

Special Event Permit Application

Special Events Department City Hall, Third Floor 445 Marsac Avenue P.O. Box 1480 Park City, Utah 84060 Specialevents@parkcity.org

APPLICATIONS DO NOT CONSTITUTE AS A PERMIT.

PERMITS ARE APPROVED BY THE SPECIAL EVENTS DEPARTMENT OR CITY COUNCIL IN WRITING AFTER COMPLETE APPLICATIONS ARE REVIEWED UNDER PARK CITY MUNICIPAL CODE 4-8.

Applications for Special Event Permits are due no later than 90 days (Level 3), 60 days (Level 2), or 30 days (Level 1) prior to an event. Incomplete applications cannot be reviewed. Applications submitted after the deadlines as described above may be denied. More information can be found at www.parkcity.org or by contacting specialevents@parkcity.org.

			<u> </u>						
IF YOU HAVE QUESTIONS, OR WOULD LIKE TO SCHEDULE A MEETING BEFORE SUBMITTING YOUR APPLICATION, PLEASE CONTACT:									
Tommy Youngblood tommy.youngblood@parkcity.org	435.615.5187	Jenny Dierse	n <u>jenr</u>	ny.diersen@parkcity.org	435.	615.5188			
APPLICATION FEES & EXPENSES									
 Application Levels are determined the Additional fees for other City Service Applicants may incur additional experiments for some City Service April 1, for events July 1 – December 	Level Two S Level One S by the Special Ever es will be estimate benses from other ices are considered	d and provide City, County o d bi-annually.	Permit Permit at after r d to the or State Fee Re	\$80.00 \$40.00 reviewing complete applic applicant upon receipt o jurisdictions. duction Applications are of	f a complete applica	ation.			
AS THE APPLICANT YOU UNDER	STAND & AGREE	TO THE FO	LOWI	NG: (Check all that you	understand and a	gree to)			
To insure prompt and accurate proces application. Failure to do so will consti complete application shall include this plan, emergency plan, weather condit	tute an incomplete application compl	application ar eted, with traf	nd may offic and f	delay review and approva transportation plan, conti	al processes. I undengency plan – inclu	erstand a ding operations			
Park City Municipal Corporation requires a certificate of insurance in an amount to be determined by the City Attorney's Office. Submitting incomplete application information may delay the ability to determine the amount required. The amount of insurance required by the City Attorney's office is final and the applicant shall be required to submit proof of coverage including naming Park City Municipal Corporation, 445 Marsac, P.O. Box 1480, Park City, Utah 84060 as additionally insured prior to the start of any event activity.									
After the application is evaluated, the applicant will be responsible for providing proof that I have obtained other permits as necessary from City, County or State agencies, as well as the application fee amount based on the Level of event.									
Municipal Corporation. Park City Municipal Corporation. Park City Municipal departments or other jurisdictional age complete application, and that should	I understand that as the applicant, I will assume and reimburse the City for any and all costs and expenses determined by Park City Municipal Corporation. Park City Municipal Corporation may require a deposit to cover such expenses. I may incur costs from other departments or other jurisdictional agencies. I understand I can request an estimate of City Services for the event upon submitting a complete application, and that should I choose to, I can request a reduction of fees for some services as pertains to Park City Municipal code 4-8-9 through the bi-annual fee reduction application and process.								
I understand I am able to request a m application does not constitute as a va Council in writing after complete appli	alid permit. I under	stand that per	mits are	e approved by the Specia					
	ICANT AND SPON	ISORING OR	SANIZA	ATION INFORMATION					
NAME OF EVENT:									
FIRST TIME Yes No	ANNUAL EVENT:	Yes	No	IF ANNUAL, HOW MAI	NY YEARS:				
ANNUAL EVENT THAT WILL BE THE SAM	E AS LAST YEAR:	<u> </u>			Yes	No			
ANNUAL EVENT THAT WILL HAVE CHANGES FROM LAST YEAR: Yes No									
NAME OF APPLICANT (FIRST & LAST):									
TITLE / POSITION:									
BUSINESS /ORGANIZATION NAME:									
IS BUSINESS / ORGANIZATION A REGISTERED NON-PROFIT Yes, a copy of IRS paperwork is attached No									
MAILING ADDRESS OR BUSINESS / ORGA	ANIZATION:	•	•						
CITY, STATE, ZIP:									



