**What is a Special Event Application?**

Special Event Applications are to be filed through the Community Services Department for any planned event consisting of 100 or more persons, animals or vehicles, amplified sound or combination thereof, upon any park, public building, sidewalk, public right of way, easement or other publicly owned space within the City of Fontana being held to provide public benefit through recreation, service or entertainment based activities.

**Submitting a Special Event Application**

1. Complete the Special Event Application and all appropriate paperwork **no less than 120 calendar days in advance and no more than six months in advance of the proposed use**.
2. Return completed application and **$25 Special Event Application Fee** to:
   Community Services Department  
   Attn: Special Events Division  
   16860 Valencia Ave.  
   Fontana, CA 92335
3. Upon receipt of request, staff will verify eligibility and coordinate the processing and responses from other City departments and contact the applicant regarding their application status. All applications will be either approved, denied or conditionally approved as deemed necessary by the Community Services Department.
4. **Fees:** Once an application is approved, the applicant shall pay the remainder of such application fees, no less than 30 calendar days in advance of the proposed use.
5. **Insurance:** Insurance in the form and amount deemed appropriate by the City, shall be provided by the applicant at no cost to the City. Insurance must also name the City of Fontana as additionally insured and a certificate must be submitted no less than 30 days prior to event. On a case by case basis additional liability insurance and security personnel may be needed at the applicants expense for the protection of public safety and welfare connection with intended use.
6. The Community Services Director may impose such reasonable conditions upon the issuance of any Special Event Permit as deemed necessary for the protection of the public health, safety and welfare, including conditions related to time, place, frequency, duration, maximum number of persons in attendance, parking restrictions and placement of apparatus and equipment. Each permit issued pursuant to this section shall provide that permitted will observe all applicable regulations governing the use of the City grounds.

**Terms of Denial, Cancellation or Termination**

A Special Event Application may be denied, cancelled or terminated for any of the following reasons:
- The applicant failed to file the application in a timely manner
- The applicant fails to submit all necessary paperwork within the appropriate time frame
- The park, public area, or public facility is not available for the requested use at the time specified by the applicant
- The applicant failed in a material way to comply with the terms and conditions of any prior permit issued to the applicant for use of a park, public area, or public facility; or has failed to pay the City any fee or cost due in relation to the issuance or exercise of such permit
- The proposed event is not a reasonable use in relation to the use of the park by other persons and the effect of such use would be detrimental to the peace of the neighborhood
- When a hazardous condition threatens or reasonably might threaten participants, spectators, City staff, or any person or property
- If the permit applied for is for the purpose of holding a class, course of instruction, or activity for any program not conducted or expressly sponsored or otherwise approved by the City and for which a fee is to be charged to attendees or participants

**Questions**

For additional information in regards to the Special Event Application please contact Special Events Staff at events@fontana.org or 909.349.6900

* For a full listing of Special Events Guidelines please visit Events.Fontana.org
Special Event Application

This application must be submitted for any special event held on City property and/or requiring City services at least 120 days prior to the date of the event. An approved certificate of liability insurance must be received no later than 30 days prior to the event date. All event applications are subject to approval by the Parks and Community Services Commission and/or the City Council. The action to approve an event will state conditions which must be met for the event to be held.

Special Events Checklist:

☐ $25.00 Application Fee
☐ Special Events Application, completely filled-out
☐ Copy of liability insurance, naming the City of Fontana as additionally insured *certificate must be submitted at least 30 days prior to event
☐ I have read and understood all application procedures and guidelines. Initial __________

Please print or type the information below and answer all areas as thoroughly as possible. If the information does not pertain to your activity, indicate not applicable (N/A).

Name of Event: ____________________________________________________________

Type of Event: ____________________________________________________________

Date of Event: _______________ ☐ New Event ☐ Returning Event; # of years offered: __________

Proposed Starting Time: _______________ Proposed Ending Time: _______________

Set Up Time: _______________ Tear Down Time: _______________

Requested Location(s): ____________________________________________________

* If applying for a carnival a separate Application for Carnival, Circuses, Etc. must be filed with the Business Services Division

Hosting Organization: ______________________________________________________

Events Chairperson (s) Names (s) _____________________________________________

Address: __________________________________________________________________

Day Phone: _______________ Evening Phone: _______________ Fax: _______________

Message Phone: _______________ Email Address: _______________

Alternate Event Contact: ___________________________ Phone: _______________

* For additional information: events@fontana.org | 909.349.6900
**Who is the target audience for the activity?**

**Estimated Attendance:** ____________  **Estimated Number of Volunteers/Staff:** ________________

**Will any fees be charged?**  □ YES  □ NO  **If so, what fees will be charged?** __________________________

**Will fees be collected on site?**  □ YES  □ NO  **Who will the proceeds benefit?** __________________________

**Are you requesting that alcohol be served?**  □ YES  □ NO  **Will alcohol be sold on site?**  □ YES  □ NO

**ALCOHOL:** Serving alcohol is subject to approval pursuant to section 16-17 of the Municipal Code.

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**STREET CLOSURES**

**Are you requesting that any public streets be closed for this event/activity?**  □ YES  □ NO

**If YES, identify the streets/blocks and indicate the times the closure is requested:**
________________________________________________________________________
________________________________________________________________________

