

---

## SPECIAL EVENT PACKET

---

Thank you for your interest in applying to host a special event. The City of Bolivar takes great pride in its community-wide events as they foster citizen goodwill and community spirit. As you progress through the planning and organizing stages of your event, it is necessary to inform the City of your special event to ensure the safety of all attendees, ultimately creating a successful event.

This packet represents the first step in the special event process. It contains several applications and forms which are required to be completed as part of your application submission, and a few which are necessary if specific activities are planned for your event. The following provides a brief description of the packet contents:

- *Submission Process:* Please read thoroughly as this will guide you through the necessary steps your submission will take prior to approval of your special event.
- *Special Event Application:* Completion of this application is required for all submissions.
- *Hold Harmless Agreement:* Completion of this agreement is required for all submissions.
- *Notice of Occurrence/Claim Form:* Keep this form handy the day of the event in the case an accident occurs during the event. In the event of an accident, this form shall be fully completed and submitted to Bolivar City Hall immediately upon occurrence. Please note, completion and submission of this form is for the City of Bolivar's reference only and in no way implies coverage or liability to the City.
- *Submission Checklist:* Use this checklist as a guide as you complete the necessary forms. Please also include it with your submission.
- *Sign Permit Application:* If you are planning to install any signs, completion of sign permit applications are required for each sign.
- *Business License Cover Letter:* This letter contains information regarding the business license application process.
  - *Business License Application:* If the purchase of goods will be occurring at the event, a completed business license application and supporting documents are required for each vendor.
  - *Affidavit of Exemption for Workers' Compensation:* Completion of this document is required if the vendor applying for a business license does not have any other employees beside him/herself. Please note the signature on this document is required to be notarized.
- *Food service during event:* If you, or other vendors, are going to be serving food during your event, you are REQUIRED to make contact with the Polk County Health Department for their guidelines and regulations.

Once you have thoroughly completed the special event application in its entirety, submit it along with all supporting documents no later than **45 days prior to the event date**. Submissions may be delivered personally at Bolivar City Hall or mailed to the following address:



---

City of Bolivar  
Attn: City Clerk, Natalie Scrivner  
PO Box 9  
Bolivar, MO 65613

Incomplete or late submissions will not be processed.

City Parks may not be used for profit activities. Permission to collect monies in the parks may only be given to not-for-profit entities. Absolutely no solicitation of funds from general park users will be allowed. If you have any questions, while completing the application(s), please do not hesitate to contact my office at (417) 326-2489 and arrange to meet with me at Bolivar City Hall. We look forward to working with you to ensure your event is a success.

Respectfully,

Natalie Scrivner  
Bolivar City Clerk

---

## **SUBMISSION PROCESS**

---

The following describes the process which your special event submission will follow:

1. Upon receipt of the completed application, the Emergency Management staff will forward copies of the documents to the applicable departments for review and approval. During this part of the process, various City departments may contact you requesting further information.
2. Upon departmental approval, the submission will be presented to the Board of Aldermen for final review and approval. The Board of Aldermen meet monthly on the 2<sup>nd</sup> and 4<sup>th</sup> Tuesday.
3. Assuming the Board of Aldermen approves the submission, a special event approval and sign permits, if applicable, will be available to pick up at Bolivar City Hall the following Monday. Business licenses, if applicable, may be available for pickup earlier in the process. Please contact the City Clerk's office to check the status of business licenses. Please note in all cases, you are responsible for being aware of your submission status and picking up the permits and licenses when they become available.
4. If the submission is rejected at any point during the process, you will be contacted.
5. During the event, it is necessary that all permits and licenses be readily available.



**SPECIAL EVENT APPLICATION**

**APPLICANT AND ORGANIZATION INFORMATION**

Sponsor Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Cell phone (during event): \_\_\_\_\_

Email: \_\_\_\_\_

Preferred method of contact: \_\_\_\_\_

**EVENT INFORMATION**

Event name: \_\_\_\_\_

Event location: \_\_\_\_\_

Date & time of Set up: \_\_\_\_\_

Date & time of Event:  
\_\_\_\_\_

Date & time of Clean up:  
\_\_\_\_\_

Anticipated number of attendees: \_\_\_\_\_

Will the event sponsor be present and in charge of the event at all times? Yes No

If no, please provide name of responsible party present.

