

**City of Shreveport
Special Permit Application
City Parks (Simple)**

(1) This application must be COMPLETED and forwarded to the SPAR office forty-five (45) calendar days prior to the 1st day of the event.

***Submission of this application does not confirm event. The Event Task Force must review & approve the COMPLETED event application.**

SPAR Event Services
RE: Special Events Application
101 Crockett St, Suite A (The Depot)
Shreveport, LA 71101

email: SPAR_Event_Services@shreveportla.gov
call: (318) 673-5100
or fax: (318) 673-5105

(2) Once the event has been approved, **NO CHANGES** may be made in the plans without Task Force **APPROVAL**.

(3) No advertisement or invitations for the event may be made without Task Force **APPROVAL**.

Any misrepresentation in this application or deviation from the final agreed upon activities and/or method of operation described herein may result in the immediate revocation of the permit and/or cancellation of the event. If you have any questions, please call (318) 673-5100.

PLEASE SIGN AND DATE ON THE LINES BELOW INDICATING THAT YOU UNDERSTAND AND WILL ABIDE BY THE ABOVE REGULATIONS. THANK YOU.

Name

Date

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EVENT INFORMATION

Public (anyone is invited) Private (select group of people invited)

Requested Event Day & Dates: _____

Location of Event: (Select ALL that apply)

Park: _____ Outside of Community Center: _____

NO ADMISSION FEES ARE ALLOWED IN CITY PARKS

NO ALCOHOL ALLOWED IN CITY PARKS WITHOUT LEGISLATION AND PERMITS

Estimated Total Attendance _____ Past Total Attendance _____

Age Range of Attendees: _____

Type of Event: _____

Title of the Event: _____

Applicant's Name: _____ Title: _____

Producing Organization (If Applicable) _____

**Must match the insurance certificate

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone: Day _____ Evening: _____ Cell: _____ Fax: _____

Email Address: _____

Event Coordinator (If Different from Applicant :) _____

What time frame is your event?

Set Up/ Load In: Start Time _____ – End Time _____

Event Time: Start Time _____ – End Time _____

Gates Open to Public for the Event at _____

Break Down/ Load Out: Start Time _____ – End Time _____

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SET-UP PLAN (DIAGRAM):

The set-up plan (Diagram) for the event must be submitted with the application in full and include the following information:

Will vehicles be used in the decorations? Yes Describe No

Will you be using tents? Yes No

Private Pop Up tents? Yes No

OR Contracted tent company? Yes No

Name of company _____ *Must provide fire retardant certificate

Electrical Details:

Using existing electrical outlets Generator

Requesting a City Electrician on site to tie in vendors, etc

*The event organizer will be responsible for paying for a City Electrician.

Staging/Sound Contractor: _____ Not Applicable

Contact Name: _____ Phone Number: _____

Please provide detailed entertainment lineup. *Loud Noise permit may be required*****

DJ: _____ Live Band: _____

Other Entertainment (i.e. Carnival rides, sporting activities, bounce houses, etc.)

_____ **(Attach detailed description)**

****NO SUBSTITUTIONS OR CHANGES** to Live Entertainment Groups are allowed without approval of The Event Task Force.

Will there be Fireworks? Yes No

Date and Time of Fireworks: _____

Contact Name, Phone No. & Address: _____

State Fire Marshall Permit No (please attach copy): _____

Concessions or Food Vendors including Food Trucks (Please make sure each food vendor has a certificate of liability insurance)

NO ALCOHOL IS ALLOWED AT CITY PARKS WITHOUT SPECIAL PERMISSION.

Describe each vendor (attach additional sheet if necessary)

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TRASH DETAIL:

The event organizer is responsible for discarding trash created by your event. A trash plan is required, to include how the trash will be discarded from site.

COST ASSOCIATED WITH EVENT WILL BE BILLED TO APPLICANT / PRODUCING ORGANIZATION

All costs associated with your event including electrician, trash removal, event clean up including bathrooms, by SPAR employees, will be the responsibility of the event applicant. An estimate of the cost will be made available before the contract is signed. Call Event Services for estimates at (318) 673-5100.

Damage to City Property will be assessed and billed accordingly.

SAFETY PROCEDURES

The cost of security is the responsibility of the applicant. The number and type will be determined by the Chief of Police or his designee. A labor cost will be provided by the Shreveport Police Department by calling (318) 673-6945 or (318) 673-6946. The requirements of having EMS (318) 673-6720 or Fire Prevention (318) 673-6740 on site will be evaluated and made on the basis of each event by the City of Shreveport Task Force Committee.

Applicant is responsible for contacting the Shreveport Police Department and/or the Shreveport Fire Department at least two (2) weeks prior to the event.

ADVERTISING EVENTS ON CITY PROPERTY

Please provide a copy of all advertising, programs, invitations, etc

No advertisement or invitations for the event may be made without **PRIOR APPROVAL** from the Task Force.