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PHYSICAL ADDRESS OF BUSINESS / ORGANIZATION:																		
CITY, STAT	ΓΕ, ZIP:																	
PHONE (PF	RIMARY								Pł	HONE (SEC	ONDARY):						
EMAIL:									I									
BUSINESS	/ ORGA	NIZATI	ON WE	BSITE	<u>:</u> :													
SOCIAL MEDIA LINKS:																		
	DAY OF EVENT PRIMARY CONTACT																	
DN-SITE DAY OF PRIMARY CONTACT NAME (FIRST & LAST):																		
ON-SITE DAY OF PRIMARY CONTACT CELL PHONE:																		
ON-SITE DAY OF PRIMARY CONTACT EMAIL:																		
	PUBLIC EVENT INFORMATION																	
WEB SITE	FOR PU	BLIC E	VENT II	NFOR	MATION	:												
PHONE NU	JMBER F	OR PU	BLIC E	VENT	INFORM	MATION:												
EMAIL ADD	DRESS F	OR PU	BLIC E	VENT	INFORM	MATION:												
Overall eve	nt descri	ption is	attache	d as a	separat	e docum	ent,	, with the	conf	tingency	pla	n and is su	omitte	d with	the a	pplication		
EVENT LEVEL DETERMINATION																		
			THE	EVEN.	T WILL II	NCLUDI	E TH	IE FOLI	-OWI	NG AC	ΓΙVΙΊ	ΓIES: (Che	ck all	that a	pply)			
FESTIVAL /			SKI / SN	OW														
FAIR	PARA	DE	BOAR		RUN		ВІ	KE	W	ALK	TR	AIL USE	CON	CERT		CULINAF	RY	FILMING
ADTC 0	CUI TUDE	= E\/ENIT				CLEDDA	TION		DE	ODEATIO	NI / C	PORTING E	/ENIT		OTHEF).		
ARTS &	CULTURE	EVEINI			HOLIDAY (eck all tha			OTHER	\ <u>.</u>		
MAIN	RESORT	Γ DI	CHOOL STRICT		RIVATE	CITY		CIT		FACIL	ITY	RESIDENTAL PARK CITY				MUL		AMPLIFIED
STREET	PROPER1	IY PR	OPERTY		OPERTY TARGE	PARK T MARK		FIEL FOR TH		RENT IS		AREAS	nat ap	LIMI7 ply)	IS	JURISDI	CTION	SOUND
									Τ									
YOUTH / FAMILIES	ADU	LTS	LOC	ΔΙ	STATE-	WIDE	RF	GIONAL	N/	ATIONAL		INTER NATIONAL	SPE	ECTATO	ORS	PARTICIP	ANTS	OTHER:
TYTIVILLE	7.20	210	200	7 (2	017.112			NT WILL					0. 2	2017111	or to	174(11011	7.1.1.0	
LIMIT # OF	PARTICIF	PANTS	BE FF	REE FC	R SPECT	ATORS			REE I			INCLUE	E VENI SPONS		OR	BE FRE	E AND (PUB	OPEN TO THE LIC
LIMIT # OF	SPECTA	TORS	CHA		DMISSION CTATORS	I FOR	(CHARGE	PART	ICIPANT	3	NOT INCL	UDE VE SPONS		RS OR	BE A	A PRIVA	TE EVENT
					THIS	EVENT	WI	ILL BE I	HELD): (Chec	k al	I that appl	y)					
EVENT DA	TE(S):							I					1			1		
MOND	***	T 1	IEODAY		WED	NEODAY			LIDOD	A.V.								
MONDA	41	11	<u>JESDAY</u>		WED	NESDAY		<u> IH</u>	URSD	AT		FRIDAY			SATUR	DAY		SUNDAY
	WEEKL	Y			ſ	MONTHL	/					SERIES				O	NE DAY	
NUMBER (UMBER OF EVENT(S): # OF CONSECUTIVE DAYS:																	



