

# SPECIAL EVENT APPLICATION

200 N. 12th Street • West Columbia, SC 29169 • (803) 791-1880 ext. \*279 Submit application to events@westcolumbiasc.gov 60 days prior to event date. Annual events require application be submitted 4 months prior to event date.

West Columbia Amphitheater rentals may confirm date availability with the Events Coordinator at contact information above before submitting application.

#### **GENERAL INFORMATION**

APPLICATION DATE:	EVENT DATE(S):	
NAME OF APPLICANT*: *Applicant is person w	ho is directly responsible for the event and wh	o will sign the application
SPONSORING GROUP:		
	CHARITABLE/NON-PROFIT ORGANIZATION	
RELATION TO SPONSORING GROUP (i	f applicable):	
ADDRESS:	CITY:	STATE ZIP:
HOME/MOBILE PHONE:	WORK PHONE:	
E-MAIL:		
Is the event location on Public or Private F	_	Private Property
Will your event be held at the West Colum	nbia Riverwalk and Amphitheater?	ES 🗖 NO
TYPE AND DESCRIPTION OF	SPECIAL EVENT	
TYPE OF EVENT: Check the type of eve	ent you plan to hold.	de, Procession or March  Private Party
Bike or Wheeled Race Foot Race	e or Walk Commercial Film or Photograph	nic Activities INeighborhood Block Party
Please provide a brief description and pur	pose of the Special Event:	
Mark with an " <b>X</b> " all components of the ev		
Admission Fee Ele Alcohol Fire Amplified Sound Foc Animals Bleachers Live	ctricity Needed Parking eworks Portable Restroom od Vendors Pyrotechnics atables/Jump Castle Retail Vendors e Music Road Closure Itiple Days Security	ms Signs and Banners Stage Tents or Canopies Traffic Control Water/River

	Estimated Attendance:	Total:	Participants:	Spectators:	Volunteers:
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#### **EVENT SET UP AND TEAR DOWN** Tear Down End Time: \_\_\_\_\_ Set Up Start Time: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_ Set Up Start Time: \_\_\_\_\_ Tear Down End Time: \_\_\_\_\_ Set Up Start Time: \_\_\_\_\_ Tear Down End Time: \_\_\_\_\_ Date: \_\_\_\_\_ Set Up Start Time: \_\_\_\_\_ Date: \_\_\_\_\_ Tear Down End Time: \_\_\_\_\_ Set Up Start Time: \_\_\_\_\_ Date: \_\_\_\_\_ Tear Down End Time: \_\_\_\_\_ Set Up Start Time: \_\_\_\_\_ Tear Down End Time: Date: Set Up Start Time: \_\_\_\_\_ Tear Down End Time: \_\_\_\_\_ Date: \_\_\_\_\_ Date: Set Up Start Time: \_\_\_\_\_ Tear Down End Time: \_\_\_\_\_

## WEST COLUMBIA AMPHITHEATER RENTAL

RENTAL TYPE:

without power\* \$ 250.00 /day OR with power\* \$ 300.00 /day \*These are minimum amounts. Fees may increase due to size and scope of event.

## **INSURANCE REQUIREMENTS**

All events on City property are required to provide a Certificate of Insurance naming the City as additionally insured. Alcohol and food vendors participating in the event are required to provide them as well.

#### **GENERAL VENDORS**

- Commercial General Liability Policy adding the City of West Columbia as "additionally insured" on your insurance policy, with one million dollars per occurrence.
- The Certificate of Insurance or Evidence of Certificate of Insurance must be emailed to events@westcolumbiasc.gov directly from your insurance provider with the EVENT NAME listed as a description of the event.

#### FOOD & BEVERAGE VENDORS

- General Liability with Completed Operations for Food Borne Illness Coverage Policy adding the City of West Columbia, as "additionally insured" on your insurance policy, with one million dollars per occurrence.
- The Certificate of Insurance or Evidence of Certificate of Insurance must be emailed to events@westcolumbiasc.gov directly
  from your insurance provider with the EVENT NAME listed as a description of the event.
- Beer/Wine/Alcohol sales require a Liquor Alcohol Beverage Insurance Certificate adding the City of West Columbia as "additionally insured" on your insurance policy, with one million dollars per occurrence.

I understand I am responsible for providing a COI and notifying my food and beverage vendors. I understand my application will not be approved if I do not meet these requirements.

**Applicant Initials** 

## ZONING

PRESENT USE OF PROPERTY: Number and types of business uses \_\_\_\_\_

SIGNS: Size and number of signs for the event \_\_\_\_\_\_



**YES** 

EVENT NAME:\_\_

## VENDORS

#### Does the Special Event include retail or food vendors?

Please note that any business selling prepared foods and beverages is required to collect the City of West Columbia's 2% hospitality tax from patrons purchasing the products and remit the tax to the City of West Columbia.