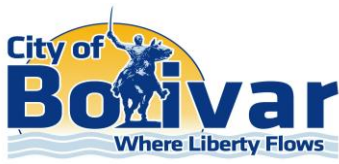
Name: \_\_\_\_\_ Cell phone (during event): \_\_\_\_\_

Type of activities planned (check all that apply):

- Carnival
- Fireworks
- Sporting Event
- Concert
- Parade
- Other (please explain) \_\_\_\_\_
- Festival
- Run/Walk

Will the following be served? (check all that apply)  Food  Alcohol

*If food is being served, a permit with the Polk County Health Center shall be obtained. Event sponsor will be responsible to monitor alcohol remains in defined event area.*



Will temporary booths be set up?  Yes  No  
 If yes, will goods be available for purchase?  Yes  No

**Sponsor is required to obtain a City business license for all vendors selling goods during the event.**

Will event be open to the public?  Yes  No

Will admission be charged?  Yes  No

Will donations be accepted?  Yes  No

Will electricity be required?  Yes  No

Will generators be used?  Yes  No

Will live music be performed?  Yes  No

Will a stage be set up/constructed?  Yes  No

Please list performance times \_\_\_\_\_

Will banners/signs be installed?  Yes  No

*ALL signs require a sign permit issued by the Community Development Department. With the approval of the Special Events Permit, the organization is entitled to 2 cost-free sign permits. The cost-free permits still require a sign application and approval by the Community Development Department. All other signs require sign application submission, approval and permit charge.*

Is this an event for Charity?  Yes  No

List participating organizations/with name of contact (attach list if needed)

Organization: \_\_\_\_\_ Contact \_\_\_\_\_

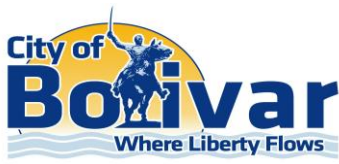
Organization: \_\_\_\_\_ Contact \_\_\_\_\_

Organization: \_\_\_\_\_ Contact \_\_\_\_\_

Do you wish to have special weather briefings and involvement from Emergency Management & N?  
 YES  NO

Please indicate who is planned to provide the following services:

Service	City provided	Dedicated crew	Self provided	Not Applicable
Crowd Control				
EMS Services				
Fire Watch				
Restroom Facilities				



Security				
Street Barricades				
Traffic Control				
Trash clean-up*				

*\*The City reserves the right to charge the event sponsor for clean-up provided by the City.*

In addition to the information provided above, please provide a detailed narrative description of the event. Also provide a map illustrating the locations of the activities planned and requested street barricades. (Except for very limited circumstances, the City will require that a street closing be from cross intersection to cross intersection so that no traffic can turn into closed street.) Please use additional sheets as needed. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I hereby agree that my organization will comply with all City, County and State regulations and those that are specific to public safety.

Signature: \_\_\_\_\_ Print: \_\_\_\_\_

Organization Name: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE USE ONLY**

