

Event Checklist Application
*Must be submitted at a minimum of 20 days prior to event.

Idaho City Clerk's Office Monday-Thursday 8:00am to 4:30pm Friday 9:00am to 3:00pm 511 Main St. Idaho City, ID 83631 PO Box 130 Idaho City, ID, 83631 (208) 392-4584

> idahocityclerk@cityofic.org idahocityoffice@cityofic.org

There is a \$52.50 (\$26.25 for nonprofit,\$15.75 for student) Application Fee for each Event Checklist

Event Overview			
Event Name:			
Event Sponsor:			
Address of Event:			
Time(s) and Date(s) of Event:			
Person in charge:Contact Number:			
Number of Attendees: Email:			
Event Set-Up and Take Down Times and Dates:			
Type of Event (what event encompasses):			
List any entrance or participation fees that will be charged (if applicable) or N/A:			
General Questions		YES	NO
Is your event charitable / nonprofit? 501c3#			
Event sponsor has read the Idaho City Park Policy and/or the Historical Foundation Policy & agree	ees to comply?		
Is the event free?			
Is this a ticketed event?			
Will your event have food (either provided or available for purchase)? (If yes, please fill out Food Sec	etion)		
Will your event have vendors (food, cottage industry, service provider, etc.)? (If yes, fill out Vendor)	Section)		
Will there be promotional signage at your event? (If yes, please provide examples)			
Will your event have alcohol (either provided or available for purchase)? (If yes, fill out Alcohol Section 2)	ion) *Fee required		
Will your event require a park reservation (John Brogan Memorial, Naylor Park, Rodeo Grounds, et	tc.)? *Fee may be required		
Will your event have road closure or parade?			
Will your event be held after hours (between dusk to dawn)? *Fee required			
Site Plan Attached? (site plan showing exact locations of all the different function of the event (I spaces; vendor areas; alcohol serving area; emergency services; first aid stations; trash receptacle proposed parking uses, etc.)	es; porta potties;		
Are you proposing to use electrical generators or amplified sound systems? (If yes, show their loplan and describe below what they will be used for & what precautions will be taken to see they a safely. If amplified sound will take place after 11pm a noise variance will be required.) *Fee may	are used properly and		

A fee for council approved events will be set at \$25.00 an hour per officer to cover the additional coverage of law enforcement if deemed necessary. The number of hours for events will be determined by the Idaho City Chief of Police. If after-hours work is required the fee shall be \$37.50 an hour per officer for those times. Those hours will be determined by the Idaho City Chief of Police.

Emergency Service, Security, and Lost Child Plans

All Events are required to provide security, and emergency service plans to ensure the safety of event attendees. Some events may be allowed to provide private security. Plans must include location of services during the event, signature from security and emergency service provider, date(s), and times the services will be provided, and contact information for the security and emergency services). All emergency service and security plans must receive approval by the Idaho City Police Department.

This form must be completed and then signed by both EMS & ICPD prior to submitting to the city.

The number of required private security staff is based on the number of event attendees:

- For 0-1,000 attendees at least two (2) security staff are required at all times.
- For each additional 1,000 attendees one (1) additional security staff is required at all times.

Have you scheduled emergency services (EMS)? Have you scheduled private security? Based on expected attendance, how many security staff will be staffed at all times? Security Company: Company Contact Person: Company Email: Phone: Dates & Times of				YES	NO
Have you scheduled private security? Based on expected attendance, how many security staff will be staffed at all times? Security Company: Company Contact Person: Company Contact Person: Detailed Security Plan: Detailed Security Plan: Detailed Security plan for dealing with lost child(ren): Phone: Detailed EMS Plan: Detailed EMS Plan: First Aid/Information Table Location(s) of First-Aid Station: Type(s) of First-Aid Provided:	Have you scheduled security with ICPD?				
Based on expected attendance, how many security staff will be staffed at all times? Security Company: Company Contact Person: Company Email: Phone: Dates & Times of service: Onsite Contact Name: Phone: Detailed Security Plan: Detailed security plan for dealing with lost child(ren): Detailed Security Plan: First Aid/Information Table Location(s) of First-Aid Station: Type(s) of First-Aid Provided:	Have you scheduled emergency services (E	EMS)?			
Security Company: Company Email: EMS Company: Dates & Times of Service: Onsite Contact Name: Phone: Detailed Security Plan: Detailed Security plan for dealing with lost child(ren): Detailed EMS Plan: First Aid/Information Table Location(s) of First-Aid Station: Type(s) of First-Aid Provided:	Have you scheduled private security?				
Company Contact Person: Company Email: EMS Company: Dates & Times of service: Onsite Contact Name: Detailed Security Plan: Detailed security plan for dealing with lost child(ren): Detailed EMS Plan: First Aid/Information Table Location(s) of First-Aid Station: Type(s) of First-Aid Provided:	Based on expected attendance, how many s	security staff will be staffed at all times?			
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EMS Company: Phone: Dates & Times of Service: Onsite Contact Name: Phone: Detailed Security Plan: Phone: Phone:					
EMS Company: Dates & Times of Service: Onsite Contact Name: Phone: Phone:	Company Email:		Phone:		
Detailed Security Plan: Detailed Security plan for dealing with lost child(ren): Detailed EMS Plan: First Aid/Information Table Location(s) of First-Aid Station: Type(s) of First-Aid Provided:	EMS Company:				
Detailed security plan for dealing with lost child(ren): Detailed EMS Plan: First Aid/Information Table Location(s) of First-Aid Station: Type(s) of First-Aid Provided:	Dates & Times of service:	Onsite Contact Name:	Phone:		
Detailed EMS Plan: First Aid/Information Table Location(s) of First-Aid Station: Type(s) of First-Aid Provided:	Detailed Security Plan:				
First Aid/Information Table Location(s) of First-Aid Station: Type(s) of First-Aid Provided:	Detailed security plan for dealin	ng with lost child(ren):			
First Aid/Information Table Location(s) of First-Aid Station: Type(s) of First-Aid Provided:	Datalled EMC Dlane				
Location(s) of First-Aid Station: Type(s) of First-Aid Provided:	Detailed EMS Plan:				
Location(s) of First-Aid Station: Type(s) of First-Aid Provided:		First Aid/Information To	.hla		
Type(s) of First-Aid Provided:	I di () CE di India				
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Parking			
Primary Parking Location: Overflow Parking Location:			
List parking fees that will be charged (if applicable):			
Parking Plan Description:			
To General			
Traffic Control	YES		NO
Heathe sites and/on assents have contacted shout read alsource?			
Has the city and/or county been contacted about road closures?			
Traffic Control Company:			
Company Contact Person: Company Email: Phone:			
Traffic Control & Road Closure Description:			
Tranic Control & Road Closure Description.			
Parade Formation Location & Hours:			
Turde Tollhauton Bocation & Hours.			
Parade Dispersal Location & Hours:			
Alcohol		YES	NO
Will alcohol be a part of your event? (If so an alcohol variance will be required.) Will alcohol be consumed or possessed at the event, but not offered for sale? (If so, if more than a keg or three (3) are possessed but not offered for sale, a permit must be secured from the city.) Will alcohol be offered for sale? (If yes, proper permits must be secured from the State of Idaho and the City of Idaho and a designated area for sale and consumption is required. Show the location of this designated area on you plan.) Alcohol catering permits must be obtained and presented with this event checklist for approval. Catering OR Benevolent, Charitable, and Public Purpose Events Permit Holder: Type(s) of alcohol to be served at event: Serving times for alcohol (to/from): Type(s) of serving containers: *Alcohol catering permit required from the Idaho City Clerk OR Alcohol Permit for Benevolent, Charitable, ar from Idaho State Police (ISP) Detailed plan for age verification (wristbands, ID check, etc.):	daho ur site	Purpose	Events
Detailed alcohol security plan:			
Attach photos of alcohol area signage that will be displayed at event. Attach detailed map of serving location (including entrances and exits). Attach photo of wrist band. Attach completed/approved Alcohol Catering Permit - https://idahocity.municipalimpact.com/documents/170/Alcohol Catering Application.pdf OR Approved Benevolent Charitable and Public Purpose Events from Idaho State Police (ISP)	d Alcohol	Permit f	`or

Food/Vendors		
How many vendors will need electricity?		
List vendor fees that will be charged (if applicable) or N/A:		
	YES	NO
If food is being served, the proper permits from Central District Health (CDH) & Idaho City Clerk must be secured & submitted. *Required		
Has the Public Works Department been contacted to schedule vendor electrical inspections, etc.?*	4594	
*Electrical inspection required for events – please contact the Public Works Department at (208) 392	2-4584	
If you will have vendors at event: Provide a complete list of participating vendors prior to your event.		
Restrooms		
	YES	NO
Will you be bringing in additional Porto-Potties?		
N. A. O. D.		
Number of Restrooms:		
Number of ADA Restrooms:		
Location of Restrooms:		
Porto-Potty Company: Phone:		
Refuse		
	YES	NO
Have you contacted Idaho City Public Works (208) 392-4584? Describe below your plans for trash disposal. What are your plans for trash collection and containment, receptacle location cleanup?	ons and aft	er-event
Location of trash carts:		
Detailed refuse plan for collection, containment, and after event clean-up:		
Event and Promotional Signage		
☐ Attach photos of signage as well as dimensions of each sign (required at least 10 days prior to event).		
Miscellaneous		
*Required for all events: Detailed public notification plan (how will you be letting the public know your event is h	appening	and how
street closures, noise, etc. might affect them)		

Attachment Checklist		
	YES	N/A
Limited Liability Insurance Plan (\$1,000,000 in the name of City of Idaho City)		
Event Location Map – Site Plan (all areas identified)		
Schedule of Events		
Detailed Security Plan Requiring Approval by the Idaho City Police Department		
Detailed Emergency Services Plan Approval by the Idaho City Police Department		
Traffic Control & Parking Plan	$\overline{}$	
Complete List of Participating Vendors.		
Vendor Permits & Fees		
Confirmation of Event Registration with Central District Health (CDH)		
Photos of Event and Promotional Signage with Dimensions		
Approved Alcohol Catering Permit/Permit for Benevolent, Charitable, and Public Purpose Events		
Photos of Alcohol Area Signage		
Map of Alcohol Serving Area (including entrances and exits)		
Photo of alcohol wristbands (if applicable)	$\overline{}$	
Public Notification Letter		
Park Reservation Receipt.		
Other Pass-Through Cost Receipt(s)		
Refuse Plan		
Community Hall and/or Rodeo Grounds Reservation Information		
Noise Variance Application		
Event Fees:		
		Amount
□ Rodeo Grounds / Amphitheatre fee schedule: • Non-profit groups \$82.50/day plus (\$4.95) 6% use tax	\$	
- City Residents, Groups, & Local Government \$185.00/day plus (\$11.10) 6% use tax	\$	
• Non-City Residents, & Groups \$370.00/day plus (\$22.20) 6% use tax	\$	
• The following security deposit is required, refundable if rental requirements are completed: \$150.00 Cleaning deposit will be forfeited if the grounds/ Amphitheatre / parking area are not in same condition as found or	\$	
better, and the key (if used) is not returned. Exceptions may be set by the City Council based on recommendation from	n	
the Idaho City Parks and Recreation Commission.		
Alcohol Catering Permit\$20/day (3-day limit)		
□ Food Vendor Permit Fee\$17.00/day (3-day limit)	\$ \$	_
□ Vendor License Daily Fee\$17.00 (Non-profit \$7.75)		
□ Vendor License Yearly Fee (Non-refundable) \$56.50 (Non-profit \$25.75)		
□ Carnival or public entertainment with less than 10 concessions, rides, or sideshows, daily fee	\$	
\$227.00 Carnival or public entertainment with more than 10 concessions, rides, or sideshows, daily fee shall be \$22.50 p	••••	
□ Carnival or public entertainment with more than 10 concessions, rides, or sideshows, daily fee shall be \$22.50 pconcession, ride, or sideshow		
• An additional event license fee may be required for carnivals, public entertainment, or sponsored events in an amount		
approved by the City Council as meeting the city's expenses related to the activity, including but not limited to the provision of Public Works and Police	ne	
 A permittee for a carnival, public entertainment, or sponsored event shall establish financial responsibility in the form of an insurance policy issued jointly to the owner and the City of Idaho City in the minimum amount of one millidellars, single limit. 		
□ Pass through Costs (Electricity, Safety Services, Public Notification, Other)	\$	
□ Law Enforcement Fee \$25/hr. per officer (determined by Chief of Police)		
• After Hours Fee \$37.50/hr. per officer (determined by chief of Police)	····· \$	
Community Hall Fees	\$	
 Nonprofit groups \$44.00/day plus (\$2.64) 6% use tax City Residents, Groups, & Local Government \$165.25 plus (\$9.92) 6% use tax 	*****	
• Non-City Residents, & Groups \$330.50 plus (\$19.83) 6% use tax	\$	
- A \$150.00 deposit required; refundable if rental agreement requirements are completed	••••	
The council can waive a portion of the fee or set a monthly use fee for groups desiring to use the hall and a set schedule for class or multi-day event	ra \$	
□ Temporary Noise Ordinance Application / Noise Variance. \$52.50 profit, \$26.25 non-profit, \$15.75 student	\$	
Event Checklist Fee (\$52.50 profit; \$26.25 non-profit; \$15.75 student)		
TOTAL I	•	

