



Submit

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Park City Municipal Corporation

Special Event Permit Application

Special Events Department
 City Hall, Third Floor
 445 Marsac Avenue
 P.O. Box 1480
 Park City, Utah 84060
specialevents@parkcity.org

APPLICATIONS DO NOT CONSTITUTE AS A PERMIT.

PERMITS ARE APPROVED BY THE SPECIAL EVENTS DEPARTMENT OR CITY COUNCIL IN WRITING AFTER COMPLETE APPLICATIONS ARE REVIEWED UNDER PARK CITY MUNICIPAL CODE 4-8.

Applications for Special Event Permits are due no later than 90 days (Level 3), 60 days (Level 2), or 30 days (Level 1) prior to an event. Incomplete applications cannot be reviewed. Applications submitted after the deadlines as described above may be denied. More information can be found at www.parkcity.org or by contacting specialevents@parkcity.org.

IF YOU HAVE QUESTIONS, OR WOULD LIKE TO SCHEDULE A MEETING BEFORE SUBMITTING YOUR APPLICATION, PLEASE CONTACT:

Tommy Youngblood tommy.youngblood@parkcity.org	435.615.5187	Jenny Diersen jenny.diersen@parkcity.org	435.615.5188
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APPLICATION FEES & EXPENSES

- | | |
|--|---|
| | Level Three Special Event Permit \$160.00 |
| | Level Two Special Event Permit \$80.00 |
| | Level One Special Event Permit \$40.00 |
- Application Levels are determined by the Special Events Department after reviewing complete applications.
 - Additional fees for other City Services will be estimated and provided to the applicant upon receipt of a complete application.
 - Applicants may incur additional expenses from other City, County or State jurisdictions.
 - Fee Reductions for some City Services are considered bi-annually. Fee Reduction Applications are due on:
 - April 1**, for events July 1 – December 31; and **October 1**, for events January 1 – June 30.

AS THE APPLICANT YOU UNDERSTAND & AGREE TO THE FOLLOWING: (Check all that you understand and agree to)

- To insure prompt and accurate processing of your application, ensure that ALL support materials and documentation accompany your application. Failure to do so will constitute an incomplete application and may delay review and approval processes. I understand a complete application shall include this application completed, with traffic and transportation plan, contingency plan – including operations plan, emergency plan, weather conditions and residential and notification outreach plan; site plan and permission of use for properties.
- Park City Municipal Corporation requires a certificate of insurance in an amount to be determined by the City Attorney's Office. Submitting incomplete application information may delay the ability to determine the amount required. The amount of insurance required by the City Attorney's office is final and the applicant shall be required to submit proof of coverage including naming Park City Municipal Corporation, 445 Marsac, P.O. Box 1480, Park City, Utah 84060 as additionally insured prior to the start of any event activity.
- After the application is evaluated, the applicant will be responsible for providing proof that I have obtained other permits as necessary from City, County or State agencies, as well as the application fee amount based on the Level of event.
- I understand that as the applicant, I will assume and reimburse the City for any and all costs and expenses determined by Park City Municipal Corporation. Park City Municipal Corporation may require a deposit to cover such expenses. I may incur costs from other departments or other jurisdictional agencies. I understand I can request an estimate of City Services for the event upon submitting a complete application, and that should I choose to, I can request a reduction of fees for some services as pertains to Park City Municipal code 4-8-9 through the bi-annual fee reduction application and process.
- I understand I am able to request a meeting with the Special Events Department prior to submitting an application and that this application does not constitute as a valid permit. I understand that permits are approved by the Special Events Department or City Council in writing after complete applications are reviewed under Park City Municipal Code 4-8.

