · · · · · · · · · · ·		
Set-up Start Time		. ☐ a.m. ☐ p.m. Cle	an-up End Time	□ a.m. □ p.m
Event Hours		□ a.m. □ p.m. to		□ a.m. □ p.m
Area(s) of Park Red	ุ uested (see map on page	four) 🗆 Amphitheate	er □ North Meadow	☐ South Meadow
	☐ Boat Dock Over	look □ Boat Dock	☐ Pavilion	☐ Parking Lot
Describe Your Ever	nt Set-up:			
Depending on scop	e of event, ancillary pe	ermits may be require	ed (fees may apply):	
☐ Alcohol	☐ Amusement Rid	es	sure Fireworks	☐ Sound Permit

HOLD HARMLESS / AFFIDAVIT OF APPLICANT

□ Tents/Canopies

I certify that the information contained in this application is true and correct to the best of my knowledge and belief, that I have read, understand and agree to abide by the rules and regulations governing the proposed special event policy. I agree to abide by these rules, and further certify that I, on behalf of the sponsor, am also authorized to commit the sponsor, and therefor agree to be financially responsible for any cost and fees that may be incurred by or on behalf of the event to the City of Salem.

☐ Irrigation Locate

I agree, on behalf of the sponsor, to defend, indemnify and hold harmless the City of Salem, its employees, agents, officers and volunteers from any and all claims, damages, losses, and expenses, including legal fees arising from or in connection with activities during the special event.

I further agree to promptly reimburse the City of Salem for any clean-up, loss or damage to city property resulting from this issue.

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Applicant														
				(Plea	se Pr	int)								
Signature							Date							

☐ Photography

EVENT AMENITIES

Yes	No		Yes	No	
		Food will be served			Admission fees/donations will be collected
		Food will be sold (Short-term Concessionaire Permit Required)			Event will be advertised to the general public
		Non food items will be sold (Short-term Concessionaire Permit Required)			Access to potable water needed
		Tents and/or canopies will be erected (Irrigation locate and/or Fire Department permit may be required)			Vehicle access to turf areas will be necessary (Irrigation locate required)
		Access to park electricity will be needed			Alcohol will be served/sold
		Amplified sound will be used (Sound permit required)			Special services (security, traffic control, etc.) will be needed

NOTE: Some ancillary permits and fees may apply.

ENTERTAINMENT / ATTRACTIONS / RELATED EVENT ACTIVITIES

Are there any entertainm amusement rides, inflatal	ent features related to your e ble play structures, etc.)?	event? If so, what are they (e.g., live music,
•	pe used? If yes, please indica		□ a.m. □ p.m.
Have you completed a so	ound permit application? ☐ Y	es □ No	
SPECIAL SERVICE	PROVIDERS		
Special Services	Name of Provider	Name of Contact	Phone Number
Caterers			
Sound Production			
Tents/Canopies			
Private Security Services	<u> </u>		
Insurance Carrier			
Chemical Toilet Provider			
Amusement Rides, Inflata Structures, etc.	able		
Garbage Service Provide	er		
Lighting and Electrical Services Provider			
INSURANCE REQU	JIREMENTS		
Insurance which shows \$2 r	ay be required with this applicat million in commercial general lial s, employees, agents, and volun	bility insurance and a policy e	ndorsement which names
APPLICANT AND S	PONSORING ORGAN	IIZATION	
Primary Contact Person			
Sponsoring Organization			
Applicant Mailing Addres	s		
City	State	Zip	
Day/Work Phone	Ph	one	
Contact Person "On Site"	Day(s) of Event		
		Works Compliance Services	

