MASS GATHERING APPLICATION

This application is for public gatherings of 100 or more people.

102 W. Savidge St., Spring Lake, MI 49456
(616) 842-1393, FAX (616) 847-1393 • angela@springlakevillage.org

It is recommended that this application process begin and reservations made 120 days prior to an event to allow for planning on the part of the applicant and sponsor, adequate review of application by the Village Event Coordinator, scheduling of appropriate review meetings with required officers and Village officials, and for the appeal process should this application be denied for any reason. Any application submitted less than 60 days prior to an event risks not being approved due to time constraints. All public land reservations are taken on a first come, first served basis.

Thank you for considering the Village of Spring Lake for your event. We look forward to working with you to ensure the success of your event with the public health, safety and welfare of your guests and our residents as well as the proper use of Village services and personnel in mind.

APPLICANT INFORMATION:

Name of event: ________________________________

Date(s) of event: ____________________________ Number of people expected to attend: ____________

Proposed location of event: ____________________________

Name of applicant: ________________________________________________________________________

Name of sponsoring organization: ____________________________________________________________

DATES:

**OFFICE USE ONLY**

Application provided to Permittee (with site maps) __________ Public land reservation made ____________

$150.00 Non-refundable fee received __________ Check # __________ (NOTE: Fees must be submitted as separate checks.)

$250.00 Refundable security deposit received __________ Check # __________ Refunded (if applicable) __________

Completed application (with site plan) submitted __________ Signed Hold Harmless submitted __________

Certificate of Insurance (No less than three days before event) __________ Liquor License (No less than three days before event) __________

Permit Approved: ☐ YES ☐ NO PERMIT # __________________________ If NO, Denial communicated __________

Authorized Village Signature ____________________________________________________________________ Date: __________

REQUIRED MEETINGS

Initial Review ____________________________ (Should not be scheduled less than 60 days in advance of event)

Final Review ____________________________ (Should be scheduled for 1 week in advance of event)

Post Review ____________________________ (Should be scheduled for two weeks after event)

APPLICATION REVIEWED AND APPROVED BY

SL DPW ____________________________ Date __________

OCSO ____________________________ Date __________

SL Fire ____________________________ Date __________

SL EMS ____________________________ Date __________
PERMIT APPLICATION AND CONDITIONS

CONTACT INFORMATION

APPLICANT

Name of Applicant: ____________________________________________

Address: _____________________________________________________

Cell Phone #: ______________________ Alternate Phone#: ________________

Email: _________________________________________________________

SPONSOR

Sponsoring Organization: _________________________________________

Contact Name (If different from applicant): __________________________

Address: ______________________________________________________

Phone #: ______________________ Email: __________________________

DAY OF EVENT

On-Sight Contact Name (if different from applicant): ________________

Cell Phone #: ______________________ ____________________________

Alternate On-Sight Contact Name: _________________________________

Cell Phone #: ______________________ ____________________________

Law Enforcement Non-Emergency Contact: _________________________

Cell Phone #: 800-249-0911

On-Call DPW Worker Name: ______________________________________

Cell Phone #: 616-844-2104

DPW Supervisor Name: __________________________________________

Cell Phone #: _________________________________________________

Village Event Coordinator: _______________________________________

Cell Phone #: _________________________________________________
EMERGENCY PLAN

Will there be an onsite **Medical Emergency/First Aid Stations** established?  
Yes  No
If “YES” what is the location?
If “NO” how will an emergency be handled?

Will there be an onsite **Fire Emergency Station** be established?  
Yes  No
If “YES” what is the location?
If “NO” call 911 and be certain you and your staff are aware of your location.

Will there be an onsite **Police Emergency Station** be established?  
Yes  No
If “YES” what is the location?
If “NO” call 911 and be certain you and your staff are aware of your location.

In case of **Severe Weather** who makes the call to cancel the event:
Name: 
Cell Phone #: 

Is there a Severe Weather Shelter Area?  
Yes  No
If “YES” what is the location?

