

1st Reading: 6-6-11
2nd Reading: 6-20-11
3rd Reading: 7-5-11

RECORD OF ORDINANCES

Tabled until 7/18/11

Dayton Legal Blank, Inc.

Form No. 30043

Ordinance No. 8109 ^{as amended} _{by substitution} ^{7/5/11} Passed July 18, 20 11

ORDINANCE AMENDING AND ADOPTING CHAPTER 111 OF THE CODIFIED ORDINANCES OF THE CITY OF BOWLING GREEN, OHIO, REGARDING SPECIAL EVENTS

BE IT ORDAINED BY THE COUNCIL OF THE CITY OF BOWLING GREEN, OHIO, COUNTY OF WOOD, STATE OF OHIO:

SECTION 1: That Chapter 111 of the Codified Ordinances of the City of Bowling Green, Ohio, currently regulating "Carnivals, Circuses, and Shows" is hereby amended and adopted and entitled "Special Events" and to read as follows:

Chapter 111: Special Events

111.01 PERMIT REQUIRED

A permit is required for any special event on public property. The purpose of the special event permit is to provide the City adequate information and time to provide for appropriate emergency provisions or other municipal support if needed.

A special event permit application form must be adopted by the Municipal Administrator and provided to all special event permit petitioners. No organizer of a special event shall give, attempt to give, or hold any exhibition, demonstration, show, or sale without having first obtained a permit unless specifically exempted by the Municipal Administrator.

111.02 PERMIT APPLICATIONS

The person or entity requesting the special event permit shall file an application with the Municipal Administrator on forms provided by the Municipal Administrator.

(A) *Filing period.* An application for a special event permit shall be filed with the Municipal Administrator not less than 21 days nor more than 120 days before the date on which it is proposed to be conducted.

(B) *Late applications.* The Municipal Administrator, where good cause is shown, shall have the authority to consider any application which is filed less than 21 days before the date the special event is proposed to be conducted.

(C) *Fee.* The person or entity requesting the permit shall pay a fee of \$25 each day the special event, ~~carnival, circus, menagerie or show~~ shall be held, unless that fee is waived by the Municipal Administrator. However, this fee shall not exceed more than \$100 in any one week.

CERTIFICATION

This is to certify that the foregoing is a true copy of Ord No. 8109 passed by the Council of the City of Bowling Green, Ohio, July 18, 20 11
[Signature]
Clerk of City Council

111.03 ISSUANCE; REFUSAL OR REVOCATION

The permit request provided for in this chapter shall be ruled upon by the Municipal Administrator or his designee within seven days of the filing of the request. A permit request that is refused may be appealed to City Council by the petitioners. A permit granted by the Municipal Administrator may be appealed to City Council by any Bowling Green City resident. An appeal must be filed with the Clerk of Council not less than ten days before the event is scheduled. City Council shall vote to grant or revoke the permit.

111.04 SPECIAL EVENT AREA

The special event permit holder may restrict soliciting and canvassing within the permit area to conform to the purposes of the special event. Commercial canvassing and soliciting may be limited to those entities provided permission from the special event permit holder. Non-commercial canvassing and soliciting that inhibits the organizers or participants ability to peacefully conduct or enjoy the special event for its stated purpose may be restricted to a specific section of the special event area that allows assembly without imposing an undue burden on those wishing to express their free speech and assembly rights and does not restrict or infringe upon the purposes and functions of the special event.

111.05 RULES AND REGULATIONS OF SPECIAL EVENT AREA

Unless exempted by the Municipal Administrator, the special event petitioners must create rules and regulations for the special event that address issues of pedestrian movement, parking, traffic flow, alcohol sales, liability insurance, vendor rules, commercial and non-commercial solicitation rules, and other rules as needed for the special event area. Once the rules are agreed to by the Municipal Administrator and the special event permit petitioners, they may be adopted as administrative rules for the special event area by the Municipal Administrator.

SECTION 2: This ordinance shall take effect at the earliest time permitted by law.

