



## **CHARTER TOWNSHIP OF INDEPENDENCE SPECIAL EVENT POLICY**

**RETURN TO:** Township Clerk's Office: 6483 Waldon Center Dr. – Clarkston, MI 48346

**PHONE:** (248) 625-5114; **FAX:** (248) 625-2585

[www.indtwp.com](http://www.indtwp.com)

**PURPOSE:** The purpose of the Special Event Policy is to promote uniform procedures to regulate and permit special event activity at locations under the jurisdiction of the Charter Township of Independence (Township) that do not endanger public health, safety and welfare and can be managed with existing or available resources. The special event application is a starting point for any group or individual who wishes to hold a non-permanent event such as a run/walk, parade, assembly, festival, or similar affair within the municipal limits of the Charter Township of Independence. This policy applies to all Township elected officials, appointed officials, department heads, employees, contractors and the general public.

**EXEMPTIONS:** Special events on private property that do not require additional Township resources (e.g. police, fire, building inspections, etc.) and are otherwise permitted by statute or ordinance are exempted.

**SPECIAL EVENT APPLICATION REQUIRED:** This policy statement on special events covers all special events. Any organization wishing to sponsor or hold a special event in the Township that takes place on public lands or lands that are controlled by the Township will be required to complete the special event application. Any organization wishing to sponsor or hold a special event that does not take place on public lands or lands that are controlled by the Township but wishes to utilize additional Township resources (e.g. police, fire, building inspections, etc.) are required to complete the special event application.

No special event within the Charter Township of Independence shall be conducted on the streets, parks\* or other public area without the expressed, advanced authorization from the Township Board. Such authorization may be granted for special events that have been conducted on the above described areas by the group if at least one application was made and approved in the past five years. Applications to conduct a special event must be made in writing to the Township Clerk's office. Applications are available from the Township Clerk's Office and via the Township's website at [www.indtwp.com](http://www.indtwp.com).

\*Additional requirements as determined by the Parks, Recreation & Seniors Department may apply for events held at any of the Township owned parks.

The Township will be responsible in completing a comprehensive evaluation of all special event applications, including consultation with the applicant as may be reasonably necessary to resolve problems and/or concerns.

Sponsors of special events should be aware that noise generated by the event could have an impact on the neighborhoods near the event site. Sponsors must be considerate of the neighborhood and be conscious of the Township Noise Ordinance.

As an event organizer, you must consider the availability of restroom facilities during this event. Consideration should be made regarding the type of event, the length of time it will be held, the number of people, etc. You must also assess whether the available restroom facilities in the immediate area of the event venue are adequate and then identify the potential need for portable facilities. Remember to identify accessible facilities for ADA requirements as well.

**RESPONSIBILITY:** The Township Clerk and/or designee shall be responsible for the implementation of this policy and is authorized to prepare forms and adopt supplemental procedures as necessary to carry out the intent of this policy and address issues as they arise.

**ADOPTED: February 3, 2015**

**MOTION #: 2015-02-035**

## IMPLEMENTATION

**Eligibility Requirements:** The applicant or representative of any business, group or organization that seeks approval to conduct a special event, must be twenty-one (21) years of age or older and officially designated as the agent of the sponsoring business, group or organization. Special events that require additional Township resources will require approval of the respective Department Head and a contract for the services, unless waived by the Township Supervisor and/or Township Clerk.

**Application Procedure:** A special event application must be received in the Township Clerk's Office no later than forty-five (45) days before the first day of the event. An incomplete application may result in denial of the request. It is advisable that applicants begin the application process as soon as possible in order to receive proper review and meet deadlines.

**Submit the following information as applicable:**

- Completed and signed application;
- Map (sketch) of event site, detailing street closures, parking requirements, etc.;
- Event schedule;
- Copies of promotional materials;
- Proof of notice to businesses advising of road closures;
- Proof of notice to residents advising of road closures; and
- Certificate of Insurance/Indemnification (naming Charter Township of Independence as an "additional insured")
- Special liquor license from State of Michigan; Liquor Control Commission (MLCC)
- Liquor liability insurance certificate.