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	ONE DAY EVI	ENT HOUR(S)					
EVENT HOUR(S):		OPENING TIME:	EVENT ENDS:				
EVENT SET-UP DATE:		BREAK-DOWN DATE:					
SET-UP TIME(S):		BREAK-DOWN TIME(S):					
MULTIPLE DAY EVENT HOUR(S) – If different for each date							
DAY:	DATE:	OPENING TIME:	EVENT ENDS:				
EVENT SET-UP DATE:		BREAK-DOWN DATE:					
SET-UP TIME(S):		BREAK-DOWN TIME(S):					
DAY:	DATE:	OPENING TIME:	EVENT ENDS:				
EVENT SET-UP DATE:		BREAK-DOWN DATE:					
SET-UP TIME(S):		BREAK-DOWN TIME(S):					
DAY:	DATE:	OPENING TIME:	EVENT ENDS:				
EVENT SET-UP DATE:		BREAK-DOWN DATE:					
SET-UP TIME(S):		BREAK-DOWN TIME(S):					
DAY:	DATE:	OPENING TIME:	EVENT ENDS:				
EVENT SET-UP DATE:		BREAK-DOWN DATE:					
SET-UP TIME(S):		BREAK-DOWN TIME(S):					
DAY:	DATE:	OPENING TIME:	EVENT ENDS:				
EVENT SET-UP DATE:	,	BREAK-DOWN DATE:					
SET-UP TIME(S):		BREAK-DOWN TIME(S):					
	INCLIMATE WEATH	ER INFORMATION:					
DAY:	DATE:	OPENING TIME:	EVENT ENDS:				
EVENT SET-UP DATE:		BREAK-DOWN DATE:					
SET-UP TIME(S):		BREAK-DOWN TIME(S):					
No inclement weather date is the city due to hazardous or	s required, and the event will be held damaging conditions	rain or shine. I understand the event	may be cancelled or postponed by				
1000	EVENT ATTENDANCE (Complete all that apply)					
IF ANNUAL EVENT:							
TOTAL EVENT ATTENDANCE OF PREVIOUS YEAR:		TOTAL DAILY EVENT ATTENDAN OF PREVIOUS YEAR:	ICE				
	ANTS MUST COMPLETE THE FOLI		JAL EVENTS)				
ESTIMATED # OF PARTICIPANTS	S:	ESTIMATED # OF VENDORS:					
ESTIMATED # OF SPECTATORS	:	ESTIMATED # OF VOLUNTEERS					
ESTIMATED # OF STAFF:		ESTIMATED DAILY ATTENDANCE:					
ESTIMATED HIGHEST TOTAL AT AT ONE TIME:	TENDANCE	ESTIMATED TOTAL ATTENDACE OF ENTIRE EVENT:					
	e an attendance of 500 or more peoplit county: http://www.summitcountyhe		I may be required to obtain a mass				



Special Event Permit Application

	SIDEWALK & STREET USE (cir	cle a	and complete all that apply	y)						
THE EVENT WILL HAVE:										
STREETS										
STREET CLOSURE MAP IS A	ATTACHED		CLOSURE SIGN / MARKI	NG						
ROLLING CLOSURE	PARTIAL CLOSURE		FULL CLOSURE	NO CLOSURE						
NAMES OF STREETS TO BE CLC	OSED:	TIN	TIMES: (START / END OF CLOSURE)							
		ST	ART:	END:						
		ST	ART:	END:						
		ST	ART:	END:						
		ST	ART:	END:						
REASON FOR CLOSURE:		1		1						
	SIDEV	VALI	(S							
SIDEWALK CLOSURE MAP I	S ATTACHED		CLOSURE SIGN / MARKI	NG						
PARTIAL CLOSURE	FULL CLOSURE		NO CLOSURE	CROWD CONTROL PLAN	1					
ADDRESS:										
ADDRESS OF CLOSURE: (FROM	/ TO)	TIN	MES: (START / END OF CL	OSURE)						
FROM:	TO:	ST	ART:	END:						
FROM:	TO:	ST	ART:	END:						
FROM:	TO:	ST	ART:	END:						
FROM:	TO:	ST	ART:	END:						
REASON FOR CLOSURE:										
		AILS								
TRAIL COURSE MAP IS ATT			COURSE / SIGN MARKIN	IG INFORMATION IS ATTACHED						
NAMES OF TRAILS TO BE USED:	:									
	PAR		<u>:</u>							
ASSEMBLY AREA:	DISBANDING AR	REA:		# OF PARADE ATTENDEES:						
PARADE IS:										
WALKING COUNT	VEHIOLEO		VEHIOLES 33.13.4	NA(II) 1111/2 ANIII 2						
WALKING ONLY OTHER DARADE INEO:	VEHICLES & WALKING		VEHICLES ONLY	WILL HAVE ANIMALS						
OTHER PARADE INFO:										



