



CITY OF PRIOR LAKE EVENT APPLICATION

PLEASE SUBMIT COMPLETED APPLICATION TO:

Recreation Department

4646 Dakota St. SE

Prior Lake, MN 55372

or via email at abarstad@cityofpriorlake.com

Applicant Name: _____

Name of Agency/Organization sponsoring event*: _____

Address _____ E-Mail Address: _____

Daytime Phone: _____ Alternate Phone: _____ Fax: _____

Name of Event: _____

Proposed Classification Group: _____

Classifications

Group I - Prior Lake City Government: Any event sponsored by the City of Prior Lake including, but not limited to, City Council, Board and Commission meetings, City sponsored/co-sponsored or hosted programs, events and public meetings.

Group II – Prior Lake Civic/Non-Profit Agencies: Any event sponsored by a civic or non-profit agency which is based in or serves the community of Prior Lake. A civic or non-profit group is considered to be based in or serving the community of Prior Lake if it's mailing address is in the City or in the Prior Lake-Savage school district boundaries. Group II includes but is not limited to, Prior Lake-Savage School District, Prior Lake Rotary, Prior Lake Youth Athletic Associations, Prior Lake Chamber of Commerce and Prior Lake-based religious organizations.

Group III – Prior Lake Residents and Businesses: Any event sponsored by a resident, commercial organization or business located or residing in the City of Prior Lake.

Group IV –Other: Any event sponsored by any other person, including but not limited to, League of Women Voters, political meetings, rallies or conventions, etc.

Note: Prior Lake residents and businesses may NOT make reservations for non-Prior Lake based residents and businesses.

Application fee is due at time of application submittal.

All other fees and deposit are due when the application is approved before a permit can be issued.

Date(s) of Event (include setup/tear down): _____

Event Times (include setup/tear down): From: _____ To: _____ Expected Attendance: _____

*Please provide a written communication from the organization who is sponsoring the event which authorizes you, the applicant, to apply for this Community Event permit on its behalf.

Will alcohol be served? (Circle one) YES NO

Note: if alcohol service is a part of your event/activity, you must obtain a liquor license. Please note that there is an additional fee and additional insurance requirement related to alcohol service.

Are you requesting any street closures? (Circle one) YES NO

If yes, please list street(s) and requested closure times.

Note: There may be a cost associated with this.

Are you requesting that parking restrictions be implemented prior to and/or during your event?

(Circle one) YES NO

If yes, please list requested street(s)/time(s) below

Note: City ordinance requires that the notice of parking restrictions must be posted a specified number of hours before the parking restrictions take effect. There is a cost for this service.

Will you be having amplified sound or music at your event?

(Circle one) YES NO

Note: City ordinance requires that an Outdoor Event Permit must be obtained to provide amplified sound at your event. Please note that there is an additional cost for this permit.

Please describe your plans/request/needs for assistance with crowd control, traffic control, overnight security, and onsite emergency personnel/equipment (i.e. ambulance, fire truck, security, escorts.):

Have you attached your emergency action plan? **See attached example**

(i.e. in case of bad weather identifying evacuation and shelters and an emergency contact at the event.)

(Circle one) YES NO

Name/Phone of person onsite that is in charge or evacuating the area:

Are there any additional services requested by the city department? If so, please list:

QUESTIONS:

PLEASE CONTACT THE RECREATION DEPARTMENT AT abarstad@cityofpriorlake.com OR AT 952-447-9820.

SIGNATURE PORTION OF APPLICATION:

Please note that all information contained in this application is considered public data and will be treated as such by the City of Prior Lake.

This form can be filled out and sent to the City of Prior Lake electronically, however, a signature of the applicant is needed. This can be accomplished by printing the signature page and mailing separately with a check for the fees or hand delivering the page with the check for applicable fees to the Recreation Department at the City of Prior Lake. At this time, the City is unable to accept signatures and funds electronically.

INSURANCE, INDEMNIFICATION AND WAIVERS:

Applicant agrees that in the event Applicant's application is granted by the City, Applicant shall defend, indemnify and hold harmless the City and its officials, employees and agents from any liabilities, judgments, losses, costs or charges (including attorneys' fees) incurred by the City or any of its officials, employees or agents as a result of any claim, demand, action or suit relating to any bodily injury (including death), loss or property damage caused by, arising out of, related to or associated with this application, the event and/or the use of City property or facilities by the Applicant of the Applicant's guests or invitees, except to the extent caused by the sole negligence, gross negligence or willful misconduct of the City or its officers, employees or agents.

I hereby certify that all of the foregoing statements are true and accurate to the best of my knowledge.

I further understand that the City may charge a fee for the community events. In no event will I acquire any rights, title, or interest in the public property whatsoever; and the City may cancel my use of the property any time with or without prior notice to me.

I further understand that in granting this permit the City is not waiving compliance with other laws, rules or regulations and, further, that I am responsible for obtaining any other required permits or licenses.

Applicant(s):

Printed Name:

Signature:

OFFICE USE ONLY

Fees:

Application Fee: _____

Date Paid: _____

Deposit: _____

Date Paid: _____

Additional Fees or Costs: _____

Date Paid: _____

Outdoor Event Permit: _____

Alcohol Permit: _____

Insurance: _____

Public Works Comments: _____

Police Department Comments: _____

Fire Department comments: _____

Additional Requirements:

Approved: _____

Denied: _____

Date: _____ By: _____