APPLICANT AND SPONSORING ORGANIZATION INFORMATION

NAME OF EVENT: Deer Valley Concert Series					
FIRST TIME EVENT:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	ANNUAL EVENT:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
ANNUAL EVENT THAT WILL BE THE SAME AS LAST YEAR:			Yes	No	
ANNUAL EVENT THAT WILL HAVE CHANGES FROM LAST YEAR:			Yes	No	
NAME OF APPLICANT (FIRST & LAST): Victoria Schlaepfer					
TITLE / POSITION: Event/Promotions Coordinator					
BUSINESS / ORGANIZATION NAME: Deer Valley Resort					
IS BUSINESS / ORGANIZATION A REGISTERED NON-PROFIT				Yes, a copy of IRS paperwork is attached	<input checked="" type="checkbox"/> No
MAILING ADDRESS OR BUSINESS / ORGANIZATION: P.O. Box 1525					
CITY, STATE, ZIP: Park City, UT 84060					



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PHYSICAL ADDRESS OF BUSINESS / ORGANIZATION: 2250 Deer Valley Drive South

CITY, STATE, ZIP: Park City, UT 84060

PHONE (PRIMARY): 435-645-6536 PHONE (SECONDARY):

EMAIL: vschlaepfer@deervalley.com

BUSINESS / ORGANIZATION WEBSITE: deervalley.com

SOCIAL MEDIA LINKS: facebook.com/skideervalley Twitter: /skideervalley #DeerValleyMoment

DAY OF EVENT PRIMARY CONTACT

ON-SITE DAY OF PRIMARY CONTACT NAME (FIRST & LAST): Victoria Schlaepfer OR Kirsten Castle OR Carrie Westberg

ON-SITE DAY OF PRIMARY CONTACT CELL PHONE: 303-842-9725 OR 435-513-2791 OR 435-513-2786

ON-SITE DAY OF PRIMARY CONTACT EMAIL: vschlaepfer@deervalley.com OR kcastle@deervalley.com OR cwestberg@deervalley.com

PUBLIC EVENT INFORMATION

WEB SITE FOR PUBLIC EVENT INFORMATION: <http://www.deervalleyconcertseries.com>

PHONE NUMBER FOR PUBLIC EVENT INFORMATION: 435-645-6510

EMAIL ADDRESS FOR PUBLIC EVENT INFORMATION: marketing@deervalley.com

Overall event description is attached as a separate document, with the contingency plan and is submitted with the application.

EVENT LEVEL DETERMINATION

THE EVENT WILL INCLUDE THE FOLLOWING ACTIVITIES: (Check all that apply)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FESTIVAL / FAIR	PARADE	SKI / SNOW BOARD	RUN	BIKE	WALK	TRAIL USE	CONCERT	CULINARY	FILMING
<input checked="" type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>			OTHER:		
ARTS & CULTURE EVENT		HOLIDAY CELEBRATION		RECREATION / SPORTING EVENT					

THE EVENT WILL INVOLVE THE USE OF: (Check all that apply)

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
MAIN STREET	RESORT PROPERTY	SCHOOL DISTRICT PROPERTY	PRIVATE PROPERTY	CITY PARKS	CITY FIELDS	CITY FACILITY RENTAL	RESIDENTIAL AREAS	PARK CITY LIMITS	MULTI-JURISDICTION	AMPLIFIED SOUND

THE TARGET MARKET FOR THIS EVENT IS: (Check all that apply)

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	OTHER:
YOUTH / FAMILIES	ADULTS	LOCAL	STATE-WIDE	REGIONAL	NATIONAL	INTER NATIONAL	SPECTATORS	PARTICIPANTS	

THIS EVENT WILL: (Check all that apply)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
LIMIT # OF PARTICIPANTS	BE FREE FOR SPECTATORS	BE FREE FOR PARTICIPANTS	INCLUDE VENDORS OR SPONSOR	BE FREE AND OPEN TO THE PUBLIC
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LIMIT # OF SPECTATORS	CHARGE ADMISSION FOR SPECTATORS	CHARGE PARTICIPANTS	NOT INCLUDE VENDORS OR SPONSOR	BE A PRIVATE EVENT

THIS EVENT WILL BE HELD: (Check all that apply)

EVENT DATE(S): August 2, 9, 18, 31 and September 3

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
WEEKLY		MONTHLY		SERIES		ONE DAY