**Will there be any equipment in the public right of way (car displays, tents, etc.)?**  □ YES  □ NO

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**TRAFFIC CONTROL/BARRICADES**

**A traffic control contractor may be required for events which require barricades or traffic control signage. An approved traffic control plan will be required prior to implementing any closures. Plan should specify pedestrian management, traffic signal modifications, etc. (A changeable message sign may also be required.)**

**Please list your traffic control contractor and/or traffic control plan if applicable:**
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

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**VEHICLE LOADING/UNLOADING**

**Are you requesting that vehicles be permitted to load/unload on city streets?**  □ YES  □ NO

**If YES, please indicate the location and times loading and unloading would occur:**
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
**CITY STAFF**

<table>
<thead>
<tr>
<th>Will City staff be requested for:</th>
</tr>
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<tbody>
<tr>
<td>☐ Planning  ☐ Set-Up  ☐ During Event  ☐ Clean-Up</td>
</tr>
</tbody>
</table>

If so, indicate the estimated number of staff, duties to be performed and hours to be assigned:

__________________________________

__________________________________

If City staff assistance is requested, the applicant may be charged additional fees to cover the cost incurred by the city. Please note that additional staff may be added at City’s discretion.

**PARK SITES**

If requesting to use a park site, please indicate the name of the park: ________________________________

If not using the entire park, please indicate specific area of use:

__________________________________

**EQUIPMENT**

Please provide a list of equipment and quantities that will be at your event:

__________________________________

__________________________________

__________________________________

**CLEAN UP AND TRASH REMOVAL**

Clean up of the event area immediately following the event, including trash removal from the site, is the responsibility of the applicant:

Please name the contractor or organization responsible:

Clean Up: ___________________________ Phone #: ___________________________

Trash Removal: _____________________ Phone #: ___________________________
**VEHICLES ON PARK GROUNDS**

Vehicles, including catering vehicles, are not normally permitted to drive or park randomly on the public park grounds due to extensive underground irrigation systems that sustain damage when vehicles drive across control boxes and heads.

Are you requesting that vehicles be permitted to drive or park on public grounds?  ☐ YES  ☐ NO

If YES, please indicate the type(s) of vehicles and the locations and times they would be driven:

<table>
<thead>
<tr>
<th>VEHICLES ON PARK GROUNDS</th>
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<td>______________________________________________________________________</td>
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**PORTABLE RESTROOMS**

Will additional portable restrooms be brought to the event site?  ☐ YES  ☐ NO

If YES, please name the company bringing the portable restrooms:

- Company Name: __________________________  Phone #: __________________________
- Number of Restrooms: __________________  ADA: __________________

**FIREWORKS**

An additional application must be processed with the San Bernardino County Fire Department a minimum of 90 days prior to your event for fireworks or pyrotechnics. An additional fee may apply.

Are you requesting approval to provide a fireworks show at the event?  ☐ YES  ☐ NO

Length of Show: __________  # of aerial fireworks: __________  # of ground fireworks: __________

**FOOD & OTHER VENDORS**

Food vendors must contact San Bernardino Count Public Health in advance of their event for required permits and guidelines. The event organizer shall obtain copies of temporary food service licenses from food vendors prior to the event. In addition, all vendors selling food or other products must have a City of Fontana Business License.

Will food be served at the event?  ☐ YES  ☐ NO

If YES, the food is:

- Provided Free  ☐  Cooked or Prepared On-Site  ☐  Being Cooked on an Open Fire (Barbeque)

- Available for Purchase  ☐

If available for purchase, is event:  ☐ For Profit  ☐ Non-Profit

Please provide a menu of the food you will be serving: __________________________________________________________________

Are you requesting approval to offer other items for sale at the event?  ☐ YES  ☐ NO

If YES, types of items for sale: __________________________________________________________________

**Please Note:** All applicants will be notified by the Community Services Department regarding the status of the application upon the conclusion of the review period by City Departments.

<table>
<thead>
<tr>
<th>Applicant Signature</th>
<th>Required</th>
<th>Date</th>
<th>Title</th>
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<thead>
<tr>
<th>Applicants Printed Name</th>
<th>Name of Organization, Department/Division</th>
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</table>
EVENT PARKING

Sufficient parking must be planned and designated depending upon the type and location of your event. Please indicate what areas you plan on utilizing for participant/attendee parking:

Do you have designated handicap parking?  ☐ YES  ☐ NO

Location: ________________________________________________________________

EVENT SITE

Please explain exact location for your event:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

A map of the event site is required and should indicate event layout with proposed attractions, recommended street closures, parade or run/walk routes, etc. Please draw your map in the space provided below, or attach your map to the application upon submittal.
<table>
<thead>
<tr>
<th>Department/Division</th>
<th>Recommendation</th>
<th>Estimated Cost</th>
<th>Signature</th>
<th>Comments</th>
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<tbody>
<tr>
<td>Building &amp; Safety</td>
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<td>Planning</td>
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Total Estimated Revenue for Event: $ 
Total Estimated Cost to City Departments: $ 

FINAL EVENT APPROVAL:

□ Approved
□ Disapproved

______________________________  __________________________
Community Services Director          Date

______________________________  __________________________
City Manager or designated Deputy City Manager  Date