**EMERGENCY MEDICAL SERVICES:** Due to the vast number of different types of events, along with the anticipated crowd sizes, at a minimum, all event holders should have knowledge of 911 access and someone who is certified in First Aid/CPR in addition to providing First Aid Stations and/or kits on site.

**LIABILITY INSURANCE REQUIREMENTS:** To comply with the Township's insurance liability carrier, the Township must require that all sponsors of a special event carry liability insurance with coverage of at least \$500,000.00. An event sponsor must provide a valid certificate of insurance naming the Charter Township of Independence as an additional named insured party on the policy.

An event sponsor may request that the Township Board waive the insurance coverage for an event classified as "low hazard". A "low hazard" event is a small gathering or ceremony involving not more than fifty (50) people, who are passively participating in the activity, without any physical activity by participants or severe exposure to spectators, and no Township services are required. An event sponsor of a "low hazard" event must sign a Hold Harmless and Indemnification Agreement as part of its application process.

**CLEAN UP:** Applicants are responsible for clean-up and repairs. Applicants who fail to clean up and repair damages to the event area may be billed for Township services and such failure will be considered for future applications.

**ROAD CLOSURE:** *Road Commission of Oakland County Rules and Regulations* must be followed. Additional conditions may be stipulated after review of application and documentation. Groups, organizations or promoters of events will be held liable for damage to any street, parking lot, sidewalk or other public area.

**TEMPORARY SIGN:** Temporary sign provisions of the Charter Township of Independence Code of Ordinances Article 12–SIGNS; Section 12.07 - Permitted Temporary Signs applies to all signage.

**WRITTEN CONFIRMATION OF TOWNSHIP APPROVAL:** It is expected that the event coordinator or a representative be present at the Township Board meeting to answer any possible questions that Board Members may have regarding the proposed event. Please note, if questions arise at the Board meeting, and a representative is not present, the request may be denied.

Upon approval of the special event application, a written confirmation as to the action of the Township Board will be forwarded to the individual or organization requesting the event by the Township Clerk's Office. This confirmation will outline any special conditions that must be met if the event is to be held.

Applications not expressly accepted or rejected within two (2) weeks of the application, or within forty-eight (48) hours of the time of the schedule use, whichever is later, shall be deemed rejected.

**REVOCAION OF AUTHORIZATION:** Approval granted for special events may be revoked for good cause including, but not limited to, acts of vandalism, violence or rowdiness, violations of law or local ordinance, or threats to the health, safety and welfare of Township residents or visitors. Approval may be revoked by the Township Supervisor or his/her designee, including the senior on-duty members of the Oakland County Sheriff's Department or Fire Department.

Approval of special events may be denied to any person, organization or group which has, at any time prior to the proposed special event, held, sponsored or hosted a special event that resulted in acts of vandalism, violence, rowdiness, was held in violation of law or local ordinance, or posed a threat to the health, safety and welfare of Township residents or visitors. Subsequent approval may require a higher insurance level or additional security.

**EQUAL ACCESS:** No applicant shall be denied on the basis of race, sex, religious or political persuasion or because of the political, religious or social aims expressed by an individual or group or by any group's members.

**FEES:** Applicants for special events requiring Township resources may be required to execute a contract for the services and pay in advance before the event is approved.



**CHARTER TOWNSHIP OF INDEPENDENCE  
SPECIAL EVENT APPLICATION**

**RETURN TO:** Township Clerk's Office: 6483 Waldon Center Dr. – Clarkston, MI 48346

**PHONE:** (248) 625-5114; **FAX:** (248) 625-2585

[www.indtwp.com](http://www.indtwp.com)

Date Received By Clerk's Office: \_\_\_\_\_ Time: \_\_\_\_\_ By: \_\_\_\_\_

Complete this application in accordance with the Charter Township of Independence Special Events Policy, and return it to the Township Clerk's Office at least forty-five (45) calendar days before the first day of the event.

