

OLIVEHURST PUBLIC UTILITY DISTRICT

Business Office 1970 9TH Avenue/P.O. Box 670 Olivehurst, CA 95961 Phone (530) 743-4657

Fax (530) 743-3023 www.opud.org

Application must be submitted to Business Office a minimum of 30 business days prior to date of event.

Special Events Application/Permit (YOU MUST HAVE YOUR COPY OF YOUR PERMIT IN POSSESSION DURING EVENT)

Organization/Group: Gina M. Diehl Contact Person(s): Gina M. Diehl	
Contact Phone #(s): 916-583-1176	Email: gina@olivehurst.church
Event Location (name of park/facility) Olivehurst Community Park	
Name/Type of Event: TBA/ Music concert youth Ra	Date(s) of Event 09/15/2023 - 09/16/2023
Hours of event: 7am am /pm - 12 mid	am/pm (Include set up and clean up time)
Estimate: Number of Participants: 1025 Spec	tators: 1000 Staff: 25
Will you be using a public address system or any other type of	amplified sound equipment? Yes X No
If yes, provide a detailed plan for all electronics including music	, public address systems, etc.: Family friendly live music
will contract with professional sound and lighting c	ompany that is bonded and insured who will provide t
staging, lighting, and sound system, along with	a team to run this system, set up and tear down
Will there be any vendors or contractors operating a booth, sho	p, or mobile operation during event? Yes X No
If yes, provide number of vendors and organizations & or Local Businesses that are youth	vendor type(s): 4 food trucks, the rest Non Profit centric. Ambassador Skate, for an example.
(Must provide copies of all permits and written approvals from o	other agencies that may be required prior to conducting event)
Will alcoholic beverages be served or given away? Yeslicensed security. (Per OPUD Special Events Policy)	No X If yes, must provide valid ABC license and provide
Is this a for-profit or non-profit event: non-profit Will	you be charging fees to participants? Yes No X
Will dumpsters be required:YesX NoWill p	ortable toilets be required:YesX No
(If yes, see OPUD Special Events Policy regarding dumpsters	and portable toilets.)
INSURANCE: Applicant must provide Olivehurst Public Utility Distriction company licensed to do business in the State of California as proof of general homeowners insurance, providing for personal injury, death In the case of other than private use, said certificate shall also provide officers, agents, and employees. Such insurance will be primary cover The certificate must cover all dates and hours of facility use. INITIA	possession of general liability, owner, landlords and tenants, or and property damage in the amount of not less than \$1,000,000.00. The as additionally insured the Olivehurst Public Utility District, its rage for any liability arising from applicants' use of the facilities.
Any change, alteration or modification of intended use must be approved by OI misrepresentation of your group or use, or failure to comply with Special Events	
IT IS EXPRESSLY UNDERSTOOD AND AGREED THAT APPLICANT/ORC PUBLIC UTILITY DISTRICT, ITS OFFICERS, AGENTS, EMPLOYEES AND \ EQUITY THAT MAY AT ANY TIME ARISE OR BE SET UP BECAUSE OF DA OF OR IN THE COURSE OF USING OR OCCUPYING THE FACILITY. <mark>INITIA</mark>	OLUNTEERS FROM ALL DAMAGES, COSTS OR EXPENSES IN LAW OR MAGES TO PROPERTY OR PERSONAL INJURY RECEIVED BY REASON
I AND/OR MY ORGANIZATION FURTHER EXPRESSLY CERTIFY THAT I A OR LOSS SUSTAINED TO THE GROUNDS, BUILDING, OR EQUIPMENT OF AND/OR MY ORGANIZATION'S USE OF THE FACILITY. AMOUNT OF CLE UNDERSTOOD AND AGREED THAT APPLICANT/ORGANIZATION WILL CL BE FORFEITED. NO PERSONAL VEHICLES ARE ALLOWED ON PARK GR INITIAL HERE	CCURRING, OR UNUSUAL CLEAN-UP REQUIRED, AS A RESULT OF MY ANING DEPOSIT WILL BE BASED ON TYPE AND SIZE OF EVENT. IT IS EAN UP ALL DECORATIONS AND TRASH OR CLEANING DEPOSIT WILL
I have read and understand the attached OPUD Special Events	s Policy INITIAL HERE .
Signature of Individual/Representative	ν
FOR OFFICIAL USE ONLY: Application/Permit Fee \$	Amount Refundable \$ Cash Check #
Insurance: Yes No Food Sale/Use Alo	cohol Sale/Use Law Enforcement Notified
Permits/Written Approvals: ABC Licen	se: Licensed Security:
	Cleaning Deposit \$
Processed by:	Date: