

**Port of Hood River
Event Application - \$50.00 Fee**

Event: _____ Location: _____
 Date of Event: _____ Hrs: _____ Estimated Number Attending: _____
 Additional Set Up Days: _____ Commercial Sponsor(s) _____
 Organization: _____
 Contact Person: _____ Admission Fee, if applicable: _____
 Address: _____ Telephone: _____
 _____ Fax: _____ Cell: _____
 PA/Sound Provider: _____ Email: _____

Site/Parking Plan Required for All Events:

Due Date (30 days prior to event):

Received Date:

Late Fee (3% of base fee assessed daily) will be charged if Site & Parking Plan not submitted by due date and must be paid in full prior to event.

CHECKLIST TO BE COMPLETED BY PORT STAFF

- | | | | |
|---|--|------------------------------|------------------|
| 1. Application submitted – \$50 Deposit paid:
(Forfeited if event canceled within 30 days) | <input type="checkbox"/> Yes <input type="checkbox"/> No | | <u>Comments:</u> |
| 2. Parking assistants/flaggers needed: | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> N/A | _____ |
| 3. RV parking needed, self-contained only: | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> N/A | _____ |
| 4. Overflow parking needed: | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> N/A | _____ |
| 5. Property tenants contacted: | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> N/A | _____ |
| 6. Security needed-Special Event Application: | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> N/A | _____ |
| 7. Booths, canopies, stage needed: | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> N/A | _____ |
| 8. Additional electrical needed: | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> N/A | _____ |
| 9. Additional telephone needed: | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> N/A | _____ |
| 10. Additional water needed: | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> N/A | _____ |
| 11. Additional portable toilets needed: | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> N/A | _____ |
| 12. Additional restroom maintenance needed: | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> N/A | _____ |
| 13. Fire Dept., Police, Sanitarian contacted: | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> N/A | _____ |
| 14. On-site Port staff coordination required:
(For events of 500 people/day) | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> N/A | _____ |
| 15. Additional garbage containers required:
(One 350-yard box per 250 people required) | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> N/A | _____ |
| 16. Sprinklers/irrigation adjusted: | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> N/A | _____ |

Necessary Permits & Insurance: Due Date (14 days prior to event): Received Date: _____

Late Fee (3% of base fee assessed daily) will be charged if permits/insurance not submitted by due date and must be paid in full prior to event.

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|--|--|------------------------------|-------|
| 1. Hood River City Special Event Application: | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> N/A | _____ |
| 2. Alcohol service/sales – OLCC: | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> N/A | _____ |
| 3. Food service – Hood River County Health
(Food Vendors, exhibitors) | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> N/A | _____ |
| 4. Water events – Oregon State Marine Board | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> N/A | _____ |
| 5. Water events – US Coast Guard | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> N/A | _____ |
| 6. Road events – ODOT, Sheriff, City, Parks | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> N/A | _____ |
| 7. Certificate of Insurance per requirements: | <input type="checkbox"/> Yes <input type="checkbox"/> No | | _____ |

Damages/Repairs

- | | | |
|--|--|-------|
| 1. Site review completed prior to event: | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
|--|--|-------|

2. Site review completed after event:

Yes No
