

CITY OF COEUR D'ALENE

MUNICIPAL SERVICES DEPARTMENT 710 EAST MULLAN AVENUE COEUR D'ALENE, ID 83814 (208) 769-2229 or ksetters@cdaid.org

Date Received:	Rating of Event:
Permit Fee: Receipt No.: Security Dep.:	
Meeting Date:	
Security Deposit Return:	

SPECIAL EVENT PERMIT APPLICATION INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED Must be submitted a minimum of 21 days prior to event

(May be submitted up to one year in advance)

Date(s) of Event	Day of the Week
REQUIRED DOCUMENTS	(MUST BE SUBMITTED WITH APPLICATION):
	e provide a Certificate of Insurance in an amount of not less than \$500,000 Coeur d'Alene as additional insured.
	complete map must be included indicating start location, entire route, road s, location of vendors and finish area.
☐ FEE/DEPOSIT – Fee	s based on Resolution 17-032 & 18-043 for deposits included in this application
	CATION – (see attached) needs to be signed by the property owner/tenant road closure affects access to properties.
SPONSOR:	
Event sponsor	
-	
Mailing Address	
Mailing Address	
Mailing Address Contact Person Phone	
Mailing Address Contact Person Phone	E-Mail
Mailing Address Contact Person Phone Return security deposit to: (N	E-Mail

What streets will be partially closed to traffic? _	
What streets will be fully closed to traffic?	
Will event stop for and obey traffic signals at int	ersections?
How will you maintain traffic access to business	es, commercial establishments and homeowners?
Did you notify businesses and property owners affect	eted by closures?
Does this event require "no street parking" signs?	
RESOURCES REQUIRED:	
NOTE: Certified traffic flaggers at organizer's ex	pense will be required for an arterial street crossing.
Name of Certified Flagging Company:	
Contact Person:	Phone Number:
E-Mail:	
Do you remain on sidewalks only? Tra	ail only?
NOTE : Barricades/cones provided by the City req	quire pick-up and drop off by appt. Mon – Thurs. before
2:00 p.m. Please contact the Streets Department	t at 208-769-2235. A separate deposit fee for use of city
$equipment\ is\ payable\ at\ the\ time\ of\ application.$	
Do you need any barricades from City?	If yes, how many?
Do you need cones from the City?	
Do you need "No Parking" signs from the City? _	
Do you wish to have Police at your event?	NOTE: If yes, cost will be paid for off duty t guaranteed. Contact the Deputy Clerk at 208-769-
RESTROOM FACILITIES:	
	ortable toilets if necessary. Indicate location on the r.
What restroom facilities will be used?	How many are ADA accessible?
What company is supplying the restrooms:	Contact:

TENT PERMITS/SELLER PERMITS:

What garbage receptacles will be used?

- **NOTE:** Fire Department tent permit required for all portable tents, canopies, etc. with any food, heat or over 200 square feet. Fire Department application and fee may be submitted with this application.
- **NOTE:** The State of Idaho requires a sellers permit for all vendors. Contact Idaho State Tax Commission at 208-334-7660

VENDORS NOTE: Please indicate location	on of all vend	ors on the site p	olan map.		
How many vendors will you h	nave at the e	vent?			
Please specify number and ty	/pe: Food	Beverages	Alcohol	Retail	Other
Will any cooking/warming be be used?Are any gaplease specify items and show	s/propane a	ppliances used			
Any other flammable or com	bustible item	ns on site?	Specify		
Service of alcohol must be m and watch for overservice of safety plan, or both. For an e attendance. Contact the City	alcohol. Larg vent requirir	ge events or thong security, one	se serving alcol security officer	hol may requi is needed for	re security, a public
FIRST AID Where will the First Aid Stati	on be located	d?			
Who will man the station?					
How are participants notified					
(For serious medical issues, p	olease instru	ct all participar	ts to call 911 f	or assistance)	
LOST CHILDREN OR PETS Where will lost children or pe		: !?			
CLEAN-UP PLAN Who is responsible for clean-up	during/after	event?			
Contact Name		Phone		Email	
How many people are assigned	to your clean-	-up committee?_	Date/T	ime completed	?
What arrangements have been	made for gark	page removal?			