Sponsoring Organization's Legal Name: \_\_\_\_\_

Organization's Address: \_\_\_\_\_

Organization's Agent: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: Work: \_\_\_\_\_ Home: \_\_\_\_\_ During Event: \_\_\_\_\_

Agent's Address: \_\_\_\_\_

Agent's E-mail Address: \_\_\_\_\_

Event Name: \_\_\_\_\_

Provide a brief description of the proposed event: \_\_\_\_\_

\_\_\_\_\_

Event Day(s) & Date(s): \_\_\_\_\_ Event Time(s): \_\_\_\_\_

Event Location: \_\_\_\_\_

**ANNUAL EVENT:** Is this event expected to occur next year? Yes  No  How many years has this event occurred? \_\_\_\_\_

- MAP:**
- Attach a complete map depicting the assembly and dispersal, and the route plan if your event will use streets or sidewalks (parade, run, etc.) or will use multiple locations.
  - Include any streets and/or parking lots that you are requesting to be blocked off and location of vendors if applicable.
  - A final map, if different, must be provided seven (7) days before the event.
  - Include an emergency vehicle access lane on route if applicable.

**STREET CLOSURE:** Start Date: \_\_\_\_\_ Time: \_\_\_\_\_ : \_\_\_\_\_ AM/PM  
End Date: \_\_\_\_\_ Time: \_\_\_\_\_ : \_\_\_\_\_ AM/PM

Have affected residents been notified for street closures: Yes  No

**VENDORS:** Food Concessions? Yes  No  Other Vendors? Yes  No

**Expected to serve or sell beer/wine at this event?** Yes  No

**If yes, what time:** \_\_\_\_\_ : \_\_\_\_\_ **PM/AM** until \_\_\_\_\_ : \_\_\_\_\_ **AM/PM**

**If yes, are liquor license and liquor liability insurance certificates attached?** Yes  No

**ENTERTAINMENT:** Are there any entertainment features related to this event? Yes  No

**If yes, provide an attachment indicating:**

- Type(s) of entertainment
- Listing of all performers
- Performance schedule

**ATTENDANCE:** Estimated expected attendance for the event? \_\_\_\_\_

**RESTROOMS:** Number of portable restrooms at the event? N/A  Yes  No  # \_\_\_\_\_

**IMPORTANT:** As an event organizer, you must consider the availability of restroom facilities during this event. Consideration should be made regarding the type of event, the length of time it will be held, the number of people, etc. You must determine the restroom facilities in the immediate area of the event venue and then identify the potential need for portable facilities. Remember to identify accessible facilities for ADA requirements as well.

**TENT(s):** Number & size of tents at the event? Yes  No  N/A  Total # of tents: \_\_\_\_\_

Size of tents: \_\_\_\_\_

**OTHER REQUESTS:**

- |                                                                         |                                                                                |
|-------------------------------------------------------------------------|--------------------------------------------------------------------------------|
| <input type="checkbox"/> Request Oakland County Sheriff patrol support? | Mini-contract signed? Yes <input type="checkbox"/> No <input type="checkbox"/> |
| <input type="checkbox"/> Request Fire Department assistance?            | <input type="checkbox"/> Request street closures?                              |
| <input type="checkbox"/> Request approval from other jurisdictions?     | <input type="checkbox"/> Request electrical connection?                        |
| <input type="checkbox"/> Additional PR&S requirements met as follow:    | 1. _____                                                                       |
| 2. _____                                                                | 3. _____                                                                       |

**IDENTIFY JURISDICTIONS:** \_\_\_\_\_

**INSURANCE:** All sponsors of special events must carry liability with coverage of at least \$500,000.00. An event sponsor must provide a valid certificate of insurance naming the Charter Township of Independence as an additional insured party on the policy. A sponsor of a "low hazard" event may request that the Township Board waive the insurance requirement and execute a Hold Harmless and Indemnification Agreement. This event qualifies consideration for "low hazard" because:

**CERTIFICATION AND SIGNATURE:** I understand and agree on behalf of the sponsoring organization that:

A *Certificate of Insurance* must be provided with names the Charter Township of independence as an additional named insured part on the policy or I am requesting that Township Board waive the insurance requirement for this Low Hazard Event as identified in paragraph above related to insurance, and I have executed the *Hold Harmless and Indemnification Agreement* on behalf of the event sponsor.