Passed: July 18, 2011 _____
Date President of Council

Attest: [Signature]
Clerk of Council

Approved: July 19, 2011 _____
Date Mayor

MICHAEL J. MARSH
CITY ATTORNEY
kds

CITY OF BOWLING GREEN, OHIO SPECIAL EVENT PERMIT APPLICATION

EVENT DESCRIPTION

Event Title _____

Description/Purpose

(This should be promotional _____
in nature and not exceed
300 characters) _____

- Event Category**
- | | | |
|--------------------------------------------------|----------------------------------------------------|-----------------------------------|
| <input type="checkbox"/> Athletic/Recreation | <input type="checkbox"/> Concert/Performance | <input type="checkbox"/> Circus |
| <input type="checkbox"/> Exhibits/Misc | <input type="checkbox"/> Farmer/Outdoor market | <input type="checkbox"/> Carnival |
| <input type="checkbox"/> Festival/Celebration | <input type="checkbox"/> Museum Special Attraction | |
| <input type="checkbox"/> Parade/Procession/March | <input type="checkbox"/> Dance | |

Anticipated Attendance Total _____ Per Day _____

Anticipated Participants Total _____ Per Day _____

DATE/TIME

Setup	Date _____	Time _____	Day of Week _____
Event Starts	Date _____	Time _____	Day of Week _____
Event Ends	Date _____	Time _____	Day of Week _____
Dismantle	Date _____	Time _____	Day of Week _____

LOCATION

Location Description

APPLICANT AND HOST ORGANIZATION INFORMATION

CONTACTS

Host Organization _____

Chief Officer of Host Organization _____

Applicant Name _____

Address Street _____

City _____ State _____ Zip _____

Telephone Day _____ Evening _____ Fax _____

Cellular _____

Web Address _____

President or Chairperson Name: _____

Telephone: () _____

Email _____

CONTACTS- Cont.

Event Organizer
(primary contact)

Name _____

Telephone: () _____

Email _____

Media Contact

Name/Title: _____

Telephone: () _____

Email _____

Additional Contact

Name: _____

Area of responsibility _____

Telephone: () _____

Email _____

Additional Contact

Name: _____

Area of responsibility _____

Telephone: () _____

Email _____

YES

NO

Is this an annual event?

How many years have you been holding this event? _____

Is your event part of a larger marketing campaign? If yes, please explain:

ORGANIZATION STATUS/PROCEEDS/REPORTING

YES

NO

Is the Host Organization a commercial entity?

Is the Host Organization a bona fide tax exempt, nonprofit entity? If yes, you must attach to this application a copy of your IRS 501© tax exemption letter providing proof and certifying your current tax exempt, nonprofit status.

Are patron admission, entry or participant fees required? If yes, please provide amounts: _____

Are vendor or other fees required? If yes, please provide amounts: _____

\$ _____

Estimated gross receipts including ticket, entry, vendor, product and sponsorship sales from this event. Please explain how this amount was computed: _____

\$ _____

Estimated expenses for this event

\$ _____

What is the projected distribution or net dollar amount the Host Organization will receive from this event?

CITY SERVICES REQUESTED BY EVENT ORGANIZER

_____ Police Division

_____ Fire Department/EMT/Ambulance

_____ Electric

_____ Water & Sewer

_____ Public Works

_____ Other _____

SITE PLAN/ROUTE MAP

Your event site plan/route map should be submitted in a printed digital format and include but not be limited to (please indicate that documents requested below are provided):

- _____ An outline of the entire event venue including the names of all streets or areas that are part of the venue and the surrounding area. If the event involves a moving route of any kind, indicate the direction of travel and all street or lane closures.
- _____ The location of fencing, barriers, and/or barricades. Indicate any removable fencing for emergency access.
- _____ The provision of minimum twenty foot (20') emergency access lanes throughout the event venue.
- _____ The location of first aid facilities and ambulances.
- _____ The location of all stages, platforms, scaffolding, bleachers, grandstands, canopies, tents, portable toilets, booths, beer gardens, cooking areas, trash containers and dumpsters, and other temporary structures.
- _____ A detail or close-up of the food booth and cooking area configuration including booth identification of all vendors cooking with flammable gases or barbecue grills.
- _____ Generator locations and/or source of electricity.
- _____ Placement of vehicles and/or trailers.
- _____ Exit locations for outdoor events that are fenced and/or locations within tents and tent structures.
- _____ Identification of all event components that meet accessibility standards.

- _____ Other related event components not listed above.

- _____ Non-Permit Area. Organizers of a special event may set up a so called non-permit area for those persons or groups that desire to participate in the special event but the planned presentation, demonstration, or solicitation does not fit within the parameters of the purposes of the special event. If the organizers of the event are planning a non-permit area a diagram of the area, a description of the purposes of the area and accommodations that will be made for those participating in the non-permit area must be attached. The attachment should also provide a security plan and describe how the area will be administered and controlled.

SECURITY PLAN

YES

NO

Have you consulted with the City of Bowling Green Police Division regarding security?

Have you hired a licensed professional security company to develop and manage your event's security plan? If yes, you are required to provide a copy of the license issued by the State of Ohio for the professional security company.

