

Sierra District Special Event Permit Application



Instructions: To apply for a Special Event Permit, complete this form and submit with signatures, any supplemental documents, and a check or money order made payable to California State Parks to cover the required filing fee to the Special Event office. Additional forms, terms and conditions, and list of required fees will follow.

APPLICANT/ORGANIZATION		CONTACT PERSON						
ADDRESS		E-MAIL ADDRESS						
CITY/STATE/ZIP	CITY/STATE/ZIP			PRIMARY PHONE CELL PHONE				
LOCATION								
□ Burton Creek State Park □ Donner M	Iemorial State Park] Media Ro	oom- Donner	r Memoria	al State Park Visitor Center			
Donner Memorial Day Use Group Area	$\square Kings Beach S$	tate Recreat	tion Area					
□ Plaza-Kings Beach State Recreation Ar	rea 🛛 North Tahoe E	Beach Pavili	on					
🗆 Plumas-Eureka State Park 🛛 Histori	c Johnsville Ski Bowl -	- Plumas-Eu	ıreka State P	Park				
SPECIFIC USE			DATES					
ARRIVAL/SET-UP TIME	EVENT TIME	TIME			CLEAN-UP/TEAR-DOWN TIME			
2. SPECIFIC PARK AREA/FACILITY TO BE USED (List all areas of the park that may be utilized for the event or outing):								
3. MAXIMUM NUMBER OF PEOPLE EXPECTED TO ATTEND THE EVENT (The State may limit the maximum attendance within its discretion):								
4. PARKING: (Circle one) Guests pay at arrival : YES NO Pre-Pay for Guests : YES NO Parking Fees Waived # of Vehicles Pre-Pay								
5. PLEASE CHECK ALL THAT APPLY:								
□ Alcohol will be used or sold during the event								
□ Participant fees (beyond regular facility fees) will be charged for the event.								
□ Merchandise/Items will be sold at the event								
SPECIAL EVENT OFFICE ONLY:								

FOR RESERVATION OFFICE ONLY (USE BLUE INK)								
TOTAL PERMIT FEES	DATE RECEIVED	CHECK #	Permit Copy Distributed to Staff					
			∐ Plac	eed on Master Calendar				
REVIEWED AND RECOMM	ENDED BY			DATE				
TITLE				PHONE 520 550 6165				
Special Event Cod	ordinator			530-550-6165 CITY, STATE, ZIP CODE				
12593 Donner Pas	ss P d			Truckee, CA 96161				
	55 Ku.							
APPROVED BY	~~ "			DATE				
Michael Romin	gel stor Superintendent)			PHONE				
Supervising Rang				530-550-6162				
Supervising Rung	,01			550 550 0102				
SITE MAP ATTACHED				EMPLOYEE (S) ASSIGNED				
🗌 Yes 🗌 Not Appli								
NECESSARY PERMITS ATT	ACHED			EMPLOYEE (S) ASSIGNED				
🗆 Yes 🛛 Not Appli	cable							
KIOSK NOTIFIED				EMPLOYEE (S) ASSIGNED				
□ Yes □ Not Appli								
SAMPLE OF PARKING PERI	MIT ATTACHED	EMPLOYEE(S) ASSIGNED						
□ Yes □ Not Appli								
RANGER/LAW ENFORCEM	ENT NOTIFIED	EMPLOYEE ASSIGNED						
🗌 Yes 🗌 Not Appli								
LIFEGUARD STAFF NOTIFI	ED			EMPLOYEE(S) ASSIGNED				
🗌 Yes 🗌 Not Appli	cable							
MAINTENANCE NOTIFIED		EMPLOYEE(S) ASSIGNED						
□ Yes □ Not Appli								
CHEMICAL TOILET ARRIV	AL DATE / RETRIEVAL DA	COMPANY & CONTACT INFO						
🗌 Yes 🗌 Not Appli								
DUMPSTER ARRIVAL DAT	E / RETRIEVAL DATE	COMPANY & CONTACT INFO						
□ Yes □ Not Appli								
TABLE AND CHAIR ARRIV		COMPANY & CONTACT INFO						
□ Yes □ Not Appli	cable							
FIREWOOD DELIVERY		EMPLOYEE ASSIGNED						
🗆 Yes 🛛 Not Appli	cable							



Sierra District Special Event Permit Questionnaire

INSTRUCTIONS: Complete the following questionnaire to the best of your ability. California State Parks reserves the right to require specific amenities and services to be provided by the Applicant regardless of the answers provided below.