In case of Severe Weather is there an Alternate Event Location?  
Yes  No
If “YES” what is the location?

GENERAL EVENT INFORMATION

Type of Event:

Describe in detail the activities planned:

(Use an additional sheet of paper if necessary)
SCHEDULE

<table>
<thead>
<tr>
<th>Day of Week</th>
<th>Date</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Setup:</td>
<td></td>
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<tr>
<td>Event Starts:</td>
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<td>Event Ends:</td>
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<td>Dismantle:</td>
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</tbody>
</table>

EVENT DETAILS

Please provide on a separate sheet of paper if necessary, a complete disclosure and description of the following:

1. Will alcohol be sold or provided?  
   If “YES” the applicant is responsible for obtaining a liquor license. A copy of the license must be provided to the Village no less than three (3) days prior to the event and fencing must be erected. See *Fencing* in the Village of Spring Lake Mass Gathering Ordinance (VSLMGO) No.0 of 2019.
   Description of any beverages to be provided or sold to public.

2. Will food or merchandise to be sold or provided?  
   If “YES” then see *Food Service* in the VSLMGO No.0 of 2019.
   Description of food or merchandise to be provided or sold to public.

3. Do you plan to have sound amplification?  
   If “YES” then see *Noise Control* in the VSLMGO No.0 of 2019.
   Provide description.
4. Are there restroom/facility requirements?  
Yes  No

If “YES” then see Restroom Facilities in the VSLMGO No.0 of 2019.

Describe facilities to be utilized. If portable facilities are being brought in, please indicate the number of units and vendor name.

__________________________________________________________

__________________________________________________________

__________________________________________________________

5. Are there waste/trash/recycling requirements?  
Yes  No

NOTE: The sponsoring agency is responsible for providing trash and garbage pickup and bag replacement and must make arrangements for their trash to be hauled away. The area must be restored to clean after this event.

Plan for gathering waste during the event and removing waste after the event.

__________________________________________________________

__________________________________________________________

__________________________________________________________

6. Is electrical power required?  
Yes  No

Describe power requirements and how power is to be provided.

__________________________________________________________

__________________________________________________________

__________________________________________________________

7. Will any type of tent(s) or structure be setup or installed? Provide map that shows placement and provide a description of tent(s) here. NOTE: Certain tents and structures require Fire Dept. approval ALL TENTS REQUIRE A TEMPORARY USE PERMIT.  
Yes  No

__________________________________________________________

__________________________________________________________

__________________________________________________________

8. Will site security be required for this event?  
Yes  No

Describe the location and plan for your security.

__________________________________________________________

__________________________________________________________

__________________________________________________________
9. Will this event require procedures to manage vehicle traffic, road closures, parking, and circulation expectations for pedestrians? (NOTE: Law enforcement is authorized to make modifications to vehicle and/or pedestrian barricades, traffic routes and street closures based on public health, safety and welfare.)

If “YES” then answer all the following applicable questions:

- Citizens are not authorized to stop road traffic. Will you need help from the Ottawa Co. Sheriff’s Office (OCSO) to manage traffic? **NOTE:** There is a cost affixed to officer involvement based on day and time.
  - Yes
  - No
  
  Provide details of anticipated locations, dates and times.

- Will your event require road closures?
  - Yes
  - No
  
  Provide details of anticipated locations and process (for event or unloading and loading).

- Will barricades be required?
  - Yes
  - No
  
  How many barricades will be needed?
  
  Provide details of anticipated procedures and process.

- Will “NO PARKING” areas be required?
  - Yes
  - No
  
  Provide details of anticipated locations and dates. *(NOTE if you plan to arrange for towing of vehicles signs must say NO PARKING in 2” tall letters and must be out no less than 48 hours before towing would begin. You must also include the name and number of the towing company.)*

- How do you plan to manage pedestrian traffic?