ICPD & EN	MS Use Only			
Number of daytime officer hours needed @\$25/hr				
Number of After-Hours officer hours needed @\$37.5/hr				
			YES	NO
Is this Event Checklist Security & EMS Plan approved by ICPD?				
Is this Event Checklist Security & EMS Plan approved by EMS?				
			<u>l</u>	
Chief of Police, City of Idaho City	EMS			
Boise County Sheriff's Office (if applicable)	Idaho City Fire Pro	tection District (if a	nnlicahle)	
		ecerion Bisi. tet (g uj	ppeuc.re)	
Office \	U se Only		· · ·	N/O
			YES	NO
Event Checklist application fee collected? Card Cash Check	Receipt #			
All applicable fees collected?				
Have all applicable attachments been received and reviewed?				
Is this Special Event Plan approved?		NA 🖂		
Alcohol variance approved?	□ p :"	NA □ │ NA □		
Noise variance approved, & fee collected? Card Cash Check	Receipt #	NA 📙 [
EC Application #:	Date of Approval:			
Special Comments/Instructions				
City Clerk	Parks Director (if applied	cable)		
You must keep a copy of your approved event				
checklist on hand at your event.	City of Idaho City Se	eal		
For Questions or to Submit:				
Contact the Idaho City Clerk's Office Monday-Thursday 8:00am to 5:00pm				
Friday 9:00am to 3:00pm				
511 Main St, Idaho City, ID 83631				
PO Box 130, Idaho City, ID, 83631 (208) 392-4584				
idahocityclerk@cityofic.org				
idahocityoffice@cityofic.org				
Contact Information:				
Idaho City Historical Foundation: Phone: (208)-392-4550	F	Email: president@	idahocityh	ıf.org

Idaho City Police Department: Chief Brent Watson Phone: 208-392-4596 Email: <u>idahocitypd.194@cityofic.org</u>

East Boise County Ambulance District: Phone: (208) 392-6644 Email: ebcaddirector@co.boise.id.us

OFFICE USE ONLY

Rodeo Grounds Walk Through:				
Initial walk through performed with public works? Comments:		□ NO		
Final walk through performed with Public Works? Comments:	□ YES			
After event comn	nents:			
Was the site cleaned up properly in a timely fashion? Comments:	□ YES	□ №		
Did the event sponsor meet all of their obligations and responsibilities? Comments:	□ YES	□ NO		
Should this party be allowed to use the city property again? Comments:	□ YES	□ NO		
Signed:				