



**OLIVEHURST PUBLIC UTILITY DISTRICT**

Business Office  
1970 9<sup>TH</sup> Avenue/P.O. Box 670  
Olivehurst, CA 95961  
Phone (530) 743-4657 Fax (530) 743-3023 www.opud.org

Application must be submitted to Business Office a minimum of 30 business days prior to date of event.

**Special Events Application/Permit**  
(YOU MUST HAVE YOUR COPY OF YOUR PERMIT IN POSSESSION DURING EVENT)

<b>Applicant Information</b>	
Organization/Group: <u>Plumas Lake Little League</u>	Address: <u>1380 Honey Run Ct</u> <u>Plumas Lake, CA 95961</u>
Type of group: <input type="checkbox"/> Individual <input type="checkbox"/> Business/Commercial <input checked="" type="checkbox"/> Non-Profit Organization, ID number: _____	
Phone #: <u>916-761-2071</u>	Email Address: <u>Plumaslake1@gmail.com</u>
Person(s) responsible and can make changes or cancel: <u>Crystal Grossman or</u> <u>Phylicia Phillips</u>	Contact person(s) "on site" day of and phone #: <u>Crystal Grossman - 916-761-2071</u> <u>Phylicia Phillips - 805-850-625-1421</u>
Deposit check refund payable to: <u>Plumas Lake Little League</u>	
<b>Event Information:</b>	
Event name: <u>Plumas Lake Little League</u>	
Event location: <u>Plumas Lake, Calif</u>	
Event date: <u>June 17-19th</u>	
Event time: Start: <u>9:00</u> a.m. / <del>p.m.</del>	End: <u>6</u> a.m. / <del>p.m.</del>
Set up: Date: _____ Time: _____	Clean up: Date: _____ Time: _____
Clean up completed by: <u>Plumas Lake Little League</u>	Phone: _____
Estimate: Number of Participants: _____	Spectators: _____ Staff: _____
Description of Event: <u>Girls, All Star tournament</u> <u>Request use of snack bar</u>	
Will there be any fenced areas? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, please describe: <u>We need to keep the home run fence up for these dates, and will be removed after.</u>	
Will there be a tent, canopy, or other temporary structure at your event? Yes _____ No <input checked="" type="checkbox"/> If yes, please describe: _____	
There are no vehicles allowed on turf areas of District property. Must hand cart items onto turf. <u>N/A</u>	

Event Information Continued

What is your cleanup plan after the event?

*will make sure any of our garbage is cleaned up.*

(Hourly cleaning rates will be deducted from deposit/cleaning fee is extra cleaning is required.)

Entertainment Information

Will you be using a public address system or any other type of amplified sound equipment? Yes  No

If yes, provide a detailed plan for all electronics including music, public address systems, etc.:

Will your event have a DJ or live music? Yes  No

Please describe any live entertainment staging or dance floor that will be part of your event:

*N/A*

Will you have inflatables at your event? Yes  No  If yes, please describe:

(No inflatables that utilize or involve water is allowed on any of the grass areas.)

Name of Inflation Vendor:

Contact Information:

Food / Beverage / Vendor Information

Will there be any vendors or contractors operating a booth, shop, or mobile operation during event? Yes  No

(The event organizer is responsible to make sure vendors are following state, county, and local requirements.)

If yes, provide number of vendors \_\_\_\_\_ and vendor type(s):

*Just us using the snack bar.*

(Must provide copies of all permits and written approvals from other agencies that may be required prior to conducting event.)

Will you be charging fees to participants? Yes  No

If yes, please describe:

Will your event have Food Vendors? Yes  No

(If yes, all proper licensing and permit requirements must be met per Yuba County Code/Ordinance. Please contact Yuba County Health Department for requirements and permit questions.)

Does your event involve the sale or consumption of alcoholic beverages? Yes  No

If yes, must provide valid ABC license and provide licensed security information.

(Security is required when alcohol is being sold or consumed. 1 Guard per every 250 guests present.)

Food / Beverage / Vendor Information Continued

If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_

(Fencing around area where alcohol is being sold and consumed is required.)

Licensed Security Company Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact Person: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Describe how you will ensure that alcoholic beverages will be consumed only by people 21 years or older: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Alcoholic beverages will be served from N/A a.m. / p.m. to \_\_\_\_\_ a.m. / p.m.

Who will be serving the alcoholic beverages? N/A

Which type of alcohol will be served? (Please circle):  
Beer / Wine      Liquor

Please provide a plan for the disposal of all wastewater and other liquids including alcohol to keep them from entering the District's storm drains. Dumping on Park turf and down District drains is prohibited.

Liquor Liability Insurance will be required only when alcohol is provided in the amount of \$1,000,000.00 per occurrence and \$2,000,000.00 aggregate and will be included with your General Liability Insurance. (See OPUD Special Event Policy for all requirements).

Health and Safety Information

Will portable toilets and handwashing stations be required? Yes \_\_\_\_\_ No X

(If yes, see OPUD Special Events Policy regarding portable toilets.)