NUMBER OF EVENT(S): 5 # OF CONSECUTIVE DAYS: 0



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ONE DAY EVENT HOUR(S)			
EVENT HOUR(S): <i>Varies per event</i>		OPENING TIME: <i>varies per show</i>	EVENT ENDS: <i>10 pm</i>
EVENT SET-UP DATE: <i>August 2</i>		BREAK-DOWN DATE: <i>Septemeber 3</i>	
SET-UP TIME(S):		BREAK-DOWN TIME(S):	
MULTIPLE DAY EVENT HOUR(S) – If different for each date			
DAY:	DATE:	OPENING TIME:	EVENT ENDS:
EVENT SET-UP DATE:		BREAK-DOWN DATE:	
SET-UP TIME(S):		BREAK-DOWN TIME(S):	
DAY:	DATE:	OPENING TIME:	EVENT ENDS:
EVENT SET-UP DATE:		BREAK-DOWN DATE:	
SET-UP TIME(S):		BREAK-DOWN TIME(S):	
DAY:	DATE:	OPENING TIME:	EVENT ENDS:
EVENT SET-UP DATE:		BREAK-DOWN DATE:	
SET-UP TIME(S):		BREAK-DOWN TIME(S):	
DAY:	DATE:	OPENING TIME:	EVENT ENDS:
EVENT SET-UP DATE:		BREAK-DOWN DATE:	
SET-UP TIME(S):		BREAK-DOWN TIME(S):	
DAY:	DATE:	OPENING TIME:	EVENT ENDS:
EVENT SET-UP DATE:		BREAK-DOWN DATE:	
SET-UP TIME(S):		BREAK-DOWN TIME(S):	
INCLIMATE WEATHER INFORMATION:			
DAY:	DATE:	OPENING TIME:	EVENT ENDS:
EVENT SET-UP DATE:		BREAK-DOWN DATE:	
SET-UP TIME(S):		BREAK-DOWN TIME(S):	
<input checked="" type="checkbox"/>	No inclement weather date is required, and the event will be held rain or shine. I understand the event may be cancelled or postponed by the city due to hazardous or damaging conditions		
EVENT ATTENDANCE (Complete all that apply)			
IF ANNUAL EVENT:			
TOTAL EVENT ATTENDANCE OF PREVIOUS YEAR:		TOTAL DAILY EVENT ATTENDANCE OF PREVIOUS YEAR:	
ALL APPLICANTS MUST COMPLETE THE FOLLOWING SECTION (NEW OR ANNUAL EVENTS)			
ESTIMATED # OF PARTICIPANTS:		ESTIMATED # OF VENDORS:	
ESTIMATED # OF SPECTATORS: <i>3,000-5,000</i>		ESTIMATED # OF VOLUNTEERS:	
ESTIMATED # OF STAFF: <i>30</i>		ESTIMATED DAILY ATTENDANCE: <i>3,000-5,000</i>	
ESTIMATED HIGHEST TOTAL ATTENDANCE AT ONE TIME: <i>5,000</i>		ESTIMATED TOTAL ATTENDANCE OF ENTIRE EVENT: <i>16,000-30,000</i>	
<input checked="" type="checkbox"/>	I anticipate the event to have an attendance of 500 or more people and understand, as the applicant, I may be required to obtain a mass gathering permit from summit county: http://www.summitcountyhealth.org/		



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SIDEWALK & STREET USE (circle and complete all that apply)
THE EVENT WILL HAVE:
STREETS

<input type="checkbox"/> STREET CLOSURE MAP IS ATTACHED	<input type="checkbox"/> CLOSURE SIGN / MARKING
<input type="checkbox"/> ROLLING CLOSURE <input type="checkbox"/> PARTIAL CLOSURE	<input type="checkbox"/> FULL CLOSURE <input type="checkbox"/> NO CLOSURE

NAMES OF STREETS TO BE CLOSED:	TIMES: (START / END OF CLOSURE)
--------------------------------	---------------------------------

	START:	END:
	START:	END:
	START:	END:
	START:	END:

REASON FOR CLOSURE:

SIDEWALKS

<input type="checkbox"/> SIDEWALK CLOSURE MAP IS ATTACHED	<input type="checkbox"/> CLOSURE SIGN / MARKING
<input type="checkbox"/> PARTIAL CLOSURE <input type="checkbox"/> FULL CLOSURE	<input type="checkbox"/> NO CLOSURE <input type="checkbox"/> CROWD CONTROL PLAN

ADDRESS:

ADDRESS OF CLOSURE: (FROM / TO)	TIMES: (START / END OF CLOSURE)
---------------------------------	---------------------------------

FROM:	TO:	START:	END:
FROM:	TO:	START:	END:
FROM:	TO:	START:	END:
FROM:	TO:	START:	END:

