

**Cathedral City** 

CITY OF CATHEDRAL CITY (760) 770-0374 Fax - (760) 202-1460 55-700 Avehida Laio Guerrero Cathedral City, CA 92234-7031 (Staff Use Only)

Case No.:

Sup # 14-002 Related Files

## OPMOIAL USE PERMIT FOR TOWN SQUARE

It is advisable to submit applications for review 60 days prior to commencement of the use or event to ensure adequate review of the application. If you have any questions while completing this application, please ask a member of the Planning Department for assistance. In addition to this application, you must reserve a date for your event with the Planning Department. For recurring events, a schedule must be submitted every 3 submitted with the completed application. Depending on the type of event, you may be required to provide a Clean-up/Damage Deposit. Incomplete applications will not be accepted (or process may be delayed). Per the City Council, Carnivals or Circuses are not allowed in the Town Square. All applicants for eyents in the. Town Square must be Non-Profit Groups subject to Sections 501 (c) (3), 501 (c) (4), 501 (c) (5), 501 (c) (6), 501 (c) (7) 501 (c) (8) 501 (c) (10) AND 501 (d) (19) of the Internal Revenue Gode (PLEASE PRINT OR TYPE)

CHECK TYPE OF USE OR EVENT ☐ Festival ☐ Parade/Pace/Marallises	☐ Concert  TÎ Olhe: Opesial Event
Will food be prepared or served:  Will alcohol be served:  Will there be live entertainment:  Will there be searchlights:  □ Yes □ No  □ Yes □ No	own 10:00 am/pm h R · M nm/m □ 500-1,000 □ 1,000-4,000 □ over 4,000  n of their application. (See staff for FAA application).
For the following, please use an attached sheet of Will there be loud speakers or amplification: Ye Will streets or driveways be temporarily closed: D What kinds of temporary structures will be used an Aight Aight (MA)	s 🗆 No Ves 🕱 No (If yes, provide details on attached Site Plan)

Will the event require Police, Fire, or Public Works Department assistance? ☐ Yes 💆 No
Will there he private security? □ Yes K No
The billable rate for police officers is \$65 an hour and will be billed to the applicant.
SUBMITTAL REQUIREMENTS:
<ul> <li>□ Application Fee: \$510</li> <li>□ Non-Profit License.</li> <li>□ Clean-Up/Damage Deposit of \$600 may be required.</li> <li>□ 4 copies of Site Plan using form provided by staff (attached)</li> <li>□ Please show location of the event, including buildings, temporary improvements, portable restrooms, vendor locations, parking areas and driveways.</li> <li>□ Show any street closures on the attached Site Plan.</li> <li>□ Show the location of any lighting, generators, and/or restrooms on the attached Site Plan.</li> <li>□ Chew leastion of refuse centainers and dumpsters on the attached Site Plan.</li> <li>□ Chew leastion of refuse centainers and dumpsters on the attached Site Plan.</li> </ul>
If event is on City property or public right-of-way, provide insurance policy or policies naming the, its officers, agents and employees as additional insured, issued by a company satisfactory to the City Attorney, and in an amount determined to be adequate for the risks involved in the activity, as determined by the Community Development Director.
☐ Proof of Insurance for \$1,000,000 for Linkly. ☐ Provision of Health Permits, ABC License, Building Permits and/or Resale Permits. All Riverside County Health Department requirements must be satisfied.
□ Previous of any office Pousite required by City Pto\n or Findoral Countriments □ Food is prohibited from being served on the steps of City Hall. □ Signage Plan for street closures and directions to the event.
<ul> <li>□ Any event that has more than 3 occurrences needs annional from the City Council</li> <li>□ A quarterly schedule needs to be approved by the City for recurring events. This includes dates, times, and entertainers.</li> </ul>
ADDITIONAL INFORMATION (Provide any necessary general information regarding event or any special needs for the event. Attach additional sheets if necessary.)
APPLICANT)
Name: My Franz Phone Number: 760-770-0100 ex 8 Company: Churchediel City High School That Number: 760 770 0:59  Address: 69250 Dizah Short Dr City: Cathedral City Zip Code: 92234
Address: 69250 Dinah Share Dr City: Cathedral City zip Code: 92234_

EMERGENCY CONTACT (Contact person should the Name: Lay France Company: Catholical Company: Catholical Company)		Teafes Cily:	Phone Number: Hab	499-3754
Inva cartify (or dociaro us foregoing is true and compared by Print Name:  Signature:		undor the la	nwe of the State of Califo	ornia) that the
DETERMINATION OF AP	PLICATION (Staff Use	Only)		_
ACTION TAKEN:   If approved, see attach Could denied, provide reasons		NIED		
APPROVED BY:			DATE:	
Date/Time Received:	Received By:	-	Amount Received:	Receipt No(s):