Please describe the type of promotion you will be using:

TV Radio Poster Billboard City Calendar Flyer Newspaper Invitations

Website: _____

Social Media: _____ Other: _____

Contact name & phone number to be used for public information:

PARKING PLANS

A parking plan is required with each permit. Parking is limited at each park and cannot be blocked from the public.

Where are the overflow cars going to park? What are you publicizing for overflow parking? Please submit advertisement of overflow parking.

Please submit a flyer that is placed at the neighbor's door regarding overflow cars being parked on the street. With the flyer, must include your public phone number as well as SPAR Event Services (318) 673-5100 for complaints.

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INSURANCE REQUIREMENTS (if required):

For the application to be approved, the applicant must submit a City-Approved Certificate of Liability Insurance naming the City of Shreveport as the additional insured. The Certificate must have the City of Shreveport as the certificate holder. **The Insured must match the Producing Organization or Applicant's Name and information.** The Certificate of insurance must be submitted with this permit application. The time limit on the policy must include set-up and take-down times, as well as the time of the event. The beginning of the set-up is to include deliveries prior to the event date, such as tents, flowers, decorations, portable toilets, etc. User's insurance is to be written by companies licensed to do business in the State of Louisiana at the time the policies are issued and should be written by companies with A.M. Best ratings of B+VII or better. The Applicant will, at his/her own expense, provide and maintain certain insurance in full force and effect at all times during the term of the agreement. Such insurance, at a minimum, must include the following coverage's and limits of liability.

- a) **Commercial General Liability Insurance (CGL)** in the amount not less than a combined single amount (each occurrence) of \$1,000,000 (One Million) and a general aggregate of \$2,000,000 (Two Million). The policy should be endorsed to name the City and the property owner as additional insured. The policy should contain the following endorsements in favor of the Owner:
 - a. **Waiver of Subrogation Endorsement**
 - b. **Thirty (30) day notice of Cancellation Endorsement**
 - c. **Additional Insured Endorsement Naming City of Shreveport**
- b) The CGL policy must be endorsed to remove the liquor liability exclusion contained in the policy if the contractor intends to allow the sale, serving, or consumption of alcoholic beverages at the event. Host Liquor Liability is required if not already in the policy.
- c) Insurance types, limits, & prices are subject to change, depending on the type of event.
- d) **Worker's Compensation Insurance** as required by laws of the State of Louisiana and Employer's Liability Insurance in a minimum amount of \$1,000,000 (one million). The policy should contain the following endorsements in favor of the Owner:
 - a. **Waiver of Subrogation Endorsement**
 - b. **Thirty (30) day notice of Cancellation Endorsement**
 - c. **Additional Insured Endorsement Naming City of Shreveport**
- e) **Business Automobile Liability Coverage** will protect against all claims for bodily injury or property damage, covering all owned, non-owned, and hired vehicles used in connection with the work including loading and unloading with minimum limits of \$100,000 (One Hundred Thousand) per person and \$300,000 (Three Hundred Thousand) per accident. The policy should contain the following endorsements in favor of the Owner:
 - a. **Waiver of Subrogation Endorsement**
 - b. **Thirty (30) day notice of Cancellation Endorsement**
 - c. **Additional Insured Endorsement Naming City of Shreveport**
- f) **NO SUBSTITUTIONS OR CHANGES TO INSURANCE REQUIREMENTS WILL BE ALLOWED UNLESS APPROVED BY THE CITY OF SHREVEPORT, RISK MANAGER.**
Current Risk Manager: Evelyn Kelly, (318) 673-5540.

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HOLD HARMLESS CLAUSE

Applicants (Organizations/Applicant) will indemnify, defend and hold harmless the City of Shreveport, its agents, its employees and authorized volunteers from and against all claims, damages, losses and expenses, including attorney's fees, arising out of the permitted activity or conduct of permittee's operation of the event if such claim (1) is attributable to personal injury, bodily injury, disease or death or injury to or destruction of property, including the loss of uses there from and (2) is not caused by any negligent act or omission of willful misconduct of the City of Shreveport or its employees acting within the scope of their employment.

APPLICANT STATEMENT

I, the undersigned, do attest that the information provided is true and correct to the best of my knowledge. If any part of this application IS NOT TRUE, then the application WILL BE REJECTED and/or the contract WILL BE VOIDED. I understand that it is my responsibility to ensure compliance with the following:

- a) The observance of all applicable laws and ordinances
- b) Any stipulations or restrictions of the permit
- c) The applicant will assume any and all liabilities that may arise by the permitted activity
- d) Applicant will notify the Division Manager of Event Services, (Catherine Kennedy) or designee, in writing if any of the information given in this application changes **ten (10) days prior to the first day of the event.**

Signature of Person Requesting Permit

FOR OFFICE USE ONLY:			
EVENT TASK FORCE	DATE	APPROVED BY:	Notes:
Traffic Engineering			
Sportran			
Shreveport Police			
Shreveport Fire Prevention			
Shreveport Fire/EMS			
Risk Management			
SPAR Maintenance			
SPAR Event Coordinator			
Division Manager			
Notes: SPAR Recreation has been notified <input type="checkbox"/> Yes (attach email) <input type="checkbox"/> No			