REASON FOR CLOSURE:

TRAILS

<input type="checkbox"/> TRAIL COURSE MAP IS ATTACHED	<input type="checkbox"/> COURSE / SIGN MARKING INFORMATION IS ATTACHED
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NAMES OF TRAILS TO BE USED:

PARADE

ASSEMBLY AREA:	DISBANDING AREA:	# OF PARADE ATTENDEES:
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PARADE IS:

<input type="checkbox"/> WALKING ONLY	<input type="checkbox"/> VEHICLES & WALKING	<input type="checkbox"/> VEHICLES ONLY	<input type="checkbox"/> WILL HAVE ANIMALS
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OTHER PARADE INFO:



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CITY PARKING FACILITIES REQUEST

GENERAL PARKING (Where will you be directing event attendees to park cars?)

HOW MANY PARKING SPACES DOES THE EVENT NEED?		AT HIGHEST POINT?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MAIN STREET	CHINA BRIDGE	FLAGPOLE LOT	BREW PUB LOT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SANDRIDGE PARKING LOTS	PARK AVENUE	CITY PARK	MAWHINNEY LOT
<input type="checkbox"/>	<input type="checkbox"/>	OTHER:	
QUINNS LOT	RICHARDSON FLATS		

WILL THE EVENT PROVIDE TRANSPORTATION SERVICES TO THE EVENT FROM PARKING AREAS?:	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
ADA PARKING AVAILABLE?:	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
THE EVENT WILL REQUIRE PARKING REMOVAL?:	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>

The event will require parking removal as indicated below, and I will complete a special use of public parking application as required with the Park City Parking Services Department

NAME OF AREA OR STREETS:	BETWEEN:
TIME – START / END:	REASON (what/who):
NAME OF AREA OR STREETS:	BETWEEN:
TIME – START / END:	REASON (what/who):
NAME OF AREA OR STREETS:	BETWEEN:
TIME – START / END:	REASON (what/who):
NAME OF AREA OR STREETS:	BETWEEN:
TIME – START / END:	REASON (what/who):

TRANSPORTATION

WILL THE EVENT PROVIDE ALTERNATIVE TRANSPORTATION OPTIONS?

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
BUS	BIKE	WALK

THE APPLICANT IS PROVIDING SHUTTLE OR BUS TRANSPORTATION OUTSIDE OF THE CITY'S SCHEDULE. THE APPLICANT HAS PROVIDED BUS DROP OFF AREA ON THE SITE MAP ATTACHED WITH THIS APPLICATION.

NAME OF TRANSPORTATION PROVIDER / COMPANY:	
PHONE:	EMAIL:

THE APPLICANT IS PROVIDING BIKE TRANSPORTATION AT THE EVENT. WE HAVE PROVIDED BIKE PARKING AREAS ON THE SITE MAP WITH THIS APPLICATION.

WE ARE PROVIDING WALKING AS AN OPTION TO ATTEND THE EVENT. WE HAVE PROVIDED WALKING PATH IDEAS ON THE SITE MAP WITH THIS APPLICATION.

ADDITIONAL TRANSPORTATION INFORMATION:
--

PUBLIC FACILITY USE

CHECK ALL THAT APPLY:	<input type="checkbox"/>	MINERS HOSPITAL AT CITY PARK	<input type="checkbox"/>	PARK CITY LIBRARY MEETING ROOMS	<input type="checkbox"/>	JIM SANTY AUDITORIUM
	<input type="checkbox"/>	SOUTH CITY PARK	<input type="checkbox"/>	CITY PARK COVERED BBQ AREA	<input type="checkbox"/>	CITY PARK GAZEBO / STAND
	<input type="checkbox"/>	CITY PARK SOFTBALLFIELD	<input type="checkbox"/>	CITY PARK RUGBY FIELD	<input type="checkbox"/>	SKATE PARK AT CITY PARK
	<input type="checkbox"/>	QUINN'S SPORTEX FIELDS	<input type="checkbox"/>	ROTARY PARK	<input type="checkbox"/>	SCHOOL DISTRICT FIELDS
	<input type="checkbox"/>	DIRT JUMP PARK	<input type="checkbox"/>	PARK CITY ICE ARENA	<input type="checkbox"/>	OTHER:
	<input type="checkbox"/>					



