



C+ # \_\_\_\_\_

Permit Issued \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Special Events Application – REVISED 4/3/17

# SPECIAL EVENT APPLICATION

Please submit your **\$75.00 Fee** to the Recreation Department  
**90 Days** prior to the Event Date  
 City of Bethlehem  
 Attention: Recreation Department  
 10 East Church Street  
 Bethlehem, PA 18018

Email: [jstiles@bethlehem-pa.gov](mailto:jstiles@bethlehem-pa.gov) Phone: 610-865-7079

Application Submitted \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Check Amount \$ \_\_\_\_\_  
 Check # \_\_\_\_\_  
 Date Received \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Received By \_\_\_\_\_

Your application, non-refundable seventy five (\$75) application fee and site map **must be received no less than NINETY (90) days prior to your event date**. A map of the site (please use Google Mapping) and/or route **must** be submitted with application. **Please keep in mind that submitting an application, and deposit of non-refundable application fee is in no way to be construed as approval or confirmation of your event.** Your application will **not** be reviewed until your non-refundable application fee and site map are received.

Event Title: \_\_\_\_\_

Event Date: First Choice \_\_\_\_\_ Second Choice \_\_\_\_\_

Event Description: \_\_\_\_\_

\_\_\_\_\_

Event Location (Include Site Name or Address): \_\_\_\_\_

### Event Category (Check all that apply)

- Fireworks \*     Half/Full Marathon     Celebration     Parking Lot/Street Celebration(Private Event)
  - Parade     Festival     Street Race/5K     Walk/Run on Public Property or Sidewalks (circle one)
  - Other (Please Specify): \_\_\_\_\_  **Special Effects\*** (Fire Twirling, Pyrotechnics, Welding, *any type of open flame*)
- \*Fire Permit will be required, please contact the Fire Department 610-865-7143**
- Yes     No    Is this an annual event? If so, how many years have you been holding the event? \_\_\_\_\_

**Parades, walks, runs must submit a route with the application even if it is the same as previous years.**

### Times For Each Event Date

Event Start : DAY 1: \_\_\_\_\_ DAY 2: \_\_\_\_\_ DAY 3: \_\_\_\_\_ Event End: DAY 1: \_\_\_\_\_ DAY 2: \_\_\_\_\_ DAY 3: \_\_\_\_\_

Set up: DAY 1: \_\_\_\_\_ DAY 2: \_\_\_\_\_ DAY 3: \_\_\_\_\_ Clean up : DAY 1: \_\_\_\_\_ DAY 2: \_\_\_\_\_ DAY 3: \_\_\_\_\_

Estimated Participants \_\_\_\_\_

Estimated Spectators \_\_\_\_\_

- Yes     No    Are admission, entry, or participation fees required? If yes, provide amounts \_\_\_\_\_
- Yes     No    Are vendor or other fees required? If yes, provide detailed amounts \_\_\_\_\_
- Yes     No    Are you selling merchandise? If yes, you need to contact the **City of Bethlehem Tax Bureau** and complete a **Business Registration form**.

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

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

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

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Yes     No    Is this Organization a bona fide, tax-exempt, nonprofit entity? If yes, you **must** include a copy of your IRS 501(c)(3) tax exemption letter providing proof and certifying your current tax exempt and non-profit status.

### Applicant Information

Organization Name: \_\_\_\_\_  
Applicant Name (Main Contact): \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
E-mail Address : \_\_\_\_\_

### Site Map

Yes  No A site plan or route map (Google Map) has been submitted with this application (Required for approval of event and permit)  
Please describe your Parking Plan: \_\_\_\_\_  
 Yes  No Are you using tents, structures or a stage? If yes, you must indicate on site map (please show size and location)  
Size? \_\_\_\_\_ (may not be in street or staked into the ground) Please show on site map.

### Medical Plan

Include location of First Aid and Medical Services in your event site map/route plan.  
Please describe your medical plan and types of resources that will be at your event and the manner in which they will be managed and deployed: \_\_\_\_\_  
\*If event has 5000 or more than attendees a PA Special Event Plan is Required 60 days prior to the event. (See EMS Appendix)  
**NOTE:** The City of Bethlehem's EMS has the **Right of First Refusal** and final authority to determine and provide your event medical services requirements.

### Electricity

Yes  No Is electricity requested? (Electricity is limited and only available in certain locations). Please complete and submit the the electrical appendix located on our website – bethlehem-pa.gov  
What are you using electricity for \_\_\_\_\_  
 Yes  No Have you indicated on your Site Map the location of the requested electricity?  
Existing city maintained lighting and outlet circuits may not be used for event power use unless approval is obtained before the event date and time. It is suggested you supply your own power source, i.e. a generator. Electrical outlets are limited and not guaranteed to be operational. **You may be billed for electrical service for your event.**

### Music and Amplified Sound

Yes  No Will live or amplified recorded music be played at the event?  
If Yes, applicant shall independently confirm with music licensing companies and agents (typically BMI, ASCAP, SESAC) whether applicant must obtain a license to present live or recorded music at the event. Applicant shall pay all fees, costs and fines payable to music licensing companies and agents if a license is required. Should any music licensing fees, costs or fines be charged to the City of Bethlehem in connection with your event, applicant agrees that it is contractually liable to pay said fees, costs or fines or indemnify City for same if advanced by City.  
 Yes  No Will sound amplification equipment or system be used at the event?  
If yes, please describe \_\_\_\_\_  
Amplified Sound will be used: Start Time \_\_\_\_\_ End Time \_\_\_\_\_  
**NOTE:** Indicate on the Site Map the location of any stages, sound systems, and direction of the speakers.