Date submitted: \_\_\_\_\_

Date scheduled to be presented to Council: \_\_\_\_\_

Emergency Management: \_\_\_\_\_ Date: \_\_\_\_\_

Community Development: \_\_\_\_\_ Date: \_\_\_\_\_

Building Inspector (if applicable): \_\_\_\_\_ Date: \_\_\_\_\_

Fire Chief: \_\_\_\_\_ Date: \_\_\_\_\_

Police Chief: \_\_\_\_\_ Date: \_\_\_\_\_

Public Works Director: \_\_\_\_\_ Date: \_\_\_\_\_

City Clerk: \_\_\_\_\_ Date: \_\_\_\_\_

Date presented to Council: \_\_\_\_\_

Approved  Rejected

Initials: \_\_\_\_\_



**HOLD HARMLESS AGREEMENT**

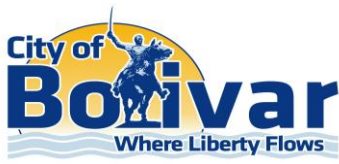
To the extent permitted by law, Sponsor agrees to indemnify, defend and hold harmless the City of Bolivar, its officers, agents, volunteers and employees from and against all suits, claims, damages, losses and expenses, including but not limited to attorney’s fees, court costs or alternative dispute resolution costs arising out of, or related to, Sponsor’s use of city streets, roads, parks, sidewalk or other facilities under this agreement involving an injury to a person or persons, whether bodily injury or other personal injury (including death), or involving an injury or damage to property (including loss of use or diminution in value), but only to the extent that such suits, claims, damages, losses or expenses are caused by the negligence or other wrongdoing of Sponsor, its officers, agents and volunteers, or anyone directly or indirectly employed or hired by Sponsor or anyone for whose acts Sponsor may be liable, regardless of whether caused in part by the negligence or wrongdoing of City and any of its agents or employees.

1. Sponsor shall purchase and maintain the following insurance, at Sponsor’s expense:
  - Commercial General Liability Insurance with a minimum limit of \$1,000,000 each occurrence/\$2,000,000 general aggregate written on an occurrence basis
  - Comprehensive Business Automobile Liability Insurance for all owned, non-owned and hire automobiles and other vehicles used by Sponsor with a combined single limit of \$1,000,000 per accident
2. All policies of insurance must be on a primary basis, non-contributory with any other insurance and/or self-insurance carried by the city.
3. Prior to using City’s facilities or infrastructure under this agreement, Sponsor shall furnish the City with certificates of insurance evidencing the required coverage, conditions and limits required by this agreement, have the City named as an additional insured and provide the appropriate additional insured endorsements.
4. No provision of this agreement shall constitute a waiver of the City’s right to assert a defense based on the doctrines of sovereign immunity, official immunity or any other immunity available under law.

Signature: \_\_\_\_\_ Print: \_\_\_\_\_

Organization Name: \_\_\_\_\_ Date: \_\_\_\_\_

City of Bolivar Representative: \_\_\_\_\_ Date: \_\_\_\_\_



**NOTICE OF OCCURRENCE/CLAIM FORM**

**CONTACT INFORMATION**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Daytime phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_  
Email: \_\_\_\_\_

**INCIDENT INFORMATION**

Incident date: \_\_\_\_\_ Incident time: \_\_\_\_\_  
Incident location: \_\_\_\_\_  
Please provide a detailed description of incident: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PROPERTY DAMAGE**

*Vehicle/Equipment damaged*  
Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_  
License plate number: \_\_\_\_\_  
*Operator*  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Daytime phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
*Building/Structure damaged:* \_\_\_\_\_  
*Contents damaged:* \_\_\_\_\_





Please provide a detailed description of damage: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Total estimated cost of damage: \_\_\_\_\_

**CLAIMANTS**

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Date of birth: \_\_\_\_\_ SSN: \_\_\_\_\_

Description of injury: \_\_\_\_\_

**WITNESSES**

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Email: \_\_\_\_\_

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Email: \_\_\_\_\_

Additional information: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

---

### SUBMISSION CHECKLIST

---

Prior to returning the special event packet to the Emergency Management Department, please ensure all application(s) are fully completed and all necessary details have been included. Please indicate below that this submission is ready to be considered by the City of Bolivar and its Board of Aldermen by checking the following.

For **all** submissions, please make certain the following are included:

- Special Events Permit Application
  - Additional sheets for event description, if necessary
  - Event map
  
- Hold Harmless Agreement
  - Certificates of Insurance
  
- Submission Checklist

Additionally, when necessary, the submission shall include the following:

- Sign Permit Application(s)
  
- Business License Application(s)
  - Copy of State of Missouri Sales Tax License
  - Copy of No Tax Due Statement
  - Affidavit of Exemption for Workers' Compensation