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TEMPORARY STRUCTURES & FLAMMABLE MATERIALS

I UNDERSTAND ALL TEMPORARY STRUCTURES AND FLAMMABLE MATERIALS MUST BE APPROVED BY THE PARK CITY BUILDING DEPARTMENT. SUCH INSPECTIONS WILL REQUIRE A FIRE/BUILDING PERMIT TO BE SUBMITTED 10 DAYS BEFORE THE EVENT, AS WELL AS AN INSPECTION THE DAY OF THE EVENT.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TEMPORARY BLEACHERS	INFLATABLES	CANOPIES	TEMPORARY BADGES	TEMPORARY LIGHTING
<input type="checkbox"/>	TENTS 10X10 OR UNDER	HOW MANY:		
<input checked="" type="checkbox"/>	TRAILER	HOW MANY: 1		
<input checked="" type="checkbox"/>	STRUCTURES OVER 6 FEET TALL	PURPOSE: Concert Stage	HOW MANY: 1	
DOES EVENT HAVE ELECTRICAL NEEDS?:		<input checked="" type="checkbox"/> YES NO	DOES EVENT REQUIRE USE OF GENERATORS	
			YES <input checked="" type="checkbox"/>	NO
WILL YOU BE REQUESTING PERMITS FOR FIREWORKS?:			YES <input checked="" type="checkbox"/>	NO
WILL THE EVENT REQUIRE THE USE OF FLAMMABLE MATERIALS, FUELS OR GASSES?:			YES <input checked="" type="checkbox"/>	NO
NAME SUCH MATERIALS:				

WASTE MANAGEMENT AND RECYCLING

<input checked="" type="checkbox"/>	THE EVENT WILL PROVIDE ITS OWN GARBAGE CANS AND WASTE MANAGEMENT.						
<input checked="" type="checkbox"/>	THE EVENT WILL PROVIDE ITS OWN DUMPSTERS, WHICH IS INDICATED ON THE SITE MAP.						
<input type="checkbox"/>	THE EVENT WILL USE THE CITY'S GARBAGE CANS AND WASTE MANAGEMENT, REQUIRING ADDITIONAL FEES.						
<input type="checkbox"/>	THE EVENT WILL USE THE CITY'S DUMPSTERS, REQUIRING ADDITIONAL FEES.						
<input checked="" type="checkbox"/>	THE EVENT WILL HIRE A COMPANY AND PROVIDE RECYCLING SERVICES FOR THE FOLLOWING MATERIALS:						
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	PLASTIC	PAPER	ALUMINUM	GLASS	CARDBOARD	COMPOST	OTHER
<input type="checkbox"/>	THE EVENT WILL UTILIZE CITY RESTROOM FACILITIES (List areas of city restroom facilities below:						
<input checked="" type="checkbox"/>	THE EVENT WILL BRING ITS OWN RESTROOMS AND SANATARY STATIONS. (May be required by Summit County Health Department or Park City Building Department)						
WILL ANIMALS BE AT THE EVENT?:		YES <input checked="" type="checkbox"/>	NO	IF YES, PLEASE DESCRIBE TYPE OF ANIMALS AND WASTE PLANS			
TYPES OF ANIMALS:							
<input type="checkbox"/>	I HAVE INCLUDED THE PLACEMENT OF THE ANIMALS IN THE SITE MAP OR LINE UP IN THE CONTINGENCY PLAN						
WILL DOGS BE ALLOWED AT THE EVENT?:		YES <input checked="" type="checkbox"/>	NO	LEASHED	UNLEASHED		
<input type="checkbox"/>	WASTE MANAGEMENT PLAN HAS BEEN DESCRIBED IN THE CONTINGENCY PLAN ATTACHED TO THIS APPLICATION.						