CERTIFICATION				
L,certify that I am a citizen of the United States, over eighteen (18) years of age, and that the information listed on this application is complete and true to the best of my knowledge, and I agree to comply with the ordinances regarding parades and special events contained in the City of Coeur d'Alene Municipal Code, of which I have received a copy.				
Office Use Only				
City Clerk or Designee Approval	Date			
LOW/MEDIUM IMPACT EVENTS				
Street Department Approval				
Police Department Approval	——————————————————————————————————————			
Fire Department Approval				
HIGH IMPACT EVENTS				
Street Department Approval	Date			
Fire Department Approval				
Police Department Approval	Date			
Parks Department Approval				
Conditions/Comments:				
Issues that occurred for review next year:				

SPECIAL EVENTS OTHER PERMITS MAY BE REQUIRED

 Centennial I rail along Coeur d'Alene Drive or any part of Idano State Highway including intersections
If your event starts or continues on any portion of the Centennial Trail along Coeur d'Alene Drive, or an part of a state highway including intersections of CDA Drive, a permit is required.
Idaho Transportation Department – (208) 772-1297
 Centennial Trail Use
If your event uses any portion of the Centennial Trail, please contact the following agencies if
appropriate as a permit is required: Idaho State Park
Post Falls Recreation
City of Coeur d'Alene Parks Department – (208) 769-2252
Idaho Transportation Department – (208) 772-1297
 All City Parks
If your event uses any portion of the above-mentioned, a permit is required. Coeur d'Alene Parks Department – (208) 769-2252
 City Ballfields
If your event starts, continues, or ends using any of the City's ballfields, a separate permit may be required. Recreation Department (208) 769-2250.
 Serving Alcohol
If you plan on having alcohol at your event, a permit may be required contact (208) 769-2229.
 Fireworks
If you plan to have any fireworks displays associated with your event, a permit is required. Fire Department – (208) 769-2340.
 Tents/Canopies/Food Vendors
If you plan to put up tents, canopies, or will have food vendors, please contact the Fire Department as a tent permit may be required. (An application is provided in this packet for your convenience – permit fee paid at City Hall)
**Any gas, propane appliances, heaters, etc. will require a special fire inspection. Fire Department – (208) 769-2340.
 Traffic Control Plan
If your event is expected to have more than 1,000 people, you are required to submit a public safety and traffic control plan.
 Musical Assembly/Concert
If your event is expected to have more than 500 people, a special permit, bond, and special fire inspection is required.
Ticket Sales or Vendors
If you plan to have vendors and/or sell tickets, a State of Idaho Temporary Sellers Permit is required. (208) 334-7660

SPECIAL EVENT FEE SCHEDULE RESOLUTION 17-032 RESOLUTION 18-043 DEPOSITS

Meeting Required? Yes or No

Participants Including Spectators	Use Hours	Route Length	Category	Permit Fee	Security Deposit
Over 500	More than 6	21 or more blocks	HIGH	\$750	\$1,000
201-500	3-6 Hours	12-20 blocks	MEDIUM	\$300	\$500
0-200	Under 3	Less than 12 blocks	LOW	\$150	\$100
	Hours	or no street closure			

To determine fees, please circle the proper number in the first three columns for your event. Your event category and pricing will be determined anytime you reach two circles in the same row.

For events that are more than one day, you will be charged an event fee per each day. The permit fee and security deposit must be remitted in <u>two separate checks</u>.

Additional security deposit for use of city equipment based on (high \$1000 med \$500 or low \$100) impact.

For questions, please contact Kelley Setters at (208) 769-2229 or email at ksetters@cdaid.org

Example: Event is set up at 8 am, starts and 9 am, and lasts until 12 pm with 550 participants/spectators, and length will equate to 13 blocks

NEIGHBOR NOTIFICATION SPECIAL EVENT: EVENT DATE: EVENT TIME: As a resident effected by the road closure (location) I have been notified of this closure and have no objection. Signatures of affected residences.

Signature (First, Last Name)	Addresses	Date of notification