- Provide details of anticipated procedures and process.
SKETCH PLAN

Please provide detailed site plan of location and include the following details (if applicable).
Let the Village Event Coordinator know if you need either a digital or hard copy of a map of the area.

- Event area/land layout
- Staging areas for event (unloading, loading areas)
- Parking Areas (indicate ADA parking – this must be available)
- Designated NO PARKING areas (include sign requirements)
- Vehicle/Pedestrian/Runner circulation routes/travel lanes
- Street, sidewalk, and pathway closures or reroutes (include sign/barricade requirements)
- Primary entrance and exits
- Temporary fencing layout (this is required if liquor is served/sold)
- Layout of vendors, tents, events, PA or music source
- Food and water sources
- Restrooms
- Waste, trash, recycle disposal
- Electrical sources
- Main contact event coordinator’s primary location
- Emergency support locations – Police, Security, Fire, Medical, Communications

ADDITIONAL CONDITIONS & REQUIREMENTS

Certificate of Insurance: No permits will be issued without a current Insurance Certificate that names the Village as a co-insured party, turned into the Village no less than three (3) days prior to the event.

Security Deposit: Sponsoring agency is responsible for cleaning and restoring the site after the event. The site will be reviewed by the DPW at the earliest convenient time after the event and a report will be delivered to the Village Event Coordinator.

If the site is clean and restored the permittee’s security check will be returned at the Post Review meeting which will be scheduled approx. two weeks after the event.

If the site is not clean and restored the cost of restoration will be borne by the permittee. See 2.5 Requirement for Applicant’s Reimbursement to the Village (1) Cost Determination in the VSLMGO No. 0 of 2019.

Miss Dig: If ground stakes are used for tents and temporary structures, you may be required to contact MISS DIG no less than 1 week prior to event. Failure to do so could result in license being withdrawn and cancellation/postponement of event. 1-800-482-7171

Camping: Camping in or on public property, streets, parking areas and parks is prohibited. Fires in the park are only allowed in the approved grills. Camp fires in the park are not allowed.
AFFIDAVIT OF APPLICATION

As the applicant, I hereby agree to abide by the terms set forth in this application and the Ordinances of the Village of Spring Lake. I understand the failure to do so may lead to the cancellation of the event, or the denial of a future license. I certify that the information contained in the foregoing application is true and correct to the best of my knowledge and belief and I have read, understand, and agree to abide by the rules and regulations established by the Village Council and/or Village Manager.

_______ Yes, I agree to the above terms   _______ No, I do not agree to the above terms

I declare under penalty of perjury that the information provided in this application is correct.

Signature Applicant: __________________________________________ Date: ____________________

Additional Conditions of Approval: (attach conditions of approval)

HOLD HARMLESS AGREEMENT

This special event applicant or designees of the sponsoring organization(s) (hereafter called "licensee") agrees to reimburse the Village of Spring Lake (hereinafter called "Village") for all loss incurred by it in repairing or replacing damage to Village property proximately caused by the licensee, its officers, employee, agents, monitors, or any other persons attending or forming the special event who were, or should have been, under the licensee's control. Persons who merely attend or join in a special event are not considered by that reason alone to be "under the control" of the licensee.

The licensee further agrees to defend without costs, indemnify, and hold harmless the Village, its officers, agents, and employees from any liability to any persons, damages, losses, or injuries arising out of or alleged to arise out of the licensed event, which was proximately caused by the actions of the licensee, its officers, employees, agents, including monitors, or any other persons attending or joining in the event who were, or reasonably should have been under the control of the licensee. Persons who merely attend or join in an event are not considered by that reason alone to be "under the control" of the licensee.

I understand and agree to comply with all terms of the above Hold Harmless Agreement if my application has been approved and all special conditions and required advance payment have been met.

Signature of Applicant(s) __________________________________________ Date ____________________

Signature of Officer Sponsoring Organization

________________________________________________________ Date: ____________________

Title: __________________________________________________________