FOOD & MERCHANDISE SALES

<input checked="" type="checkbox"/>	I UNDERSTAND THAT ALL VENDORS MUST OBTAIN A PARK CITY BUSINESS LICENSE. ALL VENDORS SERVING FOOD OR DRINKS MAY BE REQUIRED TO OBTAIN A FOOD SERVICE OR FOOD HANDLERS PERMIT FROM SUMMIT COUNTY.						
WILL THERE BE SALE OF MERCHANDISE?:					<input checked="" type="checkbox"/>	YES	NO
WILL THERE BE COMPLIMENTARY FOOD?:					YES	<input checked="" type="checkbox"/>	NO
WILL THERE BE SALE OF FOOD?:					<input checked="" type="checkbox"/>	YES	NO
WILL THERE BE ALCOHOL FOR SALE?:					<input checked="" type="checkbox"/>	YES	NO
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	BEER	WINE	LIQUOR				
I HAVE CONTACTED THE PARK CITY FINANCE DEPARTMENT REGARDING REQUIREMENTS FOR BEER & LIQUOR LICENSES.							



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I UNDERSTAND THAT THE UTAH DEPARTMENT OF ALCOHOLIC BEVERAGE CONTROL (UDABC) MAY REQUIRE OTHER PERMITS.

WILL FOOD ITEMS BE PRE-PACKAGED?: YES NO

WILL FOOD ITEMS BE COOKED ON SITE?: YES NO

I UNDERSTAND THAT IF COOKING IS ONSITE, A PARK CITY BUILDING/FIRE PERMIT MAY BE REQUIRED.

WILL FOOD ITEMS BE PREPARED OFFSITE?: YES NO

DESCRIBE ITEMS:
During this concert series, we will utilize food trucks for an additional food option, we will ensure food trucks have appropriate inspections prior to concert start

TEMPORARY SIGNS

WILL THERE BE TEMPORARY SIGNS AT THE EVENT?: YES NO

I HAVE ATTACHED A SIGN PLAN DESCRIBING THE CONTENT, SIZES AND LOCATIONS IN THE CONTINGENCY PLAN.

SAFETY - SECURITY

THE EMERGENCY AND SECURITY PLAN HAS BEEN ATTACHED IN THE OPERATIONS PLAN, INCLUDING CROWD CONTROL, ACCESS, FIRST AID. AFTER REVIEW OF THIS APPLICATION, REQUIREMENTS FOR EMTS, FIRE AND POLICE SERVICES WILL BE DETERMINED AS PART OF THE CONDITIONS OF APPROVAL OF THIS EVENT. THE SPECIAL EVENTS DEPARTMENT WILL BE ABLE TO GIVE THE APPLICANT AN ESTIMATE OF SUCH CITY SERVICE REQUIREMENTS.

THE EVENT WILL REQUIRE LAW ENFORCEMENT SERVICES BEYOND ROUTINE PERIODIC PATROL.

THE EVENT WILL NOT REQUIRE LAW ENFORCEMENT SERVICES BEYOND ROUTINE PERIODIC PATROL.

COMMUNICATION NEEDS

WILL THERE BE INSTALLATION OF AN ANTENNA FOR COMMUNICATION NEEDS?: YES NO

INSTALLATION OF AN ANTENNA FOR COMMUNICATION IS INDICATED IN THE SITE PLAN WITH SPECIFICATIONS.

MARKETING OF EVENT

PROPER MARKING OF YOUR EVENT IS VITAL TO ITS SUCCESS. PLEASE CONTACT THE PARK CITY CHAMBER FOR ADDITIONAL INFORMATION AND ASSISTANCE: www.visitparkcity.com

I HAVE CHOSEN TO LIST INFORMATION REGARDING MY EVENT ON THE PARK CITY CHAMBER'S WEBSITE.

I HAVE CHOSEN NOT TO LIST INFORMATION REGARDING MY EVENT ON THE PARK CITY CHAMBER'S WEBSITE.

WHO IS THE TARGET MARKET FOR THIS EVENT?:

WHERE IS THE TARGET MARKET FOR THIS EVENT?: (choose all that apply)

LOCAL REGIONAL NATIONAL INTERNATIONAL

WILL THIS EVENT BE FILMED AND TELEVISED?: (choose all that apply) YES NO

LOCAL REGIONAL NATIONAL INTERNATIONAL

PLEASE LIST ALL ADVERTISEMENT INCLUDING MEDIA COVERAGE, NEWSPAPER AND MAGAZINES:

MEDIA (RADIO/TV):

NEWSPAPER:

MAGAZINES:

OTHER:

PLEASE SELECT RANGE OF MARKETING BUDGET: No current marketing budget for the event is in place