Forms and ordinances for the Business License and Hospitality Tax may be found on the City of West Columbia website www. westcolumbiasc.gov. If you have any questions, you may call (803) 791-1880 ext. 285.

Sale of alcoholic beverages requires an ABL-900 Temporary License from the SC Department of Revenue's Alcoholic Licensing Beverage Division. The serving of alcoholic beverages may of alcoholic beverages require an ABL-900 Temporary License from the SC Department of Revenue's Alcoholic Licensing Beverage Division. Go to www.sctax.org and select the Beer-Liquor-Wine-Bingo heading on the left side of the homepage. Select Forms. Select Alcohol Beverage Licensing and scroll to ABL-900.

Preparation and sale of food requires contacting the SC Dept. of Health and Environmental Control at (803) 909-7379 or visit their website at http://www.scdhec.gov/food.

Please use the chart below to list each vendor, type, and if food related, cooking method and disposal. **TYPES : A—Alcohol FT—Food Truck FC—Food Cart R—Retail E—Entertainment ER—Equipment Rental** All types of vendors are required to have a West Columbia Business License and insurance. See Special Events Policy and Procedure Manual for other requirements. Attach additional sheet if needed.

VENDOR	ТҮРЕ	DESCRIPTION	CONTACT



# SITE PLAN

Provide a site plan sketch of the Special Event. Note the location of entrances and exits, retail, food, and alcoholic beverage vendors, controlled alcohol consumption areas, tents, stages, bleachers, amplified sound, signs or banners, portable restrooms, electric and water hookups, first aid stations, fire extinguishers, garbage and recycling receptacles, barricades, and hazardous materials.



# TRAFFIC CONTROL AND PARKING PLAN

Please provide a Traffic Control Plan to be approved by the Police Department. Include the information below as well as any additional information that may apply to the event:

The proposed route to be traveled, including the starting and finishing points.

Clarify the direction the event will move.

A routing plan for traffic, including roads requesting be closed to vehicular and other traffic during the event. Include contact arrangements/plans to resolve potential conflicts with people trying to access residences, businesses, churches, public facilities, and public transportation or other situations that will be affected by the event.

Proposed locations for barricades, signs, and volunteers. This portion of your Traffic Control Plan, with the assistance of City of West Columbia officials, will be reviewed for approval after initial submission of the application.

The Police Department will determine the timeline for the closure of all venues. A minimum of a 12-foot wide emergency access lane is required throughout the event site. Therefore, no permanent structures or fixed objects may be erected along this route. The event must maintain pedestrian access on the public sidewalks. The City of West Columbia Police Department has final discretion over the Traffic Control Plan, including but not limited to the placement and number of all barricades and signs.

TRAFFIC CONTROL PLAN—Parking & Traffic Information

Parade, Procession or March Run/Walk Bike/Wheeled Race Other					
Start Location: Finish Location:					
Estimated # of Participants:	Estimated	d # of Vehicles:			
PARKING - On street/spaces available?					
PARKING - Off street/spaces available?	# of spaces:	🗖 No:			
Will a shuttle service be provided for attendees? Yes No Note: Fire hydrants cannot be blocked during a Special Event. TRAFFIC CONTROL PLAN—Road Closures Schedule					
Will the event require road closures and/or barricades? Yes No If yes, please complete the road closure schedule below. Does the event restrict access to any private or public parking lots? Yes No If yes, the applicant must provide a signed letter of notification to all residential and commercial impacted parties of an extended road closure before the special event permit will be issued.					
ROAD CLOSURE/STREET NAME	FROM	ТО	DATE	TIME	



# TRAFFIC CONTROL AND PARKING PLAN

Provide a sketch of the event's anticipated parking and exit plan. Note the location of all entrance/exit/start/stop locations, parking lots, garages, spaces, etc. Sketch should be provided by the party responsible for parking. Include a brief explanation of parking scenario on the sketch. If needed, use the back or attach a separate page.