Name of event as advertised:

Name of event manager: _____

Yes	No							
0	0	Is the event open to the public? If yes, the Applicant must attach a list of expected total attendance number per day						
0	0	Will the event be marketed, promoted, or advertised in any manner? If yes, please provide method of advertisement, media coverage, and copies of flyers, posters, etc.						
0	0	Will the Applicant be notifying local businesses or property owners of the event?						
0	0	Are patron admission, entry or participant fees required to enter or participate in the event? If yes, please provide the amount of each fee collected from spectators or participants:						
0	0	Are vendor fees or other fees required? If yes, please list other fees:						
0	0	Will items or services be sold at the event? If yes, please list items or services to be sold:						
0	0	Will alcohol be available on event premises?						
		If yes, has an ABC Permit been obtained for the event?	Circle One	Yes	No			
		If yes, will the alcohol be sold or be free to those participants or Spectators over the age of 21 years?	Circle One	Sold	Free			
0	0	 Will the event include food concession and/or preparation areas? If yes, please describe how the food will be prepared: Circle all that apply: Pre-packaged Gas Charcoal Electric Other 						
0	0	Will there be amplified sound associated with the event?						
0	0	Will there be live music, amplified or otherwise associated with the event?						
		If yes, please provide the number of bands or performers expected:						
		If yes, The Applicant must also provide a list of bands and performers sche	eduled to play	y at the	event			
0	0	Does the event provide an established area for dancing to either live or recorded music?						
		Will the event include any type of games or athletic activities? If yes, please describe all details:						
0	0	Will the event have any temporary structures including canopies, tents, fencing, etc. erected during the event?						
0	0	Will the event erect any arches, platforms, stages, or scaffolding? If yes, please list including sizes:						
0	0	Will inflatable(s), hot air balloons, unmanned aircraft (drones)* or similar devices be used during the event? If yes, please list type and dates to be used:						

Yes	No	
0	0	Does the event include the use of fireworks, rockets, lasers, or other forms of pyrotechnics? If yes, please list type and amount:
0	0	Will the event include any self-contained fires; including bonfires, BBQs, or open flame cooking? If yes, please list type and amount:
0	0	Will the event include any heating devices? If yes, please list size and amount:
0	0	Will the Applicant hire a licensed and professional security company to develop and manage the security needs of the event? (Note: State Parks maintains the right to require security for any event) **
0	0	Will the Applicant hire an emergency medical services provider to develop and manage the medical needs of the event? (Note: State Parks maintains the right to require medical services for any event) **
0	0	Will the event involve any type of aquatic activity? If yes, the Applicant is required to attach an aquatic safety plan and appropriate contact information.
0	0	Will attendance or the event area impact parking or normal visitor use in a manner not usually permitted?
0	0	Will attendance or the event area impact any State Park owned roadways, walkways or accesses?
0	0	Will attendance or the event area impact any private, municipal, or state streets or roadways adjacent to the park utilized for the event?
		If yes, it is the responsibility of the Applicant to contact and secure permits from the affected agencies. A copy of each permit shall be attached to the final signed permit.
0	0	Will the event require traffic control or traffic safety equipment? If yes, please provide traffic control plan including safety equipment.
0	0	Will the event require special parking and/or shuttle plan? If yes, please list special parking needs and/or provide shuttle plan.
0	0	 Will the event require signage or banners to be used? If yes, please provide copy of signage/banner and demonstrate where signage will be placed on site map.
0	0	Will the event provide additional restroom facilities for event spectators, participants, and vendors? (Note: State Parks maintains the right to require additional services for any event)
0	0	Will the event provide additional dumpsters or refuse collections containers during the event? (Note: State Parks maintains the right to require additional services for any event)
0	0	Will the event necessitate the need for additional disabled parking?
0	0	If all areas of the event venue cannot be made accessible, will maps or programs be made available to show the location of accessible restrooms, parking, access routes and the like?
0	0	Will the event require exclusive use of an area?

Please list guaranteed fees to be paid to the California State Parks. (permit fee, facility-use fee, etc.)

Method of garbage collection and disposal.

List all organizations/third parties involved.	(ex: sp	onsors, j	party rentals,	caterers,	promotional	firms,	etc.)	Please
attach copies of estimates and invoices.								

Detailed description of event and site plan. If site plan will not fit, please attach separately:

*Please note, if requesting the use of an unmanned aircraft at your event, additional applications and permits will be required.

** If Security and/or Medical Services are required for your event, please provide detailed contact information.

I have read and accept the Special Event Terms and Conditions attached. I understand that the District Superintendent or authorized representative may terminate, without prior notice, any special event activity when it is necessary for the safety and enjoyment of the public, for the protection of the resources, or for violation of any rules or regulations of the Department of Parks and Recreation or conditions of this permit. I also understand that any Special Event Permit may be cancelled without notice in the event of disaster or unforeseen emergency.

Signature

Date

For questions or additional information: Special Events Phone: (530) 550-6165 NorthTahoe.SpecialEvents@parks.ca.gov

Please mail all forms, documents, checks and/or money orders to:

California State Parks 12593 Donner Pass Road Truckee CA 96161 ATTN: Special Events Office Revised 9/27/2016