

CITY OF HAYSVILLE, KANSAS

TEMPORARY SPECIAL EVENT PERMIT APPLICATION

This is an application for (check only one): *All beverages sold in compliance with Chapter 3, Haysville Municipal Code.*

Temporary Special Event Permit for consumption of alcoholic liquor.

Special Event approved by Ordinance 1018, which requires the Governing Body to approve a T.S.E.P.A. all in accordance with K.S.A. 41-719 and K.S.A 41-2645. **Attach a copy of State Issued Temporary Permit in lieu of sections #3 and #4 below.**

Temporary Special Event Permit for consumption of cereal malt beverage.

K.S.A. 41-2703(e), and Chapter 3, Article 1, Section 3(c) of the Haysville Code provide that a special event license may be issued for the sale of cereal malt beverages for consumption on the generally unpermitted premises of a special event site. **Attach copy of approved CMB license.**

Name of Special Event: _____ **Requested date(s) of operation:** _____

Anticipated hours of operation of Special Event _____

SITE DESCRIPTION: The applicant shall define the special event site by 1) the address of a permanent structure, or common name of an outdoor location, and 2) the exact boundaries of the proposed site, including any outdoor areas directly adjacent to a structure to be used as part of a site. Include a photo of any site located outside a structure, and include a site plan showing type and height of boundary structure, ingress/egress, method of restricting juvenile access, restroom access, security placement, etc.

1. Applicant Information

Name of Applicant:

Spouse's full name:

Date of birth:

Age:

SSN:

Place of Birth: (City)

(State)

(County)

Length of residency: (Haysville)

(State)

(County)

Current address:

City:

State:

ZIP Code:

Mailing address:

City:

State:

ZIP Code:

Home Phone:

Mobile Phone:

Driver's License: (State)

#

2. Business Information

Name of Business:

Business address:

City:

State:

ZIP Code:

Business Phone:

Premises Owner Phone:

Name of Premises Owner:

Years of ownership:

Address of Premises Owner:

City:

State:

ZIP Code:

3. Citizenship

Are you a citizen of the United States? Yes No

Citizen by: By Birth Naturalization

If naturalized give place and date of naturalization:

4. Criminal History

Within the past five years, have you ever been convicted of:

- | | | |
|---|-----------|----------|
| 1) Felony? | Yes _____ | No _____ |
| 2) A crime of Moral Turpitude?
(moral turpitude includes any act associated with prostitution, pandering, crimes opposed to decency, gambling) | Yes _____ | No _____ |
| 3) Drunkenness? | Yes _____ | No _____ |
| 4) Driving under the influence of intoxicating substance? | Yes _____ | No _____ |
| 5) Violating any state or federal liquor law? | Yes _____ | No _____ |

If the answer to any part of this section is "Yes" explain (use a separate sheet if necessary):

5. Insurance Certification

Permittee shall furnish a **Certificate of Insurance** evidencing coverage for any damage caused by Permittee, or Permittee's agents, servants, employees, guests, invitees, volunteers and/or individuals participating in the event(s) described herein. Such Certificate of Insurance shall name "City of Haysville, Kansas, and its officers, employees and agents" as additional insureds if such special event site is located on City property and shall be in the amount of \$500,000.00 combined single limit per occurrence for bodily injury, personal injury, and property damage. Said Certificate shall be submitted to the Haysville City Clerk, 200 W. Grand, Haysville, Kansas, 67060. Said Certificate shall also contain a clause agreeing to notify City of any material change or cancellation of insurance before such is effective. Failure of Permittee to provide City an approved Certificate of Insurance prior to use of above described recreational area, public area, facility or roadway, shall cancel and make void this permit. Permittee agrees to **indemnify and hold harmless City**, its agents, servants, employees or invitees, from and against any and all claims of every kind or character for injuries and/or damages to persons and/or property arising out of or in connection with the use and occupancy of any streets, easements, structures or public areas within the City, and not caused by City negligence. City shall give to Permittee notice of any claim made or litigation instituted which directly or indirectly, contingently or otherwise in any way affects or might affect Permittee. Permittee shall have the right to compromise and participate in the defense of the same to the extent of their own interests. **Tort Claims Applicability, Reimbursement for Damage:** I understand that the City of Haysville does not assume liability for any loss or damage associated with the aforescribed activity permitted to be operated within Haysville parks or in/on public property/roadways pursuant to this permit as part of a recreational or community event, and understand that this permit is approved subject to applicability of the provisions of K.S.A. 75-6104. Permittee shall reimburse City for any cost associated with damage to a public facility, area, or roadway that exceed normal or routine maintenance requirements. Upon review of the event scope, the Mayor or Chief Administrative Officer may waive or alter the insurance requirement.

The following additional requirements shall apply when determined applicable by authorized City Staff. Such additional requirements may require separate Agreement.

_____ Designated Parking Area	_____ Trash Containers	_____ Site Clean-up
_____ Portable Restrooms	_____ Barricades for Streets	_____ Security
_____ Other _____		

I, hereby agree to comply with all of the ordinances of the City of Haysville and the laws of the State of Kansas, and all the rules and regulations prescribed by the City relating to the operation of the identified "temporary event", and I agree to notify the City immediately if any information provided on this application shall change at any time prior to or during the term of the permit, and do hereby further consent to the immediate revocation of my permit, by the proper officials, for any violation of such laws, rules and regulations. I authorize the verification of the information provided on this form AND agree to permit an investigation of my business history, criminal background, and any other screening by or on behalf of the City of Haysville, Kansas, for the limited purpose of determining the truthfulness of this application, as provided by the law of the State of Kansas, and the City of Haysville, Kansas. By signing this document I certify the foregoing information is true and I am aware that any falsification on this form and any attachments hereto is cause for revocation of the permit or license issued as a result thereof.

Signature of Applicant _____ Date _____

Signature of MAYOR/ or other Authorized Haysville Official _____ Date _____

OFFICE USE ONLY

Date Received: _____ By: _____ Fee: _____ Receipt #: _____

Fees paid in association with rental of City facilities? Receipt # _____

Permit approved: _____ Permit disapproved: _____ By: _____ Date: _____

Police Department Approval of Request: _____ Maintenance Department Approval of request: _____

Recreation Department Approval of Request: _____

Date of Governing Body Approval of Special Event: _____ **ORDINANCE NUMBER 1018**