Security Organization _____

Address Street _____

City _____ State _____ Zip _____

Telephone Day _____ Evening _____ Fax _____

Cellular _____

Private Security Company License # _____

Please describe your security plan including crowd control, internal security or venue safety, or attach the plan to this application.

MEDICAL PLAN

YES

NO

_____ Have you consulted with the City of Bowling Green Fire Division concerning a medical plan?

_____ Have you hired a licensed professional emergency medical services provider to develop and manage your event's medical plan? If yes, please list: _____

Medical Services Provider _____

Address Street _____

City _____ State _____ Zip _____

Telephone Day _____ Evening _____ Fax _____

Cellular _____

Please describe your medical plan including your communications plan, the number, certification levels (MD, RN, Paramedic, EMT) and types of resources that will be at your event and the manner in which they will be managed and deployed. Your plan should include hours of setup and dismantle of medical aid areas. You may attach the plan to this application if necessary.

ACCESSIBILITY PLAN

This checklist is intended to serve as a planning guideline and may not be inclusive of all City, County, State and Federal access requirements. You may attach more detailed information if necessary.

YES

NO

_____ _____ Will there be a Clear Path of Travel throughout your event venue? Please describe: _____

_____ _____ Have you developed a Disabled Parking and/or Transportation Plan (including the use of public transportation or shuttle services) for your event? Please describe: _____

_____ _____ Will a minimum of 10% of portable rest rooms at your event be Handicap accessible? Please describe: _____

_____ _____ Will all food, beverage and vending areas be Handicap accessible? Please describe: _____

_____ _____ Will all signage be provided in highly contrasting colors and placed so pedestrian flow will not obstruct its visibility? Please describe: _____

Accessibility Plan- Cont.

YES

NO

_____ _____ If telephones are provided, will at least one telephone at each phone bank have a volume control and be hearing aid compatible? Please describe:

_____ _____ If an information center is provided at your event will customer service representatives be available to assist disabled individuals? Please describe: _____

_____ _____ If all areas of your event venue cannot be made accessible will maps or programs be made available to show the location of accessible rest rooms, parking, phone (if any), drinking fountains, and first aid stations? Please describe: _____

PARKING AND SHUTTLE PLAN

YES

NO

_____ _____ Will your event involve the use of a parking and/or shuttle plan? If yes, please describe or provide an attachment of your plan.

ENTERTAINMENT AND RELATED ACTIVITIES

YES

NO

_____ _____ Are there any musical entertainment features related to your event? If yes, complete the following information or provide an attachment listing all bands/performers, type of music, sound check and performance schedule.

Number of stages _____

Number of Performers/Bands _____

Performer/Band name and music type _____

_____ _____ Will sound checks be conducted prior to the event? If yes,
Start time _____ Finish time _____

_____ _____ Will sound amplification be used? If yes,
Start time _____ Finish time _____

Please describe the sound equipment that will be used for your event:

_____ _____ Do you plan to have a patron dance component to either live or recorded music at your event? If yes, please describe: _____

_____ _____ Will inflatables, hot air balloons or similar devices be used at your event? If yes, please describe: _____

ENTERTAINMENT AND RELATED ACTIVITIES- Cont.

YES

NO

_____ _____ Does your event include the use of fireworks, rockets, lasers, or other pyrotechnics? If yes, please describe:

_____ _____ Will your event include the use of any signs, banners, decorations, or special lighting? If yes, please describe: _____

_____ _____ Have you consulted with the Ohio Investigative Unit concerning casino games, bingo games, drawings or lottery opportunities?

_____ _____ Do your event plans include any casino games, bingo games, drawings or lottery opportunities? If yes, please describe: _____

ALCOHOL

If you plan to sell or furnish alcoholic beverages at your event you will be required to obtain a permit from the Ohio Division of Liquor Control. In many areas of the city, the public consumption of alcohol is illegal. The Special Event Permit you receive from the City of Bowling Green will likely prohibit the consumption of alcohol in the event venue outside of a controlled beer garden. If your event includes the use of alcohol on city property, Liquor Liability Coverage must be included on your certificate of insurance.

FOOD CONCESSIONS OR PREPARATION

Guidelines for food facilities are provided by the Wood County Health Department- 419-352-8402. These guidelines should assist you in developing plans for food handling, preparation and distribution in the most responsible and legal manner.

You may be required to apply for a health permit if food or beverages are sold or given away during your special event. If applicable, be sure to include your organization's 501 (C) identification number in order to receive a "nonprofit" classification number by the County Department of Environmental Health. Different permits, policies and procedures depend on your classification and the number of days of your event.

Submitted by (please print) _____
Signature _____
Telephone _____ Date _____

Approved- Date _____ Denied- Date _____
Signature _____