All food vendors must be approved by the Oakland County Health Department and each food or other vendor must provide the Charter Township of Independence with a *Certificate of Insurance* which names the Charter Township of independence as an additional named insured part on the policy.

The approval of this special event may include additional requirements or limitations, based on the Township's review of this application.

Applicants who fail to clean up and repair damages to the Event Area may be billed for Township services and such failure will be considered for future applications.

As the duly authorized agent of the sponsoring organization, I am applying for approval of this Special Event, affirm the above understandings, and agree that my sponsoring organization will comply with the terms of the written confirmation of approval, and all other Township requirements, ordinances and other laws, which apply to this Special Event. By signing this Special Event Application, I declare I am 21 years of age or older.

\_\_\_\_\_  
PRINTED NAME OF SPONSORING ORGANIZATION'S AGENT

\_\_\_\_\_  
SIGNATURE OF SPONSORING ORGANIZATION'S AGENT

DATE: \_\_\_\_\_



# FOR OFFICE USE ONLY

## SPECIAL EVENT DEPARTMENTAL ROUTING FORM

RETURN TO: Township Clerk's Office

**EVENT TITLE:** \_\_\_\_\_

**DEPARTMENTAL USE ONLY:** Contact the applicant directly with any questions or concerns. Return to the Township Clerk's office immediately after completing department review. Approvals by departments indicate that they have been made aware of the request and requirements specific to that department have been satisfactorily met.

DEPARTMENT	RECOMMEND APPROVAL	ESTIMATED COST	LIST REASON FOR DENIAL &/OR ANY SPECIAL SERVICES, REQUIREMENTS OR CONDITIONS	DATE
OC Sheriff's Department:	Yes <input type="checkbox"/> No <input type="checkbox"/>	\$ _____		
Fire Department:	Yes <input type="checkbox"/> No <input type="checkbox"/>	\$ _____		
Building Department:	Yes <input type="checkbox"/> No <input type="checkbox"/>	\$ _____		
DPW:	Yes <input type="checkbox"/> No <input type="checkbox"/>	\$ _____		
Parks, Rec. & Seniors	Yes <input type="checkbox"/> No <input type="checkbox"/>	\$ _____		
Clerk's Office:	Yes <input type="checkbox"/> No <input type="checkbox"/>			
Clerk's Office: Approval of other participating jurisdictions received?		Yes <input type="checkbox"/> No <input type="checkbox"/>	List Jurisdictions Below:	
			1. _____	
			2. _____	
			3. _____	
			4. _____	
			5. _____	
Clerk's Office: Has the applicant completed & signed the special events application?			Yes <input type="checkbox"/> No <input type="checkbox"/>	
Clerk's Office: Has the applicant provided a map or sketch of the event site detailing street closures, emergency vehicle access lanes, parking requirements, etc.?			Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Clerk's Office: Has the applicant submitted an events schedule?			Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Clerk's Office: Has the applicant provided copies of promotional materials?			Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Clerk's Office: Has the applicant properly notified businesses of street closures?			Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Clerk's Office: Has the applicant properly notified residents of street closures?			Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Clerk's Office: Has the applicant submitted proper proof of insurance / indemnification?			Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Clerk's Office: Is the Charter Township of Independence named as an additional insured?			Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Clerk's Office: Has a "special liquor license" been issued by the MLCC?			Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Clerk's Office: Has a liquor liability insurance certificate been submitted?			Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
Clerk's Office: Township Board Approval:		Date:	Motion #:	
Clerk's Office: Certified Resolution mailed to RCOC:		Date:		
Clerk's Office: Approval / Denial Notice mailed:		Date:		