City of Long Beach

DEPARTMENT OF PARKS, RECREATION AND MARINE

2760 Studebaker Road, Long Beach CA 90815---FAX (562) 570-3113

Application for Facility Use Permit

This application does not guarantee a reservation until approved by the Director of Department of Parks, Recreation and Marine or his/her designee. Please check the appropriate box(es) and indicate the facility requested:

☐ **Athletic Field** ☐ **Beaches/Waterways** ☐ **Community Center** ☐ **Gymnasium**

☐ **Picnic Area** ☐ **Special Use** ☐ **Pool** ☐ **Other (Please specify)**

Facility/Park Site: 1st Choice _____ **2nd Choice** _____

Name (Individual/ Organization): _____Email_____

If Organization: 501 (c)(3) _____ Private for profit _____

Contact Person/Representative: _____ _____

Applicant must be at least 21 years of age and will be responsible for the entire event. **Position Title**

Address: _____**City** _____ **Zip** _____

Telephone: **Home**: (___) _____ **Work**: (___) _____ **Fax:** (___)_____ **Cell**: (___) _____

Date of Event: _____ **Day:** _____ **EVENT START TIME:** _____

Start Time (SET UP): _____**End Time:** _____**(12:00am Max) Total Hours Requested:** _____

(Applicant must include set-up/decorating time and clean-up time.)

Name of Event: _____**Type of Event:** _____

For birthday/graduation party, indicate age of celebrant: _____ (Two security guards will be required for teen parties.)

Number of participants: **Adults** _____ + **Minors** _____ = **Total** _____

Please answer all questions correctly. Unanswered questions may delay your request.

1. Is the event open or advertised to the public? Yes ____ No _____
2. Is this a car/motorcycle club? Yes ____ No _____
3. Is this a fundraising/revenue producing event? Yes ____ No _____
4. Will there be soliciting or selling of any kind? Yes _____ No _____

If YES on items 1, 2, 3 or 4, please also complete items 17-30 on pages 3 & 4 (Special Use Information)

5. Is this an organized group, such as a club, school or business? Yes_____ No _____
6. Will there be a caterer to provide food for your event? Yes ____ No _____
   If yes, please make sure that the caterer has a Long Beach Business License.
7. Will this event be having some type of music? Yes _____ No _____

   Please check: Live Band _____ Disc Jockey _____ Amplified Music _____ P.A. System _____ Radio_____
   Please note that some facilities may not allow music.
8. Will there be dancing? Yes _____ No _____
   Please note that teen (13-20 years old) parties will be required to have two paid licensed security guards. The appropriate security guard fee will be assessed the group for the number of hours needed.
9. Will there be preaching? Yes _____ No _____
10. Will the event be advertised prior to event date? How? Yes _____ No _____

    Please check: Flyer _____ Newspaper _____ Radio _____ Internet_____
11. Will there be any type of display or advertising at the event? Yes _____ No _____
12. Will you be displaying or judging any motor vehicles? Yes _____ No _____
13. Will there be any promotionals or give aways/samples? Yes _____ No _____
14. Will there be animals during the event? Yes _____ No _____
    Animal shows will require a permit from the Animal Control Office.
15. Will you be having a moonbounce? (Only on designated areas) Yes ____ No ____

    Name of authorized moonbounce company from current list: _____

16. **Please <u>read and initial</u> on the following important policies, rules and regulations**:

____a. **Set-up/clean-up/removal of decorations** will be the responsibility of the group. Please include this in your requested time. On the date of the reservation, the permittee will be required to sign two forms prior to and after the event: 1) Facility Reservations checklist, a walk-through of the facility; and, 2) Application for Return of Deposit. Non-compliance of this policy will cause forfeiture of the refundable security deposit. The deposit will be refunded to the applicant WITHIN 4-6 WEEKS if the **facility is left clean and free of damage**.

____b. Issue refundable deposit check to: _____.

____c . **Amenities** may not be adequate. Please contact the facility supervisor to check on amenities such as tables, chairs, kitchen, refrigerator, etc. (The use of the refrigerator and freezer at the Senior Center Auditorium kitchen/cafeteria area is prohibited.) Groups are responsible for providing additional tables and chairs needed.

