

PRIVATE EVENT APPLICATION

Town of Ocean City, Maryland

NON-REFUNDABLE APPLICATION FEE:

\$100.00 For Profit Applicants, \$25.00 Non-Profit Applicants

RETURN APPLICATION TO:

Private Events Coordinator
Town of Ocean City
Recreation and Parks
200 125th Street
Ocean City, MD 21842
LMitchell@oceancitymd.gov

This is an application for use and is not a permit of use. No guarantee of availability or use is made or implied by the acceptance of the application and fee.

This application is to be completed and forwarded to the Ocean City Special Events Department at least 90 days prior to the requested event. If an application is submitted less than 90-days prior to the proposed start date, a late submission fee of \$100.00 will be assessed for both Non-Profit organizations and For-Profit promoters. A new application must be submitted annually for recurring events.

Any misrepresentation in this application or deviation from the final agreed upon route and/or method of operation described herein may result in the immediate revocation of the permit. Applicant's attention is directed to the accompanying information packet, entitled "Private Event Application Guidelines."

All questions on the application must be fully answered. "Same as last year" or similar comments are not acceptable responses. If a question does not apply, please write "N/A" in that space. The application will be returned if the information is incomplete. Please type or print the information clearly. You may attach additional sheets as necessary.

***A non-refundable application fee must accompany this document.
\$100.00 For-Profit Promoters and \$25 Non-Profit Organizations***

The minimum fee for City property usage is \$150 per day for For-Profit promoters and \$25.00 per day for Non-Profit organizations. For beach use this fee is applied per ocean block, per day. Races/runs/walks on the beach do not require a per block charge. Set-up and breakdown days are also subject to this fee assessment.

1. TITLE OF EVENT: _____

2. IS THIS A NEW EVENT? _____

3. DATE(S) OF EVENT _____

4. STARTING & ENDING TIMES OF EVENT: _____

5. PROJECTED SET-UP DATE (S) & TIMES: _____

6. PROJECTED CLEAN-UP DATE (S) & TIMES: _____

7. LOCATION (Describe area in which event shall be contained; be specific as to how much area will be used, etc.): _____

8. APPLICANT'S NAME: _____

9. ORGANIZATION REPRESENTING: _____

10. MAILING ADDRESS: _____

11. WORK PHONE # _____ HOME PHONE # _____

FAX: _____ EMAIL: _____

12. IF ORGANIZATION IS NONPROFIT, YOU MUST SUBMIT A LETTER OF PROOF OF NON-PROFIT STATUS: _____

13. ON-SITE EVENT COORDINATOR: _____

14. OCEAN CITY/LOCAL ADDRESS OF COORDINATOR: _____

15. COORDINATOR'S CONTACT NUMBERS:

HOME: _____ WORK: _____

FAX: _____ CELL: _____

E-MAIL ADDRESS: _____

OTHER: _____

22. DESCRIBE ANY SPECIAL PARKING/TRAFFIC NEEDS OR CONSIDERATIONS (Be aware that additional charges may be assessed.):

23. HAVE ARRANGEMENTS BEEN MADE FOR MEDICAL ASSISTANCE? _____
IF SO, WHAT TYPE? _____

24. WHAT IS YOUR RAIN POLICY? _____

25. WHAT PROVISIONS WILL BE MADE FOR COLLECTION AND DISPOSING OF SOLID WASTES, INCLUDING TRASH, GARBAGE AND RECYCLABLES?

26. WHAT PROVISIONS WILL BE MADE FOR PARTICIPANT "COMFORT" (TOILETS, HAND WASHING, ETC.)? _____

27. DESCRIBE CONCESSIONS/SALE ITEMS REQUESTED: _____

28. DESCRIBE ALL PRODUCT SAMPLING REQUESTED (SPECIFIC SIZES & QUANTITIES): _____

29. WILL REVENUE BE GENERATED FROM PARTICIPANT FEES, CONCESSIONS, SPONSORSHIPS OR ANY OTHER SOURCE? _____
IF SO, WHO WILL THE PROCEEDS BENEFIT? _____

30. DESCRIBE EVENT PRIZES/AWARDS: _____

31. WILL YOU BE OFFERING A RAFFLE AT YOUR EVENT? _____
Please forward a copy of the approved "One Day Raffle Permit," to the Private Events Coordinator.

