



**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>THOMAS T SMITH LODGE #78</u>	Address: <u>521 Second Street</u> <u>Yuba City, CA 95991</u>
Type of group: <input type="checkbox"/> Individual <input type="checkbox"/> Business/Commercial <input checked="" type="checkbox"/> Non-Profit Organization, ID number: _____	
Phone #: _____	Email Address: <u>bro.philjones@gmail.com</u>
Person(s) responsible and can make changes or cancel: <u>Phil Jones</u>	Contact person(s) "on site" day of and phone #: <u>Phil Jones</u> <u>530-713-6745 ✓</u>
Deposit check refund payable to: <u>THOMAS T. SMITH LODGE #78</u>	
<b>Event Information:</b>	
Event name: <u>PRINCE HALL DAY</u>	
Event location: <u>Eufay Wood Sr. Park</u>	
Event date: <u>SEPT 8, 2024</u>	
Event time: Start: <u>2:00 pm</u> a.m. / p.m.	End: <u>SEPT 8, 2024 6:30 PM</u> a.m. / p.m.
Set up: Date: <u>SEPT 8, 2024</u> Time: <u>12:00 PM</u>	Clean up: Date: <u>SEPT 8, 2024</u> Time: <u>6:30 PM</u>
Clean up completed by: <u>6:30 PM</u>	Phone: _____
Estimate: Number of Participants: <u>80</u>	Spectators: _____ Staff: _____
Description of Event: <u>FRATERNAL CELEBRATION</u>	
Will there be any fenced areas? Yes _____ No <u>XX</u> If yes, please describe: _____	
Will there be a tent, canopy, or other temporary structure at your event? Yes _____ No <u>NO</u> If yes, please describe: _____	
There are no vehicles allowed on turf areas of District property. Must hand cart items onto turf.	

Event Information Continued

What is your cleanup plan after the event? \_\_\_\_\_  
REMOVE EVERYTHING WE BROUGHT ONTO PROPERTY

(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.: \_\_\_\_\_  
SPEAKERS FOR SOUND SYSTEM AND A MICROPHONE

Will you 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: \_\_\_\_\_  
A FOUR PIECE BAND WITH SINGER

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): \_\_\_\_\_

(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 meet 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 \_\_\_\_\_ a.m. / p.m. to \_\_\_\_\_ a.m. / p.m.

Who will be serving the alcoholic beverages? \_\_\_\_\_

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.

Event	Fees
Minor Event	\$125 with application
Major Event	\$250 with application


- A **Minor Event** – This type of event is defined as a public event which requires completion of a Special Event Application and a Special Event Permit. The Special Event Application will go before the Parks Committee for review and approval. Other items may be required depending on the type of special event. Fees and deposit/cleaning fees of \$200 are due at submittal of application.
- A **Major Event** – This type of event is defined as a public event which may include the sales/consumption of alcohol. This type of event requires the completion of a Special Event Application, a Special Event Permit and must go before the Parks Committee for review and then moved to the Board for review and approval. Other items may be required depending on the type of special event. Fees and deposit/cleaning fees of \$500 are due at submittal of application.

ADA Accessibility
Special Events must be assessable to persons with disabilities. Please visit <a href="http://www.ada.gov">www.ada.gov</a> for additional information.
ADA Parking: There is ample accessible public parking available on a first come, first serve basis to vehicles displaying a handicap plate or placard.
Emergencies: Should an emergency arise; staff and volunteers will assist in making calls to get assistance. There should be a First Aid box at each Special Event.
Restrooms: If porta-potties are needed to be brought in for a Special Event, the organizer will ensure that at least one or 10% (whichever is greater) will include ADA compliant features.
Service Animals: Yuba County Environmental Health code prohibits animals near the food service areas; however, service animals are allowed. Your event accommodates all participants and visitors, including those with special needs.
Please describe how you will make your event accessible to disabled individuals: _____ _____ _____

Event Map
An <b>Event Map</b> of your event <b>must be included with your application</b> identifying the location of all items listed below that apply to the event in order to accept application. Map <b>must be a Google image</b> type of map. <b>(No hand drawn maps accepted.)</b> It is important for OPUD staff to have a clear understanding of the event to permit.
<input checked="" type="checkbox"/> Entertainment and/or stage locations & sound amplification – location of amplifier and all speakers.
<input type="checkbox"/> Electricity, water, and generators
<input type="checkbox"/> N/A Alcoholic beverage concession area(s) including fencing with entrance and exit (if being sold, a one-day liquor permit is required and must be displayed)
<input type="checkbox"/> N/A Non-alcoholic beverage, food concession area(s) & Merchandise sales area(s).
<input type="checkbox"/> N/A Portable toilets (Indicate number of toilets _____).
<input type="checkbox"/> N/A Trash container (# of trash cans _____; # of dumpsters _____).
<input type="checkbox"/> N/A Emergency response routes

Insurance Requirements
Applicant must provide Olivehurst Public Utility District a properly worded Certificate of Insurance from an insurance company licensed to do business in the State of California as proof of possession of general liability, owner, landlords and tenants, or general homeowners insurance, providing for personal injury, death and property damage in the amount of not less than \$1,000,000.00 per occurrence and a \$2,000,000.00 aggregate. In the case of other than private use, said certificate shall also provide as additionally insured the Olivehurst Public Utility District, its officers, agents, and employees. Such insurance will be primary coverage for any liability arising from applicants' use of the facilities. The certificate must cover all dates and hours of facility use. <b>INITIAL HERE</b> _____










**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** 

**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.

-  Event sponsor agrees to abide by the Olivehurst Public Utility District Insurance Requirements attached hereto on page 4.
  -  Event sponsor agrees, upon request, to pay the refundable deposit/cleaning fee.
  -  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.
  -  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.
  -  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.
  -  Issuance of a Special Event Permit does not absolve the applicant from obtaining local, state, or federal approvals or permits.
  -  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.
  -  I have read and understand the attached OPUD Special Events Policy
  -  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: <u>Phillip W. Jones</u>	Date: <u>3/25/2024</u>
Print Name: <u>Phillip W. Jones</u>	Title: <u>Secretary</u>
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): <u>Phillip W. Jones</u>	
Signature: <u>Phillip W. Jones</u>	Date: <u>3/15/2024</u>

**FOR OFFICIAL USE ONLY:**

Application Received on: 3/25/24 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: \_\_\_\_\_



Learning Preschool

BAC

BAY Δ

River Oaks Blvd

aks Blvd

Wood Spray Park

Google

Layers

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