____d. **Consumption of alcohol** (wine, beer, champagne, etc.) **or substance abuse is not allowed** on any City of Long Beach properties. Violation of this regulation will mean forfeiture of the refundable security deposit and cancellation of your event at time of infraction.

____e. **Parking** will only be allowed in designated areas. No parking or driving on grass.

____f. **Gambling** is not allowed on City of Long Beach properties.

____g. The use of **candles is not allowed** inside the community centers.

____h . Other permits may be required depending on the type of event (i.e. Business License, Health, Charitable Solicitation.)

____i. **Law enforcement** intervention due to violation of rules and regulations will mean cancellation of event and may incur additional charges, affect future use and forfeiture of any remaining fees and security deposit paid.

____j. Applications must be received at least **<u>15 working days</u>** prior to the date of the event. To avail of the Long Beach residence fee, please attach a **<u>copy of your CA Driver's License/ID Card and a most recent utility bill</u>**. Requests made 10-14 working days prior to the event must be made in person and all fees paid for in full. Requests made less than 10 working days but no less than 5 working days may be accommodated on a case by case basis, subject to availability of facility and staff, and groups will be charged the late booking premium fee. Any request for fee waivers must be made 60 days prior to the event.

____k . **Submission of the completed form does not guarantee you the facility/date. You will be notified if the facility is not available.**

____l. Reservations can only be made 6 months in advance. Submit the completed application form along with **the initial deposit of $375 if booking a social hall or a $118 deposit if booking a reservable picnic site/open spac**e.**.** This amount will be applied to your refundable deposit as soon as the booking is made. If facility or any other alternative is not available, your initial deposit will be returned. **$30 is due for all Permits issued and is non-refundable.**

____ m. Permittee must **sign the facility permit and return along with the balance of the payment** within the due date indicated on the permit (10 calendar days after the reservation was made). In the event the signed permit and balance payment are not received by the due date, your reservation will be canceled, and you will be refunded the deposit less the applicable service fee. **PERMITS ARE NOT VALID WITHOUT AN ORIGINAL SIGNATURE—FAILURE TO SIGN WILL VOID PERMIT**

____n. For **teen parties** (under 21 years of age), reservations must be made at least 15 working days prior to the event, NO EXCEPTIONS. Group must inform staff of the actual time the party starts. Security guards (minimum of 5 hours) are required to be present 30 minutes prior to guest arrival, whole duration of the event, and 30 minutes after the event. No event will be permitted to start without the two licensed security guards present.

____ o. **Cancellation Policy**: Notice of cancellation must be made at least 20 working days prior to the event to receive a refund less the applicable processing fee of $70.00 for $120 or less; or $133.00 for over $120; If a **<u>paid reservation that was made less than 20 working days is being canceled, the permittee will forfeit facility fees paid</u>**. **<u>PERMIT FEE IS NON-REFUNDABLE</u>**.

____ p. Any request, **<u>to extend the time of the original reservation</u>** must be made a **<u>minimum of one hour</u>** and must be made at least **<u>10 working days</u>** prior to the event, subject to availability of facility and staff. However, changes for teen parties must be requested at least **<u>15 working days</u>** prior to the date of the event. Changes made on the dates, times, number of attendees, etc. after the permit has been processed will be assessed **a permit change fee of $30** per occurrence.

____ q. Any **cost incurred due to damage** to the facility or due to **law enforcement intervention** arising from the group's event will be billed to the group.

____ r. Payments may be in the form of cash, check, or credit card. All fees for reservations made with 15 working days or less must be paid in full, and **must be made by cash, money order/cashier's check or by credit card** (Visa or MasterCard).

If paying by credit card, please complete credit card information: Amount - $_____ ☐ Visa ☐ MasterCard

Acct. # (All Digits) ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Exp. Date ☐☐ ☐☐ ☐☐
Month Day Year

Signature (required): _____3 Digit CVC Code _____

Name of credit card holder, if different from applicant: _____

Billing address of credit card holder: _____

If the applicant provides false information such as: purpose of event, names & addresses of event holder(s), number of persons in attendance, etc., the event may be canceled prior or during the event at the discretion of the City staff and will result in forfeiture of fees and deposits and/or denial of current and future applications for use of Department facilities and may incur additional City charges. The City reserves the right to cancel any reservation with 30 days notice.