32. WILL YOU BE ERECTING A TENT AT YOUR EVENT? _____
Please forward a copy of the approved "Tent Permit," from the Office of the Fire Marshal to the Private Events Coordinator.

33. WILL YOU BE HAVING AIR-INFLATED STRUCTURES AT YOUR EVENT? _____
Please forward a copy of the approved "Air Support/Air-Inflated Structures Permit," to the Private Events Coordinator.

34. WILL YOU BE HAVING A BONFIRE AT YOUR EVENT? _____
Please forward a copy of the approved "Bonfire Permit," to the Private Events Coordinator.

35. WILL YOU BE HAVING FIREWORKS AT YOUR EVENT? _____
Please forward a copy of the approved "State of Maryland Fire Marshal Fireworks Permit," to the Private Events Coordinator.

36. DO YOU EXPECT TO SERVE/SELL/DISTRIBUTE ALCOHOLIC BEVERAGES AT YOUR EVENT? _____ IF SO, PLEASE DESCRIBE INTENT (include beverage type, quantities, drink sizes, location, etc.): _____

Please forward a copy of the approved "One Day Alcohol Permit," if required, to the Private Events Coordinator.

37. EXPECTED NUMBER OF PARTICIPANTS: _____

38. EXPECTED NUMBER OF SPECTATORS: _____

39. IF YOUR EVENT TAKES PLACE ON THE BEACH, YOU MUST NOTIFY THE APPROPRIATE BEACH FRANCHISE OWNER OF THE INTENDED EVENT. HAVE YOU DONE SO? _____ WHO DID YOU CONTACT? _____

40. WHAT ASSISTANCE AND SUPPLIES WILL YOU BE REQUESTING FROM THE TOWN OF OCEAN CITY (A refundable damage/repair bond of \$100.00 is required for each major end-item borrowed from the Town of Ocean City):

41. A STATE HIGHWAY PERMIT MUST BE OBTAINED FOR USE OF ANY STATE PROPERTY (ROADS, HIGHWAYS, ETC.) HAVE YOU ALREADY OBTAINED THIS PERMIT? _____ IF SO, PLEASE ATTACHED A COPY TO THE BACK OF THIS APPLICATION.

Please forward a copy of the approved "MDOT Highway Permit" to the Private Events Coordinator once you receive it.

42. *For parade organizers only:* EXPECTED NUMBER OF OVERSIZED VEHICLES (LARGER THAN 12 FT TALL, 8 FT WIDE AND/OR 20 FT. LONG) TRAVELING THE PARADE ROUTE: _____ DESCRIBE: _____

43. LIST LOCATIONS AND DATES FOR PRIOR EVENTS HELD THE PAST FIVE (5) YEARS: _____

44. LIST ALL SPONSORS ASSOCIATED WITH YOUR EVENT (Please read and comply with the Town of Ocean City’s sponsorship policy. The application will not be approved without sponsors. If no sponsors, please state “No Sponsors” in area provided below.): _____

45. LIST ADDITIONAL COMMENTS AND/OR REQUESTS NO COVERED IN THIS APPLICATION: _____

46. PLEASE ATTACH A DETAILED DIAGRAM OF EVENT LAYOUT. MAKE SURE YOU INCLUDE LOCATION OF HEADQUARTERS, PA SYSTEM, STAGE, CONCESSIONS, COURTS, BANDS, ETC.

IS DIAGRAM INCLUDED WITH APPLICATION? YES _____ NO _____

An event diagram MUST be included for an event to be considered.

INSURANCE REQUIREMENT:

For the protection of the public and the Mayor and City Council, the applicant must obtain, at the applicant’s own expense, general liability insurance coverage, which shall include coverage for personal injury in the amount of one million dollars (\$1,000,000) single limit. Said insurance coverage shall name the Mayor and City Council as additional insureds, with the address on the certificate listed as 301 Baltimore Avenue, Ocean City, Maryland 21842. A copy of the Insurance Policy Addendum, showing the addition of the Mayor and City Council as additional insured, is also to be provided. The certificate of insurance and the addendum shall be furnished to the Private Events Coordinator, no later than 30-days before the private event.

