

APPLICATION FOR MOBILE VENDORS/SPECIAL EVENTS

OR PARADE/ROAD CLOSURE PERMIT

GENERAL MVO SEASONAL MVO

SPECIAL EVENT (Commercial) (Non-Profit Organization) Other (i.e. private party/wedding)

PARADE/CLOSURE

SPECIAL EVENT INFORMATION (Fill in Vending section if vending is to occur as part of the Special Event) (Fill in Parade/Road Closure section if District-owned leased land is being used - i.e. Marshalling/Dispersal areas)

APPLICANT'S NAME: _____ HOME PHONE #: _____ FAX #: _____

ORGANIZATION'S NAME: _____ PHONE #: _____ FAX #: _____

MAILING ADDRESS: _____

REGISTRATION # (if Non-profit): _____ REQUESTED LOCATION(S): _____

OF EXPECTED ATTENDANCE: _____ DURATION: _____

START DATE (including set-up): _____ COMPLETION DATE (Including clean-up): _____

NAME OF EVENT: _____ REQUESTED FOR (Type of Event): _____

THEME OF EVENT: Harvest/Agricultural Multicultural Commemorative Sports Cultural Environmental Other

FEE \$100/day other \$200/day Block 7 \$5/day (Non-Profit)	DEPOSIT: \$250 other \$500 Block 7	KEY DEPOSIT: \$20 per key x _____	ELECTRICAL FEE \$50.00 per day x _____
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Total Amount Required _____

PARADE/ROAD CLOSURE (to be filled out by Special Event applicant if District-owned leased land is being used - i.e. Marshalling/Dispersal areas)

APPLICANT'S NAME: _____ PHONE #: _____ FAX #: _____

APPLICANT'S MAILING ADDRESS: _____

PARADE/ROAD CLOSURE NAME: _____ DATE: _____

MARSHALL TIME: _____ DISPERSAL TIME: _____

MARSHALL AREA: _____ DISPERSAL AREA: _____

OF EXPECTED ATTENDANCE: _____ EVENT MARSHALL(S): _____

PROPOSED ROUTE (Please attach a detailed map showing Marshall/Dispersal points on the street/road & Event Marshall Stations, barricade/cone/signage/first aid areas)

SEASONAL/GENERAL MOBILE VENDOR (to be filled out by Special Event applicant if vending is a part of Special Event)

APPLICANT'S NAME: _____ PHONE #: _____ FAX #: _____

APPLICANT'S MAILING ADDRESS: _____

COMPANY NAME _____ PHONE #: _____ FAX #: _____

COMPANY'S MAILING ADDRESS: _____

REQUESTED LOCATION(S): _____ BUSINESS LICENCE #: _____

START DATE: _____ COMPLETION DATE: _____

REQUESTED FOR (Type of Vending/Product): _____

VENDOR STAND - LARGE SMALL VEHICLE REGISTRATION # _____

VEHICLE: MAKE: _____ MODEL: _____ SIZE: _____ LIC.#: _____

FEE Seasonal Vendor - \$200/Month x # of Months _____ General Vendor - \$100/Month x # of Months _____	DEPOSIT: \$200.00 SMV / \$50.00 GMV
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Total Amount Required _____

Please attach a general set-up diagram and a picture of the proposed vending apparatus; Health authority approval.

INSURANCE REQUIREMENTS

Minimum Liability Coverage of not less than \$2,000,000 third party liability insurance, including coverage of at least \$2,000,000 per occurrence and \$2,000,000 for participant liability coverage. See reverse for complete list of insurance requirements as outlined in Parks, Lands and Roads Temporary Rental Bylaw 480, 2008.

It shall be the sole responsibility of the Applicant to determine what additional insurance coverage, if any, including but not limited to Workers' Compensation and Participants Insurance, are necessary and advisable for its own protection and/or to fulfill its obligations under this permit. Any such insurance shall be maintained and provided at the sole expense of the Applicant.

The District does not warrant that this insurance is adequate for the Applicant's needs. The Applicant acknowledges sole responsibility for obtaining whatever coverage in excess of that required by the District that the Applicant deems necessary.

It is the responsibility of the Applicant to ensure that all the rules and regulations pertaining to Seasonal/Mobile Vendors & Special Events are adhered to and the provisions of the Parks, Lands & Roads Temporary Rental Amendment Bylaw No 480,2008.

Personal information on this form is collected under the District's Mobile Vendors Bylaw and will be used only for the purpose of responding to this application.

The District of Sechelt does not represent that the land to be used is necessarily suitable for the intended function and the applicant acknowledges that they have inspected the land to be used and that it is suitable.

DATE _____ SIGNATURE _____ TITLE/POSITION _____

FOR OFFICE USE ONLY			
REQUIREMENTS	RECEIVED	REQUIREMENTS	RECEIVED
INSURANCE		PUBLIC NOTIFICATION	
HEALTH UNIT		BARRICADES/CONES	
REFUNDABLE SECURITY DEPOSIT		TOILETS	
FIRE DEPARTMENT/RCMP/AMBULANCE/BC TRANSIT/POST MASTER/MoTH		GARBAGE CANS	
FEES		COMMUNICATION SYSTEM	
SET-UP PLAN		SIGNAGE	
BUSINESS LICENSE		MARSHALLS	

10. INSURANCE REQUIREMENTS

- (a) The applicant for a permit under this Bylaw must obtain insurance and show proof of general liability insurance coverage, including without limitation, coverage for the indemnity and release provisions herein, which meet the following minimum requirements:
- (i) District of Sechelt, including its officers, officials, employees and volunteers, are to be named as additional insureds with a cross liability clause.
 - (ii) Comprehensive general liability coverage insuring against liability arising from the insured's activities on municipal property.
 - (iii) Coverage effective for at least the duration of the activity.
 - (iv) Minimum Liability Coverage of not less than \$2,000,000 third party liability insurance, including coverage of at least \$2,000,000 per occurrence and \$2,000,000 for participant liability coverage, to cover bodily injury and/or death to any one or more persons including voluntary medical payments and property damage.
 - (v) District of Sechelt to receive 60 days prior written notice of cancellation of insurance coverage.
 - (vi) The Applicant shall provide the Municipality with evidence of such insurance coverage in the form of an executed copy of a Certificate of Insurance in a form satisfactory to the Municipality, prior to granting a permit.
 - (vii) The insurance coverage shall be primary insurance as respects the District of Sechelt, its officers, officials, employees and volunteers. Any insurance or self-insurance maintained by the District of Sechelt, its officers, officials, employees or volunteers shall be in excess of this insurance and shall not contribute to it.
 - (viii) It shall be the sole responsibility of the Applicant to determine what additional insurance coverage, if any, including but not limited to Worker's Compensation and Participants Insurance, are necessary and advisable for its own protection and/or to fulfill its obligations under this permit. Any such insurance shall be maintained and provided at the sole expense of the Applicant.