I certify that I have read and understand all the rules and regulations governing the use of the facility. I, the undersigned, do hereby agree that we will abide by the policies governing the use of the facility and will be responsible for any damages to the facility, furniture, or equipment caused by our occupancy of the facility. I understand that any false information provided or violation of any rules and policies will result in immediate cancellation of our event and will cause forfeiture of all fees and deposits. I have read and understand the cancellation policy and it's fees.

Signature of Applicant: _____ Date: _____

SPECIAL USE INFORMATION

(Subject to approval from the Director of Parks, Recreation and Marine.)

Please answer all the questions and provide additional sheets if necessary.

17. Event Dates(s): _____ Time: _____
_____ Time: _____
_____ Time: _____

18. Set up Date(s)/Time: _____

19. Break Down Date(s)/Time:_____

20. Estimated No. of Attendance: Participants _____ Spectators _____ Staff _____
Volunteers _____ Vendors _____ Other _____

21. How will the event be advertised? (Flyers, newspapers, radio, television, internet, etc.) Please describe.

_____

_____

22. Will monies or donations be collected at the event? Yes ____ No ____
If yes, please explain types of fees or charges and amounts.

_____

_____

23. How will the funds generated by the event be used?

_____

_____

24. Will food or merchandise be sold or displayed at the event? Yes ____ No ____
If yes, anticipated number of food vendors: _____ Anticipated number of merchandise vendors: _____

25. Will food or merchandise be given away for free? Yes ____ No ____
Please explain.

_____

_____

26. Will you require electricity for any portion of your event? Yes ____ No ____
If yes, please explain in detail what the electricity will be used for and how it will be provided. (Electricity is only available at certain picnic sites.)

_____

_____

27. Will any temporary structures or equipment be brought to the site for the event? (Stages, fencing, generators, lighting, sound system, seating, bleachers, tents, booths, portable toilets, etc.) Yes ____ No ____
If yes, please describe in detail and attach site plan. Tent/Canopies larger than 10 X10 need special permits & approval.

._____

_____

_____

28. Will the event include music or amplified sound? (P.A.. system, live music, recorded music, DJ, etc.) Yes____ No ___ If yes, describe in detail. (If live performance, please include names of performers.)

_____

_____

_____

29. Please provide any additional information concerning the scope of your event not addressed above. (i.e. carnivals, game booths, animal rides, moonbounces, etc.)

_____

_____

_____

_____

30. If you answered "Yes" to questions 1 through 3, the following are additional permits or approvals required from other City Departments depending on the type of activity:

a) CA Coastal Commission - Coastal Clearance for events by the beaches and waterways
b) Financial Management - Business License for selling food or merchandise
c) Fire Department - For tent/canopy, open flame, or site plans
d) Health Department - Food permit from Environmental Health Division
e) Parks, Recreation & Marine - Liability Insurance from Contract Division for events open to the public
f) Planning & Building - Electrical, generator, stages, fencing and temporary structures
g) Police Department - Special Event Coordinator for security
- Charitable Solicitation Permit from the Special Permits Office
h) Public Service - Barricades/cones and "no parking" signs from Street Maintenance

The proposed event may require additional review, approval, permits, licenses and/or inspections from other City departments. I understand that if I have provided false or inaccurate information on this application, the event may be canceled prior to or during the event at the discretion of the Director of Parks, Recreation and Marine, or his/her designee, and will result in forfeiture of fees paid, deposits and/or denial of current and future applications for use of Department facilities and may incur additional City charges.

I am authorized to sign on behalf of the applicant/organization. I hereby certify that to the best of my knowledge and belief the above statements are true. I agree to reimburse the City of Long Beach for any loss or damage caused by this usage and to hold the City safe from any liability arising out of the use of the premises or equipment. I will be present throughout the activity and will be responsible for the adherence to regulations governing use of the facilities.

_____ _____
Name (Please Print) **Organization**

_____ _____
Signature **Title** **Date**

FOR DEPARTMENT USE ONLY

_____ _____
Received by Date

_____ _____
Department Approval Date

_____ _____
Processed by Date

_____ _____ _____ _____
Permit # Date Permit Sent to Permittee Staff's Initial Date Signed Permit Rcvd Processed by

KW Revised 05/15/15
Facapplication.doc