### Security

The Bethlehem Police Department will have final approval on the security companies used for events, and the final decision in all matters involving safety and security at events.  
Please describe (or attach) your security plan including crowd control, internal security or venue safety: \_\_\_\_\_

**NOTE:** Approval of your application does not automatically reserve city resources or staff. It is your responsibility to contact and reserve city resources and staff with each city department listed in this application.

### Street Closures

Any requested street closings must be reviewed on a case by case basis. Approval must be reviewed by the **City of Bethlehem Public Works Traffic Bureau and the Police Department**. Please note that state roads that require closure also need a permit from the Pennsylvania Department of Transportation. Along with your map, please describe your **Closure Plan and/or Route and times for the road closures.** \_\_\_\_\_

### Vendors

The City of Bethlehem requires that ALL VENDORS at events have a **valid Business Privilege License and proper insurance**.

Event Organizer must submit a list of vendors to the Recreation Department **30 DAYS** prior to the event date.

All vendors must complete a **Vendor Application**, please contact/submit to the Health Bureau 610-865-7083, the following departments have consolidated this into one process.

Yes  No Does your event include food and/ or beverages?

If yes, please describe the type of food you will have available: \_\_\_\_\_

\*A Health License fee may be required

Yes  No Do you intend to cook and/or keep warm food at the event? \_\_\_\_\_

\*A Fire Permit fee will be required

Yes  No Will the vendor set up in the Right of Way? (Street, Sidewalk or Public Right of Way) **Circle if applicable**

\*A Engineering Permit fee may be required

### Portable Restrooms

It is recommended two (2) chemical or portable toilets for every 500 people attending the event. Federal guidelines require five (5%) percent of these facilities must be ADA accessible. If the event is especially large or lasts more than one day, the restroom will need to be serviced and additional toilet paper/consumables re-stocked, or additional units must be provided.

Portable Restroom Company: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**Equipment Set-Up:** Date: \_\_\_\_\_ Time: \_\_\_\_\_ **Equipment Pick-Up:** Date: \_\_\_\_\_ Time: \_\_\_\_\_

### Recycling and Clean-up Plan

The event organizer **must** recycle and properly dispose of waste & garbage so the area is returned to a clean condition. Failure to properly cleanup will result in additional fees and may result in a denial of future event permits. Event organizers, attendees and vendors must recycle and the event organizer is responsible to provide recycling and trash containers.

**Containers** The City of Bethlehem has recycling containers that can be used for events. A security deposit of \$50 per clearstream recycling bin will be necessary for the equipment. Any loss or damage to the containers will be billed to you after the event at replacement cost. Based on the attendance and duration of your event, dumpsters with lids may be required. The City of Bethlehem does not provide dumpsters for recycling and trash for special events

**Recycling and Sanitation Plan:** How many of each containers are needed for your event: Recycling: \_\_\_\_\_

Request to use City containers  Organizer will provide own containers  Contract with hauler. *Please include copy of contract*

What will be collected from the **public**:  Cans and Bottles  Paper/ Cardboard Products  Other \_\_\_\_\_

What will be collected from the **vendors**:  Cans and Bottles  Paper/ Cardboard Products  Other \_\_\_\_\_

**Clean-up Plan:** please describe your clean-up plan below, include number of volunteers, and plan for discarding the trash/recycling etc.

### Water

Yes  No Are you intending to use hydrants or public water connections? If yes, please provide specific locations.

Use of hydrant or public water requires a Permit from the Water Sewer Resources Department 610-865-7076.

### Alcohol

**Authorization and Insurance:**  Yes  No Do you plan to offer alcoholic beverages **for sale** at your event?

If yes, the following apply: (1) You must receive authorization from City Council and the State of Pennsylvania Liquor Control Board (PLCB); (2) See the notice of insurance requirements for liquor liability insurance.

Yes  No Do you plan to serve/furnish alcoholic beverages **free of charge** at your event?

If yes, the following apply: (1) You must receive authorization from City Council if your event is to be conducted in a "Public Place" as defined in City of Bethlehem Article 723; (2) See the notice of insurance requirements for liquor liability insurance; (3) If you intend to serve alcohol free of charge at your event, the provision of alcohol shall not be conditioned upon (i) the purchase of a ticket for admission to the event; (ii) in exchange for a donation or other fee; (iii) a required purchase or payment that would constitute a sale of alcohol under Pennsylvania Liquor Code.

Please describe your security and carding planning to ensure the safe sale of serving/furnishing of alcohol at your event: \_\_\_\_\_

**NOTE:** The Bethlehem Police Department reserves the right to have the final decision regarding the security presence needed at any event where alcohol is sold or served.

### Insurance Requirements

Before a permit will be issued, you will need to provide proof of the following insurance coverage:

- General Liability Insurance in the minimum amount of \$1,000,000 that names the “City of Bethlehem, its officers and employees” as additional insured. You must provide a certificate of insurance from a licensed insurance agent or the insurer, evidencing the required coverage, to Judy Stiles Recreation Department.
- If you intend to serve alcohol free of charge or to sell alcohol as authorized by City Council under a Use Permit for Public Property, you shall (1) obtain either a liquor liability insurance policy, or a special event liability insurance policy including host liquor liability insurance coverage, or a general liability policy including host liquor liability insurance coverage, that satisfies coverage limits specified by the City, names the “City of Bethlehem”, its officers and employees” as additional insured’s, and is scheduled in force for the duration of the event; (2) provide a certificate of insurance from a licensed insurance agent or the insurer, evidencing the required coverage, to the City of Bethlehem Law Bureau.

Permits will not be issued until all insurance requirements have been received, verified and approved by the City of Bethlehem Law Bureau. If insurance is at any time determined non-compliant in the judgment of the Director of Recreation, a Permit can be rejected or revoked without advance notice. **Please contact the Bethlehem Law Bureau with any questions pertaining to insurance.**

#### Please Note the following additional instructions:

- Insurance coverage **must** be maintained for the duration of the event including setup and cleanup dates. The date(s) of your event **must** be stated on your insurance coverage.
- **The Certificate Holder is: City of Bethlehem, 10 E Church St., Bethlehem, PA 18018**
- All required Insurance Certificates must be accompanied by the additional insured endorsement form with the required language or they will be rejected as non-compliant.
- All required Insurance Certificates must be submitted no later than thirty (30) days prior to the commencement of the event.

### Property Damage

The Permittee and any person responsible for causing equipment or property damage to the licensed premises or City property or equipment are jointly liable to the City for its costs to repair, replace, restore or clean the property damage. The Permittee’s liability hereunder arises contractually and regardless of fault.

### Affidavit of Application

The applicant, and if applicable, the professional event contact, must complete, sign, and date this application and submit application fee to: **City of Bethlehem, Recreation Office, 10 E Church St. Bethlehem, PA 18018 Phone: 610-865-7079.**

Applications may be **faxed to 610-865-7312**, or emailed to [jstiles@bethlehem-pa.gov](mailto:jstiles@bethlehem-pa.gov); however until non-refundable application fee is received, the application will not be reviewed.

I warrant the following with full authority to bind the applicant, also the “organization,” I hereby certify the foregoing statements to be true and correct. Applicant agrees to indemnify and hold harmless the City of Bethlehem, its Mayor, City Council, Officers, Agents, Employees from and against any and all losses, damages, liability, claims, suits, costs, taxes, fees, fines and expenses whatsoever, and music licensing fees, costs and fines charged to the City, also including attorney’s fees, regardless of the merit or outcome of any such claim or suit arising from or in any manner connected to the permitted event. In the event that a possessory interest subject to property taxation is created by this use permit, I agree to pay all possessory interest taxes and the city shall not be liable for the payment of such taxes. I further agree that the payment of any such taxes shall not reduce any consideration paid the city pursuant to this use permit. I certify that I, on behalf of the applicant, am also authorized to bind the organization to be financially responsible for any costs and fees that may be incurred by or on behalf of the event to the City of Bethlehem. Applicant agrees to comply with all permit conditions and rules, including those listed in the special event planning guide and other documents provided by city representatives and understands that failure to comply with any conditions or any violation of law may result in the immediate cancellation of the event, denial of future events and/or criminal prosecution.

#### Additional Items to be considered by Applicant

If any of the below items pertain to your event, please contact the appropriate City Department for further information and List of Fees.

Item	Bureau/Phone Number	Item	Bureau/Phone Number	Item	Bureau/Phone Number
Location Availability (Park)	<b>Recreation</b> 610-865-7079	Sidewalk/Street Usage	<b>Engineering</b> 610-865-7063	Water/Hydrant	<b>Water</b> 610-865-7076
Police/Security	<b>Police Department</b> 610-865-7187	Petting Zoo/Animal Display	<b>Health</b> 610-865-7083	Barricades/Road Closures	<b>Traffic</b> 610-997-7960
Recycling	<b>Recycling</b> 610-865-7082	Street Cleaning	<b>Streets</b> 610-865-7136	Electricity	<b>Electrical</b> 610-865-7108
Tents, Structures & Stages	<b>Code Enforcement</b> 610-865-7091	Restrooms	<b>Recreation</b> 610-865-7079	Law Bureau	<b>Law Bureau</b> 610-865-7012
Food Service	<b>Health</b> 610-865-7083	Sewage Disposal	<b>WWTP</b> 610-865-7169	Ambulance	<b>EMS</b> 610-865-7111
Retail Sales	<b>Tax</b> 610-865-7022	Fire (Roster)	<b>Fire</b> 610-865-7143		

Applicant Name (Print) \_\_\_\_\_  
 Organization \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_