Special Event Permit Application

CITY PARKING FACILITIES REQUEST														
	GENE	RAL PARKI	NG (Where will	you be	directir	g event attende	es to park	cars?)						
HOW MANY PA	RKING SPACES D	OES THE E	VENT NEED?			AT HIGHEST	POINT?							
MAIN S	STREET	(CHINA BRIDGE			FLAGPOLE LO	Т	BREW PUB LOT						
SANDRIDGE F	PARKING LOTS	F	PARK AVENUE			CITY PARK		MAWHINNEY LOT						
							OTUED:							
	QUINNS LOT	ICHARDS	SON FLAT	·s	OTHER:									
WILL THE EVEN	NT PROVIDE TRAN	TO THE	EVENT	FROM PARKIN	IG AREAS?:		YES		NO					
ADA PARKING A	AVAILABLE?:								YES		NO			
THE EVENT WIL	LL REQUIRE PAR	KING REMC	VAL?:						YES		NO			
The event will require parking removal as indicated below, and I will complete a special use of public parking application as required with the Park City Parking Services Department														
NAME OF AREA	OR STREETS:					BETWEEN:								
TIME - START /	END:			REASON (what/who):										
NAME OF AREA	OR STREETS:					BETWEEN:								
TIME - START / END:					REASON (what/who):									
NAME OF AREA OR STREETS:						BETWEEN:								
TIME - START / END:					ON (wha	ıt/who):								
NAME OF AREA OR STREETS:						BETWEEN:								
TIME - START /	END:			REAS	ON (wha	ıt/who):								
			TR	RANSPO	ORTATIO	N								
	WIL	L THE EVE	NT PROVIDE A	LTERN	ATIVE T	RANSPORTATI	ON OPTION	IS?						
	BUS			RI	KE			,	WALK					
	LICANT IS PROVID			RANSPO	RTATIC			S SCHED		AP	PLICANT			
	ISPORTATION PR			70.0.70	1710112	3 *************************************	1 210/111011	-						
PHONE:					EMAIL									
	ICANT IS PROVID	_	RANSPORTATIO	T TA NC	HE EVE	NT. WE HAVE P	ROVIDED E	3IKE PARI	KING ARE	AS	ON THE			
	PROVIDING WALK WITH THIS APPL		OPTION TO AT	- ΓEND ΤΙ	HE EVE	NT. WE HAVE P	ROVIDED W	√ALKING	PATH IDE	AS	ON THE			
ADDITIONAL TRAN	ISPORTATION INFOR	RMATION:												
			DLIF	RICEA	CILITY	ISF								
	MINERS HOSP	PITAL AT CITY				RY MEETING ROOM	AS II	M SANTY (AUDITORIUN	M				
	SOUTH CITY P					RED BBQ AREA		CITY PARK GAZEBO / STAND						
CHECK ALL	CITY PARK SO				K RUGBY			SKATE PARK AT CITY PARK						
THAT APPLY:	QUINN'S SPOR			ROTARY I				SCHOOL DISTRICT FIELDS						
	DIRT JUMP PA	.RK	-	PARK CIT	Y ICE AR	FNA		THFR [.]						



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445 Marsac Avenue
P.O. Box 1480
Park City, Utah 84060
Specialevents@parkcity.org