Permittees are required to provide portable toilets at locations where no permanent facilities are in place and/or when "total attendance" (including organizers, participants, volunteers, and spectators) exceeds restroom facility capacity. The ratio of users per portable toilet is 100 to 1. OPUD requires that all portable toilets and handwashing stations be placed in the parking lot of the parks for an event. At no time are portable toilets and handwashing stations allowed on park turf or sidewalks.

**(The Americans with Disabilities Act requires that 10% of all portable toilets be ADA accessible.)**

Portable Restroom Company Name: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Will Dumpsters be required? Yes \_\_\_\_\_ No X

(See OPUD Special Events Policy regarding dumpster requirements.)

(Costs associated with removal of any excessive trash that is left over or additional clean-up from the even that is required will be deducted from the deposit/cleaning fee. Should the deposit/cleaning fee be fully exhausted, an invoice will be charged to the special event permittee.)

Wastewater – Please provide a plan for the disposal of all wastewater and other liquids to keep them from entering the District's storm drains. Dumping wastewater down District drains is prohibited.



**Changes and Cancellation Policy**

Should you, for any reason, need to cancel your event, you must first notify the Board Clerk/Executive Assistant. All cancellations are required to be in writing by the person who signed the contract. Written cancellations can be emailed, mailed, or hand delivered. The Special Event Application/Permit fee is non-refundable and non-transferrable. **INITIAL HERE**   Cej  .

**Indemnification**

Event sponsor agrees to indemnify and hold harmless the Olivehurst Public Utility District, its officers, agents, employees, and volunteers from and against injury, damage, claims, actions or suits arising out of the special event, including those caused by the passive negligence of the parties being indemnified and/or any dangerous condition of property of the parties being indemnified, and further agrees to defend and indemnify the Olivehurst Public Utility District from and against any injury, damage, claims, actions or suits arising out of or connected with the special event.

Please read each statement. Initialing next to each statement indicates your understanding and agreement with the statement. Failure to comply with the terms and conditions of the Special Event Permit may result in cancellation or early termination of the special event and forfeiture of the deposit.

  Cej   Event sponsor agrees to abide by the Olivehurst Public Utility District Insurance Requirements attached hereto on page 4.

  Cej   Event sponsor agrees, upon request, to pay the refundable deposit/cleaning fee.

  Cej   Event sponsor agrees to pay the Olivehurst Public Utility District all costs the District may incur as a result of any failure to fully comply with all of these conditions.

  Cej   Event sponsor agrees to abide by all of the terms and conditions contained in this application, and any permit(s) issued in connection with the special event. Including ADA requirements.

  Cej   Applicant declares under penalty of perjury of the laws of the State of California that the information provided in this special event application is true and correct to the best of applicant's knowledge. Applicant further acknowledges that the special event may be cancelled if this application contains any intentional misrepresentations.

  Cej   Issuance of a Special Event Permit does not absolve the applicant from obtaining local, state, or federal approvals or permits.

  Cej   I and/or my organization further expressly certify that I and/or my organization will be responsible for any damage or loss sustained to the grounds, buildings, or equipment occurring, or unusual clean-up required, as a result of my and/or my organization's use of the facility. It is understood and agreed that applicant/organization will clean up all decorations and trash or cleaning deposit will be forfeited. **No personal vehicles are allowed on park grass areas** as grass and sprinkler heads can be damaged.

  Cej   I have read and understand the attached OPUD Special Events Policy

  Cej   Applicants signature below signifies that applicant has read and understands ALL the rules and regulations.

In accordance with Section 313 of the California Corporations Code, any document executed by a corporation requires a signature from at least one person from each of the following two groups:

<u>Group One</u>	<u>Group Two</u>
Chairman of the Board	CEO
President or Vice President	Secretary or Treasurer

If an officer holds a title in each of the above groups (dual title), that officer may sign for each of the groups by two separate signatures with the appropriate title listed with his or her signature.

BY: _____	Date: _____
Print Name: _____	Title: _____
BY: _____	Date: _____
Print Name: _____	Title: _____

**Agreement and Signature**

I, the undersigned representative, have read the rules and regulations with reference to this application. The information contained herein is complete and accurate.

Name (Printed): Cristal Grossman

Signature: Cristal Grossman Date: 5/21/2020

**FOR OFFICIAL USE ONLY:**

Application Received on: \_\_\_\_\_ Fees Submitted: \_\_\_\_\_

Application/Permit Fee \$ \_\_\_\_\_ Deposit/Cleaning Fee \$ \_\_\_\_\_ Amount Refundable: \$ \_\_\_\_\_

Paid for:  Cash  Check # \_\_\_\_\_

Insurance Provided:  Yes  No Food Sale/Use:  Yes  No Alcohol Sale/Use:  Yes  No

Law Enforcement Notified:  Yes  No Permits/Written Approvals:  Yes  No ABC License:  Yes  No

Licensed Security:  Yes  No Restrooms Provided:  Yes  No Dumpster Provided:  Yes  No

Remarks: \_\_\_\_\_

Additional Documents Needed: \_\_\_\_\_

Parks Committee: Approved:  Disapproved:  OPUD Board: Approved:  Disapproved:

Processed by: \_\_\_\_\_ Date: \_\_\_\_\_