ALCOHOL	
Does the Special Event include alcoholic beverages? (If held at West Columbia Riverwalk there is a \$100 fee per day and it is non-refundab Days x \$ 100.00 per day - \$	□Yes □No ble.)
Will alcoholic beverages be served without charge? Will alcoholic beverages be sold? What type of alcohol will be served and consumed? Who will be serving the alcohol? N/A Volunteers Caterer Licensed Bar List designated areas where alcohol will be served and consumed:	
Times for alcohol to be served*: Start: Finish: □N/A	
*Please note that all alcohol service must end 20 minutes prior to the Special Event ending time.	
<ul> <li>In order to be placed on the Council's agenda to request permission to sell/serve alcoholic beverages requirements for being placed on the Council's agenda as set forth by ordinance. You must be preserve aconsumption of alcoholic beverages.</li> <li>Council meets on the first Tuesday of the month. (unless it falls on a holiday)</li> <li>ABL-900 Temporary License from the SC Department of Revenue Alcoholic Beverage Licensing Divis</li> <li>Liquor (Alcoholic) Legal Liability Insurance: If the City of West Columbia grants permission to sell/ser must obtain liquor (alcoholic) legal liability coverage. The liquor (alcoholic) legal liability insurance car purchased separately with the City of West Columbia named as the Certificate Holder. The minimum with a minimum aggregate limit of \$1,000,000.</li> <li>You must hire law enforcement from the West Columbia Police Department for all alcohol-related ever application fee. This requires you or your organization to sign the Memorandum of Understanding.</li> <li>You will be contacted by West Columbia Police Department prior to the approval of this application. If your event will not be approved.</li> <li>No person less than 21 years of age may possess and/or consume alcoholic beverages in any area of The person signing the application must be present and sober during the entire event.</li> <li>Permittee will be confined to the area specified .</li> <li>Guests cannot become intoxicated on City property/premises.</li> <li>If a caterer is used to dispense alcohol, the caterer must have all required permits and/or licenses. In insurance.</li> <li>Non-alcoholic beverages must be made readily available throughout the duration of the event and at Glass is not permitted in West Columbia parks</li> <li>The City of West Columbia reserves the right to revoke a permit to hold an event or disallow the serv notice.</li> </ul>	ent at the Council meeting to petition Council for the ision is required before being put on Council's agenda. rve alcoholic beverages at the event, then the Applicant n be endorsed to the general liability insurance policy or acceptable limit of liability is \$1,000,000 per occurrence ents for an additional fee, which is in addition to the if you do not return the call or make contact with them, of the park. med and/or dispersed under this permit.
alcoholic beverages. I am hereby requesting that the City Clerk place my event on the Council Council to sell and/or consume alcoholic beverages at my event. I understand I will be contact meeting and I must confirm in writing that I will attend the Council meeting. I understand that n Memorandum of Understanding has been fully executed and fees have been paid.	il agenda for the next available date for approval by ted via email as to the date and time of the Council



# SAFETY AND SECURITY

The Special Event Applicant shall be required to provide adequate security for the Special Event as directed by the Chief of Police. Are off-duty Police Officers required/requested for this event? (Required for outdoor alcohol events.)					
Primary Contact for West Columbia Police Department (if different from a	applicant):				
Name: N	Mobile:				
FIRE SAFETY INFORMATION					
Will the Special Event have any hazardous or flammable materials, such tanks? Yes No If yes, please describe:					
Note: Fire hydrants cannot be blocked during a Special Event. Pyrotechnics	es and fireworks are not allowed except as written by ordinance.				
EMERGENCY MEDICAL SERVICES					
Will first aid kits be available during the Special Event?	Yes No				
Will West Columbia Fire & EMS Services be required?	Yes No				
Will West Columbia Fire Swift Water Rescue Services be required?	Yes No				

Times of Operation:

Note: This type of support will be mandated on a case-by-case basis. If there is a river event, Swift Water Rescue will be required.

# TENTS, STAGES, AND INFLATABLES

Please see Special Events Policy and Procedure Manual for requirements regarding the tents, stages, and inflatables.

Will tents or canopies be used during the Special Event?	Yes No
If yes, list number, types, and sizes of tents/canopies:	
Will Inflatables (i.e. jump castles) be used during the Special Event?	Yes No
If yes, list number, type, size, square footage and, location:	
Will stage(s) be used during the Special Event?	Yes No
If yes, list number, type, size, square footage and, location:	



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EVENT NAME:				
AMPLIFIED SOUND				
AMPLIFIED SOUND				
Will the Special Event have amplified music	or sound:		Yes	□No
Please describe type of sound and start and	finish times:			
PORTABLE RESTROOMS AND	SINKS			
RESTROOM FACILITIES				
Do you plan to provide portable restrooms fa	acilities at your Specia	al Event?	Yes	□No
While there are three public restrooms locate portable restrooms may be required. Genera 300. If additional restrooms are needed, all p Supply companies are not allowed to drive of available throughout the event.	ally, the City recommendation of the city recommendation of the city recommendation of the city of the	ends that one chemical toile ust be place on hard surfac	t be used es and be	for every 150 people over accessible from the roadway.
Will City of West Columbia staff be required	to help move restroor	ms to appropriate locations	?	
(Will require Public Works personnel if at Riv	/erwalk)		Yes	□No
How Many Restrooms?		_ Number of ADA Accessib	le	
Company providing restrooms:				
Equipment Setup: Date	_ Time			
Equipment Pickup: Date	Time			
If no toilets will be provided, please explain:				

# **CLEAN UP PLAN**

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Applicants are responsible for cleaning and restoring the site after the Special Event. The cost of any City of West Columbia employee overtime incurred because of applicant's failure to clean and restore the site, will be invoiced at a rate of \$30 per hour/per person.