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			TEME	PORA	RY S	STRUC	TURE	S & FLAMN	//ABL	E MATE	RIALS						
I UNDERSTA BUILDING DI THE EVENT,	EPARTM	ENT. SUCH	RY STE HINSE	RUCTI PECTIO	JRE: ONS	S AND WILL	FLAM REQU	IMABLE MA ^T JIRE A FIRE	TERI	ALS MUS	T BE A	_			_		FORE
TEMPORARY BLEAC	CHERS	INFL	ATABL	LES CANOPIES TEMPORARY BADGES TEMPORARY LIG										GHT	ING		
TENTS 10X10 OR UNDER HOW MANY:																	
TRAILER			I	HOW I	MAN	IY:											
STRUCTURES OVER 6 FEET TALL PURPOSE: HO								HOW MANY	′ :								
DOES EVENT HAV NEEDS?:	DES EVENT HAVE ELECTRICAL SEDS?: NO DOES EVENT REQUIRE USE OF GENERATE						RATOR	S	YES		NO						
WILL YOU BE REC	UESTIN	G PERMITS	FOR	FIRE\	WOF	RKS?:									YES		NO
WILLTHE EVENT F		THE USE	OF FL	AMMA	ABLE	MAT	ERIAL	S, FUELS O	R GA	ASSES?:					YES		NO
				W	ASTE	E MAN	AGEN	IENT AND R	RECY	CLING							
THE EVENT	WILL PRO	OVIDE ITS	OWN (GARB	AGE	CANS	AND	WASTE MAI	NAGI	EMENT.							
THE EVENT	WILL PRO	OVIDE ITS (I NWC	DUMP	STE	RS, W	HICH	IS INDICATE	10 DE	N THE SI	TE MAP	·.					
THE EVENT	WILL USE	E THE CITY	"S GA	RBAG	E CA	ANS AI	ND W	ASTE MANA	GEM	ENT, RE	QUIRIN	G ADDI	TIONAL	FEES	S.		
THE EVENT	WILL USE	E THE CITY	"S DU	MPST	ERS	, REQ	UIRIN	G ADDITION	IAL F	EES.							
THE EVENT	WILL HIR	RE A COMPA	ANY A	ND PF	ROV	IDE RE	CYCL	ING SERVI	CESI	FOR THE	FOLLO	WING I	MATERIA	ALS:			
PLASTIC		APER		ALUMIN				SLASS		CARDBOA			MPOST		OTHER		
THE EVENT	WILL UTI	LIZE CITY F	RESTF	ROOM	FAC	CILITIE	S (List	areas of city	/ rest	room facil	ities bel	ow:					
THE EVENT (May be requi										-							
WILL ANIMALS BE	AT THE E	EVENT?:	Υ	ES		NO	IF Y	ES, PLEASE	DES	SCRIBE T	YPE OF	ANIMA	ALS AND	WAS	STE PLAN	NS	
TYPES OF ANIMALS:		,	1														
I HAVE INCL	JDED TH	IE PLACEM	ENT C	OF THE	E AN	IIMALS	IN TH	HE SITE MAI	P OR	LINE UP	IN THE	CONTI	NGENC'	Y PL	AN		
WILL DOGS BE ALI	LOWED A	AT THE EVE	ENT?:			YES		NO		LE	ASHED)	UN	ILEA	SHED		
WASTE MAN	AGEMEN	NT PLAN HA	AS BEI	EN DE	SCF	RIBED	IN THI	E CONTINGE	ENC	Y PLAN A	TTACH	ED TO	THIS AP	PLIC	ATION.		
					F	SOD &	MER	CHANDISE S	SALE	S							
I UNDERSTA DRINKS MAY					_						_					0	R
WILL THERE BE SALE OF MERCHANDISE?: YES NO									NO								
WILL THERE BE CO	WILL THERE BE COMPLIMENTARY FOOD?: YES NO									NO							
WILL THERE BE SA	WILL THERE BE SALE OF FOOD?: YES NO									NO							
WILL THERE BE AL	COHOL	FOR SALE	?:											`	YES		NO
BEER WINE LIQUOR																	

I HAVE CONTACTED THE PARK CITY FINANCE DEPARTMENT REGARDING REQUIREMENTS FOR BEER & LIQUOR LICENSES.



