

MAIL TO: Molly Fisher KC Outdoor Events Manager Evenergy 1712 Main Street, Ste. 325, Kansas City, MO 64108

Phone: 602-377-7433

Email: mfisher@evenergy.com

APPLICATION FOR OUTDOOR EVENT PERMIT

This Kansas City Outdoor Event Permit Application has been designed to assist event organizers in planning and to allow city departments to have complete access to information about your event in order to better serve you. Please be advised that there may be additional city permits needed for outdoor events, each with its own deadlines and fees. Refer to the Guidelines and FAQs to help you determine when other city permits might be needed. An Outdoor Event Permit, if issued, authorizes Applicant or Sponsor/Host Organization to conduct an outdoor event in Kansas City, Missouri. Submittal of this application in no way constitutes approval of the event. Permits are issued at the discretion of Kansas City, Missouri upon thorough application review.

INSTRUCTIONS:

- 1. 90 days prior to your event, submit completed application with all required documents to the address above.
- 2. Upon date and location review and approval, a tentative permit will be issued via email to the applicant.
- 3. Review the "General Requirements, Guidelines & Conditions". These will help you determine what additional city permits may be required.
- 4. Make contact with the related city departments and apply for necessary permits according to their deadlines.
- 5. Upon approval from all related city departments, final permit will be issued via email to the applicant.

vent Name: Free Form			
urpose:		Dorade	
Athletic/Recreation	0 P	Parade/Procession/March/Rally Parade/Promotion/Advertising	
Art Fair/Museum/Special AttractionConcert/Performance	0 P	romotion/Advertising ace/Walk/Bicycle Ride — Send to Race	
o Festival/Street Celebration/Carnival—FeStival	0 R	ther:	
o Film Production Street Closure		mor.	
vent Description:			
vent Dates/Times:			
Set up: Date: Times:		Day of Week:	
Event Start: Date: Times:		Day of Week:	
		Day of Week:	
Event End: Date: Times:			
Breakdown: Date: Times:_	1-1-1		
Breakdown: Date: Times:_		Day of Week:	
Breakdown: Date: Times:_		Day of Week:Est. Daily:	
Breakdown: Date: Times:_ ttendance: st.Total: Est. Pre-sale: Est. Wa	alk-Up:	Day of Week:Est. Daily:	
Breakdown: Date: Times:_	alk-Up:	Day of Week: Est. Daily: to	

APPLICANT INFORMATION:		
٨		
Y		
Address:		
A.	State:	Zin:
	Fax:	
Event Contact Name & Title:		
	_State:	
£	Fax:	
Email:		9
	than applicant): will you use? _	Yes No
Contact Name and Title:		3
Address:		
City:	State:	Zip:
Phone:	Fax:	
Email:		
Describe event location in detail including		
	noting entrances, exits, road closures, tent locati	
• VAC 1997 1997 1997 1997	nt? POLICE YesNo If yes,	
	hood Tourism Development Funds (NTDF) for Received funds Amount received	Ticking

Will there be music, a PA	system or amplified sound at your event?	voise Yes	N	0
Will there be dancing?	ance Hall Permit	Yes	N	0
Will there be livestock ani	mals, ponies, or a petting zoo at your event	? Yes	N	0
Will there be drones or oth	er airborne items present at your event?	Show Yes	N/A No	1-10
Will you provide public re	strooms?	Yes	No	3
Do you have a cleanup/tras Submit on company letterh	ead a detailed clean up/waste removal plan	Yes 30 days prior to	your event.	9
PROMOTIONAL EFFO	RTS:	t t		
Will there be media covera	ge of this event?	Yes	No	Trackin
Describe media coverage a	nd promotional efforts:			one
	FREE FORM			.97
PARKING/TRAFFIC	eet/lane/sidewalk/road closure or blockage?	a which wo	NS	
Will your event require stre	eet/lane/sidewalk/road closure or blockage?	Yes	No	
Are you closing a road and	re-routing traffic for this event? Police	Traffic Yes	No	
Does your event have speci	al parking considerations?	Yes	No	
Describe proposed parking	plan: (i.e., "10 th street garage", or "on stree	et parking", etc)_		
Free	Form			
POLICE AND SECURIT	<u>Y:</u>			
arrange an approved Police event. Additional police pre considerations. These guide Reserved seating (f Sporting events wit Reserved seating (f Reserved seating (a Open air events wit	C Police presence will need to contact the land security staffing plan for their event. In esence will be determined on a case-by-case elines are a starting point for determining apamily oriented) with no alcohol sales: (1) ph alcohol sales; (1) per 1,000-1,500 attended amily oriented) with alcohol sales; (1) per 500 dult events) with alcohol sales; (1) per 500-750 attendees lt entertainment events; (1) per 150-500	nitial core staffing e basis using the g propriate police s er 2,000-3,000 att ees 1,000-1,500 attend	g levels start a uidelines belotaffing levels tendees	at 1-3 officers per ow and other
Police and security staffin traffic officers, private sec	g levels are also determined by factors in urity presence, event location and type, a	cluding: crowd s and other securit	ize, alcohol s y concerns.	sales, presence of
Will your event have addition	onal private security services?		_Yes	No
If yes, provider:		# of Security	y Officers:	

FIRE AND EMS SERVICES:				
Will there be tents or canopies?	Yes	No		
Will there be any of the following present at your event?	Yes	No		
Fencing or enclosures Open flames, including fire and propane Portable heating devices, salamanders or burners Electrical services LPG compressed gas Hay storage Fireworks Amusement rides				
Name of company operating fireworks:				
Name of company operating amusement rides:				
Special Event EMS guidelines: The number of rescue units and paramedics is determined accormass gathering or event that has an anticipated sustained attendation complete a risk assessment of the event, regardless of other variable Kansas City Fire Department will contact the event organize results of the comprehensive risk assessment of the event. Based on the guidelines above, does your event require EMS me	ance of 1,000 or mables, size or scope and arrange appr	ore people, the K e of the event. Ba opriate medical c	C Fire Departments on this assessoverage as per t	ent wil ssment he
Onsite medical contact name:				
INSURANCE REQUIREMENTS:				/
A commercial general liability insurance policy may be required insured. Need for insurance is determined on a case-by-case bas	l listing the city of is and will be addr	Kansas City, Mis essed by individu	ssouri as the add al city departme	itional ents.
CERTIFICATION:				
I certify that the information submitted in connection with this a knowledge. I agree to adhere to the "General Requirements & C do so will render the outdoor event permit, if issued, void. The C any liability resulting from the conduct of this event. I acknowle contact the appropriate city departments and complete the requirements."	onditions" contain City of Kansas City dge that in addition	ed herein, and un , Missouri shall b n to this Applicat	derstand that fai be held harmless ion I certify that	from I will
I further certify that if this event is cancelled or rescheduled, or to of the event are cancelled or rescheduled, I will notify the Outdo advance of the set-up times for my event. Should personnel or ot event or activity that has been cancelled, the Sponsor/Host Organ	or Event Manager ther resources be d	in writing no less ispatched to supp	s than 48 hours i	n d
Signature of Applicant:	76 - 2.0 - 760			
Date:				
Print Name:				
Telephone: F	ax:			

Email: