



Special Event Permit

For

_____ County Park

Clatsop County, Parks Division (with the Fisheries Project)
2001 Marine Drive Ste 253, Astoria, Oregon 97103
Phone: (503) 325-6452, Fax (503) 325-2753

Application and Fees are due at least 30 days in advance of the date of the proposed event.

Application Fee \$100.00

Name of Event: _____

Type of Event: _____

Date(s) of Event: _____

Applicant:	_____	_____
	Name	Phone

	Address	

Sponsor:	_____	_____
	Name	Phone

	Address	

Sponsor:	_____	_____
	Name	Phone

	Address	

Event Chairman:	_____ () _____	
	Name	Phone

	Address	

Groups anticipating 100 or more attending will:

1. *Provide at their expense and arrangement a minimum of a three-yard dumpster on site.
(Listed in the phone book under Garbage)*
2. *Provide at their expense and arrangement a minimum of 2 chemical toilets on site.
(Listed in the phone book under Toilets)*
3. *Provide a sufficient number and schedule of full-day parking attendants.*

Please allow these vendors two weeks notice prior to your event.

Number of Event Participants _____ Number of Vehicles: _____

Anticipated Public Attendance: _____ Number of Vehicles: _____

Sanitary facilities will be provided by: _____

Trash removal will be provided by: _____

How will crowd control be handled? : _____

How will parking control be handled? : _____

How & where will signage be handled? : _____

Name of concessionaire: _____

Goods/Services to be sold at event: _____

If alcohol is to be sold at event, an OLCC Permit is required. Permit number: _____
(Attach Copy Of Permit.)

Does this organization have prior experience for this type of activity? : _____

If yes, please explain your experience, including references _____

Any other efforts that will be made to reduce or minimize the dangers and hazards to public health, safety, tranquility and welfare (such as Noise Control, First Aid, Law Enforcement, etc)? : _____

Picnic Shelter Rental: _____

Additional costs for County Services, if any: _____

Total Fee for this permit: (including \$100 application fee) _____

Force Majeure: Neither Clatsop County Parks nor Applicant shall be held responsible for delay or cancelation of special event permit caused by fire, riot, acts of God or war where such cause was beyond the parties' reasonable control. This shall also include local or global pandemics or localized outbreaks from COVID-19 or any other related contagious illnesses.

Insurance: Single Limit policy amounts of \$2,000,000 naming County as an additional insured.
A Certificate of Insurance MUST accompany this application.

Indemnity: By signing this permit, Applicant agrees to assume the defense of and indemnify and save harmless the County, its Commissioners, Boards, officers, employees and agents, from all suits, actions, damages or claims to which the County may be subjected of any kind of nature whatsoever resulting from, caused by, arising out of or as a consequence of such special events and the activities permitted in connection therewith and Applicant agrees to comply with Clatsop County Ordinance Requiring a Permit for Special Events in County Parks.

Applicant: _____ Date: _____

For County: _____ Date: _____