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I UNDERSTAND THA PERMITS.	AT THE UTAH DEPARTMEN	T OF ALCOHO	LIC BEVERAC	GE CONTROL (UDABO	C) MAY RE	QUIRE OTHE	ΞR			
WILL FOOD ITEMS BE PRE	E-PACKAGED?:					YES	NO			
WILL FOOD ITEMS BE COO	WILL FOOD ITEMS BE COOKED ON SITE?:									
I UNDERSTAND THAT IF COOKING IS ONSITE, A PARK CITY BUILDING/FIRE PERMIT MAY BE REQUIRED.										
WILL FOOD ITEMS BE PREPARED OFFSITE?: YES NO										
DESCRIBE ITEMS:						<u> </u>				
		TEMPORA	RY SIGNS							
WILL THERE BE TEMPORA	ARY SIGNS AT THE EVENT	?:				YES	NO			
I HAVE ATTACHED A	SIGN PLAN DESCRIBING	THE CONTEN	T, SIZES AND	LOCATIONS IN THE	CONTING	ENCY PLAN.				
		SAFETY -	SECURITY							
THE EMERGENCY AND SECURITY PLAN HAS BEEN ATTAACHED IN THE OPERATIONS PLAN, INCLUDING CROWD CONTROL, ACCESS, FIRST AID. AFTER REVIEW OF THIS APPLICATION, REQUIREMENTS FOR EMTS, FIRE AND POLICE SERVICES WILL BE DETERMINED AS PART OF THE CONDITIONS OF APPROVAL OF THIS EVENT. THE SPECIAL EVENTS DEPARTMENT WILL BE ABLE TO GIVE THE APPLICANT AN ESTIMATE OF SUCH CITY SERVICE REQUIREMENTS.										
THE EVENT WILL RE	EQUIRE LAW ENFORCEMEN	IT SERVICES	BEYOND ROL	JTINE PERIODIC PATE	ROL.					
THE EVENT WILL NOT REQUIRE LAW ENFORCEMENT SERVICES BEYOND ROUTINE PERIODIC PATROL.										
COMMUNICATION NEEDS										
WILL THERE BE INSTALLATION OF AN ANTENNA FOR COMMUNICATION NEEDS?: YES NO										
INSTALLATION OF AN ANTENNA FOR COMMUNICATION IS INDICATED IN THE SITE PLAN WITH SPECIFICATIONS.										
		MARKETING	OF EVENT							
PROPER MARKING OF Y	OUR EVENT IS VITAL TO IT				Y CHAMBI	ER FOR ADD	ITIONAL			
I HAVE CHOSEN TO	LIST INFORMATION REGA	RDING MY EV	ENT ON THE	PARK CITY CHAMBER	R'S WEBS	ITE.				
I HAVE CHOSEN NO	T TO LIST INFORMATION R	EGARDING M	Y EVENT ON	THE PARK CITY CHA	MBER'S W	/EBSITE.				
WHO IS THE TARGET MAR	RKET FOR THIS EVENT?:									
	WHERE IS THE TARGET	MARKET FO	R THIS EVEN	T?: (choose all that app	oly)					
LOCAL	REGIONA			IATIONAL	I	NTERNATIONA	L			
WILLTHIS EVENT BE FILM	ED AND TELEVISED?: (cho	ose all that app	oly)			YES	NO			
LOCAL	REGIONA	L	N	IATIONAL		NTERNATIONA	AL.			
PLEASE LIST ALL ADVERT	TISEMENT INCLUDING MED	IA COVERAG	E, NEWSPAPI	ER AND MAGAZINES:						
MEDIA (RADIO/TV):										
NEWSPAPER:										
MAGAZINES:										
OTHER:										
PLEASE SELECT RANGE	PLEASE SELECT RANGE OF MARKETING BUDGET:									
\$100 OR UNDER	\$100 - \$500	\$500 -	\$1,000	\$1,000 - \$2,500		ABOVE \$2,500				



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APPLICANT AGREEMENT & SIGNATURE							
I, the undersigned representative, have read the rules and regulations with reference to this application and am duly authorized by the organization to submit this application on its behalf. The information contained herein, including supporting documentation is complete and accurate.							
Name (Printed):							
Signature: Date:							



Applicant Address and Phone Number

PARK CITY MUNICIPAL CORPORATION Special Event Hold Harmless and Indemnification Agreement

This Hold Harmless and Indemnification Agreement must be completed and returned to the Special Event Manager ten (10) working days prior to the event or the event will be cancelled.

PLEASE PRINT	
Name of Applicant	
Name of Special Event	
Date(s) of Event	
Each person signing this Agreement represents and warrants that he or she is duly authorized and deliver this Agreement. Each party represents and warrants to Park City M execution and delivery of the Agreement and the performance of such party's obligatio authorized and that the Agreement is a valid legal agreement and binding on such party with its terms.	unicipal Corporation that the ns hereunder have been duly
The person signing this Agreement represents and warrants to Park City Municipal Corcoverage in place that covers the scope of activities associated with this event. This per warrants that the insurance coverage limits meet or exceed the coverage required to obtain	son further represents and
For and in consideration of Park City Municipal Corporation (PCMC) issuing a permit and/or City owned/public property for the conducting of an event to be held as reported hold harmless, and indemnify PCMC, its officers, agents, servants, employees, and the all claims, loss, or demands for damages, including claims for loss of life, personal damage to property arising out of the conduct of said Special Event as defined by Ti Code, and further agrees that Applicant is indemnifying and holding harmless PCMC or limits of Applicant's insurance policies adequately cover any of the aforementioned	I above, hereby agrees to defend leir successors, from and against injury or wrongful death and/or tle 4 of the Park City Municipal rrespective of whether the scope
Name of Applicant	
Signature	
Name Printed	
Title	

STATE OF UTAH)	
)ss. COUNTY OF SUMMIT)	
	before me, the undersigned notary, personally appeared ved to me through identification documents allowed by
law, to be the person whose name is signed on the preceding signed it voluntarily for its stated purpose as	•
·	
	Notary Public