\$100 OR UNDER \$100 - \$500 \$500 - \$1,000 \$1,000 - \$2,500 ABOVE \$2,500



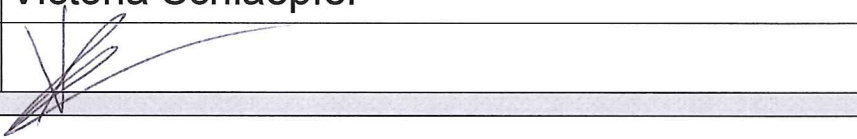
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APPLICANT AGREEMENT & SIGNATURE

I, the undersigned representative, have read the rules and regulations with reference to this application and am duly authorized by the organization to submit this application on its behalf. The information contained herein, including supporting documentation is complete and accurate.

Name (Printed):	Victoria Schlaepfer	
Signature:		Date: 5/2/2018

**2018 Summer Events at Snow Park Outdoor Amphitheater
Deer Valley Resort**

Evacuation, Cancellation & Medical Services Plan

Evacuation Plan:

Spectators will be directed down the hill through the ticket office area walkway by the Snow Park Lodge. From there they will be directed to proceed to the tram turnaround and out to the parking lots. There is a sound system with a microphone on the stage to make any necessary announcements.

Eighteen (18) members of the same group of staff that would assist the guests along the evacuation route are trained to assist guests with transportation needs. They will all be in contact by radio or cell phone with the Guest Services Manager who is responsible for spectator transportation and parking for the event.

Deer Valley's Crisis Communication and Disaster Plans appoint our Director of Mountain Operations, Steve Graff, as Incident Commander in case of a major emergency. If Mr. Graff is unavailable, the IC position would be filled by our President and COO, Bob Wheaton.

Deer Valley's Incident Command Post will be the 2002 room, located on the first floor of Snow Park Lodge. If the 2002 room is unavailable, the Incident Command Post will be the Bald Eagle Room, located on the second floor of Snow Park Lodge.

Steve Graff
435-645-6904 –desk
435-513-2796 -cell
sgraff@deervalley.com

Bob Wheaton
435-645-6669 -desk
435-513-2787 –cell
bwheaton@deervalley.com

Event Delay/Cancellation:

Most delays are due to weather. Should a delay of this type occur, announcements will be made informing the spectators of the delay and the anticipated length of the delay. Should an event be cancelled due to weather, governmental restrictions or regulations, tickets are refundable. There is a sound system with a microphone on the stage to make any necessary announcements.

Medical Information:

Deer Valley Resort will ensure the presence of qualified emergency treatment providers (EMTs) on the Event site in compliance with the requirements of Summit County regarding the number of attendees of the event. The EMTs will be there before the event starts, and leave after the guests have left the parking lots. Injured guests will be taken to the First Aid Room located on the east side of the Snow Park Lodge and have immediate medical attention by the EMTs. If additional medical attention is needed, guests will be transported to one of the following:

Local medical facility:

Park City InstaCare
1750 Sidewinder Dr,
Park City, Utah 84060
435-649-7640

OR

Park City Medical Center
900 Round Valley Drive
Park City, UT 84060
435-658-7000

Air-Med helicopter will be available. If needed, injured competitors or guests will be transported to:

University Medical Center
50 North Medical Drive
Salt Lake City, Utah
801-585-5000

SIZE	WHAT IT SAYS	LOCATION	HOW MANY
20 X 30	CHAIR HEIGHT MUST BE LESS THAN 9" FROM THE GROUND	Parking lot, bottom of stairs in lodge, and 3 on plaza	8
20 X 30	ADA/VIP Entrance with arrows	next to large map, next to 2002 room, next to ADA/VIP ent	3
48 X 36	THIS SIDE LOW CHAIRS ONLY	zip tied to fencing (house left)	4
48 X 36	THIS SIDE BLANKETS ONLY	zip tied to fencing (House right)	4
20 X 30	Restrooms with arrow	behind concessions	1
20 X 30	wheelchair symbol	Around ADA section	4
20 X 30	No chairs beyond this point/blanket side	Middle of house, behind sound booth	4
20 X 30	Lower Restrooms Closed		4



Google

First Aid
Tent

Concessions

Potties

Venue
Entrance

Food
Truck

Ticket
Office