What is your detailed cleanup plan for the event?		
Do you have a sanitation and recycling removal plan?	Yes	□No
Are off-duty Public Works personnel required for this event?	Yes	□No
Will you need to rent City of West Columbia Roll Carts for this event?	Yes	□No



# HOLD HARMLESS CLAUSE

I, \_\_\_\_\_\_, on behalf of myself and my organization \_\_\_\_\_\_ (if applicable) hereby agree to indemnify and forever hold harmless the City of West Columbia, its employees and elected officials, against any and all claims, demands or actions which may hereafter be made or instituted against the City, arising out of the rental and occupancy of the West Columbia Riverwalk Amphitheater, or Special Events held within the city limits. I further agree to assume all costs of damage to the park/facility and/or contents during the period authorized. I have read the rules and procedures as set forth in the "Special Events Policy and Procedures Manual" and agree to comply with these rules and procedures.

The City of West Columbia reserves the right to revoke a permit to hold an event on City premises without notice when the Permittee does not comply with the terms and conditions of this permit or fails to perform or fails to conduct its activities in a manner acceptable to the City; or if the City becomes aware of an individual or group that espouses or promotes views, ideas or presentations which are likely to promote discrimination, contempt or hatred to any person on the basis of race, national or ethnic origin, color, religion, age, sex, marital status, sexual preference, or disability, gratuitous sex and violence or denigration of the human condition.

Applicant's signature

Date Signed

Organization

# SEND COMPLETED APPLICATION/PERMIT FORM AND CHECK(S) TO:

City of West Columbia, Attn: Events Coordinator — Special Event Application Physical Address: 200 N. 12th Street, West Columbia, South Carolina 29169 Mailing Address: PO Box 4044, West Columbia, South Carolina 29171 Phone (803) 791-1880 ext. \*279 **Submit Application to events@westcolumbiasc.gov 60 days prior to event date.** 

## **RENTAL FEES FOR WEST COLUMBIA AMPHITHEATER**

Riverwalk rental and alcoholic beverage fees are due with application.

 Riverwalk Rental
 \$\_\_\_\_\_\_
 Make check payable to the City of West Columbia.

These are minimum amounts. Fees may increase due to size and scope of event.

Alcoholic Beverages \$\_\_\_\_\_ Make check payable to City of West Columbia – this fee is non-refundable - only applies to West Columbia Riverwalk and Amphitheater.

Police, Fire, Public Works Staff, and Roll Carts will be invoiced by Events Coordinator and a copy provided to you. If the amount exceeds \$500.00 a deposit of one half will be requested before the event, and the balance will be due at the conclusion of event once each department provides actual costs.

## TOTAL SUBMITTED: \$\_\_\_\_\_

Dates cannot be reserved without approved application and appropriate fees paid.



OFFICIAL USE ONLY	
	-
PRELIMINARY APPROVAL BY CITY ADMINISTRATION:	d DeniedSignature/Date
Comments:	oignature/Date
ZONING DEPARTMENT: Approved Denied	Cianatura/Data
Comments:	Signature/Date
POLICE DEPARTMENT: Approved Denied	
Commonte	Signature/Date
Comments:	
Number of Police Officers X \$ 4 (Minimum of Three Hours. Will be invoiced for total number of officers, final	
Traffic Control/Parking Approval	proval Submitted Alcohol Approval
FIRE DEPARTMENT: Approved Denied	
Comments:	Signature/Date
(Minimum of Three Hours. Will be invoiced for total number of Fire Departme	
PUBLIC WORKS DEPARTMENT: Approved Denied	Signature/Date
Comments:	<u>.</u>
Number of Public Works Personnel Number of Public Works Personnel (Minimum of Three Hours. Will be invoiced for total number of employees	•
Number of Roll Carts X \$ 25. Will be invoiced for total number of roll carts, final number deterr	
Copies of insurance, MOU, and Council's approval need to be attached to final applica Event Insurance Received: Yes No N/A	ition.
Liquor Liability Insurance Received: TYes No N/A	
MOU Signed: Yes No N/A	
Alcoholic Beverages Approved/Disapproved by Council: Yes No N/A approved:	Date
Approved Application, Copy of MOU, and Resolution sent to Applicant:	Signature/Date
Final invoice sent to applicant: Final p Signature/Date	ayment received :Signature/Date