INSURANCE CERTIFICATE AND ADDENDUM:

_____ INCLUDED WITH APPLICATION

_____ TO BE OBTAINED AND FORWARDED NO LATER THAN THIRTY (30) DAYS PRIOR TO THE EVENT

COCA-COLA EXCLUSIVE PRODUCT AGREEMENT DISCLOSURE:

The applicant must comply with all provisions of the Town’s agreement with Coca-Cola Refreshments as it pertains to the distribution or sales of beverages by the applicant on Town property. The applicant agrees to sell, dispense or serve only Coca-Cola beverages on Town premises for the duration of the permitted use.

The applicant is expressly prohibited from using the beverages of other suppliers, said beverages to include soft drinks, juices, sport drinks, specified energy drinks and bottled waters. The permitted beverages include Coca-Cola, Diet Coca-Cola, Sprite, Pibb Xtra, Mello Yello, Nestea, Arizona Tea, Barqs Root Beer, Fanta, Minute Maid, PowerAde, Fuze Juice, Monster, Tum E Yummies, Dasani and other products that Coca-Cola may provide in accordance with its agreement with the Town of Ocean City.

I have read this disclosure and agree that I will comply with its provisions.

APPLICANT’S SIGNATURE _____ DATE _____

LOCAL ORDINANCE DISCLOSURE AND COMPLIANCE

The applicant agrees to comply with the provisions of *all* applicable ordinances of the Town of Ocean City. Specifically all permitted uses on or within 75 feet of the Boardwalk are required to comply with the provisions of chapter 62 of the Code which expressly prohibits the public sale, rental or exchange for a donation of any goods, wares, merchandise, foodstuffs, refreshments or other commodities or services.

I have read this disclosure and will comply with *all* provisions of the local ordinances including Chapter 62 of the Town Code.

APPLICANT’S SIGNATURE _____ DATE _____

HOLD HARMLESS CLAUSE:

Permitted (organization/applicant) shall assume all risks incident to or in connection with the permitted activity and shall be solely responsible for damage or injury, of whatever kind or nature, to person or property, directly or indirectly arising out of or in connection with the permitted activity or the conduct of Permitted’s operation. Permitted hereby expressly agrees to defend and save the Town of Ocean City, its officers, agents, employees and representatives harmless from any penalties for violation of any law, ordinance, or regulation affecting its activity and from any and all claims, suits, losses, damages, or injuries directly or indirectly arising out of or in connection with the permitted activity or conduct of its operation or resulting from the negligence or intentional acts or omissions of Permitted or its officers, agent and employees.

APPLICANT’S SIGNATURE _____ DATE _____

MANDATED CHANGES/CANCELLATION

Applicant understands that any event or event date can be changed or canceled at the direction of the Mayor and City Council if the approved event interferes with Public Works project(s) or any other necessary governmental function. Such action may be directed at any time.

APPLICANT'S SIGNATURE _____ DATE _____

PRIVATE EVENT APPLICATION COMPLIANCE REQUIREMENT

The applicant for the private event described in this application agrees to follow guidelines provided and submit a complete application including all required submission of materials.

The applicant agrees to take full responsibility for all city-owned property, whether borrowed, leased or rented, and understands that necessary replacement and/or repair fees may be assessed should such property be in an unacceptable condition.

The applicant agrees to abide by all provisions of the private event permit granted by the Town and agrees to pay all fees and costs assigned to the permit. The applicant further agrees to comply with all conditions of the use permit, which may be required by the Mayor and City Council of the Town.

I have read and will comply with all special event application requirements.

APPLICANT'S SIGNATURE _____ DATE _____



Town of Ocean City Department of Tourism
 Calendar of Events Listings
 Return to: Norma Dobrowolski
 4001 Coastal Hwy.
 Ocean City MD 21842
ndobrowolski@ococean.com
 410-289-2800
 410-289-0058 Fax

We invite you to send us your event information for our tourism listings on www.ococean.com. The O C Dept. of Tourism reserves the right to edit and approve publication of each event. Your event should be open to and of interest to OC visitors. Your event information may be widely distributed. It is important that the event actually takes place in the time and date specified. Not all events will be appropriate for this website. Fundraisers, community interest projects, etc., may be placed on community bulletin channels.

Name of Event: _____

Dates: _____ Year: _____

Address/Venue: _____

Times of Event for Public Attendance: _____

Admission Fees _____

Contact Name: _____

Contact Phone: _____

Website: _____

Email: _____

Face book: _____

Twitter: _____

Other Social Media: _____

Description of Event: _____

(The information below will not be published)

Person providing this information _____

Mailing Address: _____

City, State, Zip. _____

Phone: _____ Email: _____