# Plumas County Event Planning Packet



#### Points to consider

- The date: Check to see what other events are taking place the day you have in mind. Too many events in the county on one day can often lead to low attendance for all events.
- Where to have it: If you plan to hold the event on government or private property, there's often a price-tag that comes with its use. Find out if you need to rent the use of the area.
- Insurance: Event liability insurance can be purchased from Flanigan Levitt. Contact Flanigan Levitt at 283-1112 for a quote.
- Promotion: Do you plan to promote this event through social media, hang posters up, put an ad in the newspaper?
- Porta-potties: Keep in mind that people will need to use the bathroom at the event. A good rule of thumb is to have one toilet for every 50 people. Porta-pottys can be rented through Plumas Sanitation out of Portola. The number is 832-0370. Also, keep plenty of garbage cans around.



## PLUMAS COUNTY PUBLIC HEALTH AGENCY ENVIRONMENTAL HEALTH DIVISION

270 County Hospital Road, Ste 127, Quincy, CA 95971 Tel (530) 283-6355 Fax (530) 283-6241

#### **COMMUNITY EVENT**

**Application for Permit** 

A Community Event Coordinator Permit fee applies to events lasting two(2) or more days, or events that include three (3) or more permitted temporary food facilities. Fee: \$73.00

	EVENT IN	FORMATION	
Name of Event:			
Location of Event:			
Dates of Event:			
Name of Event Coordinate	cor:		
Coordinator Daytime Tel	ephone No: ()		
Email Address:			
Health 30 days prior to the A Site I	ne first day of the event. Support Plan of the Event Area and Fac	porting documentation must be subsporting documentation must include to cilities, showing the location of each the event. (Use Space on the reverse	ne following: n vendor.
	BUSINESS	INFORMATION	
Sponsor of Event:		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Mailing Address:			
City, State, Zip:			
	ATION FOR A PERMIT FOR THE ID LOCAL ORDINANCES AND R	COMMUNITY EVENT ABOVE IN AC REGULATIONS.	CORDANCE WITH THE
Date:	Signed:		nan garaga anisa ng malangga na kada magana ani
	FOR OFF	FICE USE ONLY	
Rec'd By: Dat	te Received:	Site Plan Review By:	
Date Reviewed:	Approved By:		

### TEMPORARY/MOBILE FOOD FACILITIES ATTENDING THIS EVENT

FACILITY NAME	CONTACT PERSON	PHONE NUMBER/EMAIL
ų .		
		>
		7.2

#### **Recreation Events on the Plumas National Forest**

A Recreation Event is an organized event of a temporary nature, such as animal, vehicle, or boat races; fishing contests; rodeos; adventure games; and fairs. If you are interested in learning more about submitting a proposal for a recreation event, please contact your local ranger district office (Feather River Ranger District 530-534-6500, Mt Hough Ranger District 530-283-0555 or the Beckwourth Ranger District 530-836-2575).

The Plumas National Forest is requesting that Recreation Event proposals be submitted no later than **180 days in advance of the proposed event,** in order to facilitate the processing of the application and permit. There are fees and insurance requirements associated with this type of permit.

ISSUANCE DATE

#### **DAILY LICENSE APPLICATION/AUTHORIZATION - Non Transferable** LICENSE NUMBER GEO CODE Instructions: Complete all items. Submit to local ABC District Office with required fee (Cashier's Check or Money Order) payable to ABC. Once license is issued, fee cannot be refunded. For a listing of ABC District RECEIPT NUMBER Offices please visit http://www.abc.ca.gov/distmap.html Pursuant to the authority granted by the organization named below, the undersigned hereby applies for the license(s) described below. FEE \$ DIAGRAM REQUIRED CONDITIONS REQUIRED 1. ORGANIZATION'S NAME No No Yes Yes 2. LICENSE TYPE (Check appropriate license type AND organization type) (Includes beer, wine and distilled spirits) Daily General (\$25.00) Fraternal Organization in Existence Over Five Years Political Party/Affiliate Supporting Candidate for with Regular Membership Public Office or Ballot Measure Religious Organization Organization Formed for Specific Charitable or Civic Purpose Vessel per Section 24045.10 B&P (\$50.00) Other: NUMBER OF DISPENSING POINTS Special Daily Wine (\$25.00) Special Daily Beer & Wine (\$50.00) Special Daily Beer (\$25.00) Political Other: Social Charitable Fraternal NUMBER OF DISPENSING POINTS Amateur Sports Organization Cultural Civic Religious (Different privileges depending on statute) Special Temporary License (\$100.00) Person conducting Estate Wine Sale per Section 24045.8 B&P Television Station per Section 24045.2 or 24045.9 B&P Women's Educational and Charitable Organization per Nonprofit Corporation per Sections 24045.4 and 24045.6 B&P Section 24045.3 B&P Other Special Temporary Licenses, per Section Amount \$ License number 3. EVENT TYPE Social Gathering Festival Barbeque Picnic Wedding Lunch Dance Dinner Carnival Dinner Dance Other: Mixer Birthday Sports Event Concert 6. HOURS OF ALCOHOLIC BEVERAGE SALES, SERVICE AND/OR CONSUMPTION 5. ESTIMATED ATTENDANCE 4. TOTAL # OF DAYS To From 8. EVENT IS OPEN TO THE PUBLIC 7. EVENT DATE(S) No Yes 9. EVENT LOCATION (Give facility name, if any, street number and name, and city) 12. SECURITY GUARDS 10. LOCATION IS WITHIN THE CITY LIMITS 11. TYPE OF ENTERTAINMENT No If yes, how many? Yes Yes No 14. REPRESENTATIVE'S TELEPHONE NUMBER 13. AUTHORIZED REPRESENTATIVE'S NAME 15. REPRESENTATIVE'S ADDRESS 16. ORGANIZATION'S MAILING ADDRESS (If different from #15 above) 18. DATE SIGNED 17. AUTHORIZED REPRESENTATIVE'S SIGNATURE DATE SIGNED PROPERTY OWNER SIGNATURE PROPERTY OWNER APPROVAL BY (Name), REQUIRED PHONE NUMBER LAW ENFORCEMENT SIGNATURE DATE SIGNED PHONE NUMBER LAW ENFORCEMENT APPROVAL BY (Name), IF APPLICABLE

The above-named organization is hereby licensed, pursuant to the California Business and Professions Code Division 9 and California Code of Regulations, to engage in the temporary sale of alcoholic beverages for consumption at the above named location for the period authorized above. This license does not include off-sale ("to-go") privileges.

ABC EMPLOYEE SIGNATURE

This license may be revoked summarily by the Department if, in the opinion of the Department and/or the local law enforcement agency, it is necessary to protect the safety, welfare, health, peace and morals of the people of the State.

**DISTRICT OFFICE APPROVAL BY (Name)** 

Under P.C.C., Section 4-3.302. ENCROACHMENT PERMITS			ISSUE
Plumas County [	Department of Public Works	\$	FINAL
1834 E. Main Street	Quincy, CA 95971		
Telephone (530) 28	3-6268 Fax (530) 283-6323		
Owner:			
Mailing Address:			
Telephone: ( )_		Fax: (	)
Contractor:			
Mailing Address: _			
		For. (	
Telephone: ( )_		_ rax. (	)
Sita Address:			<b>APN</b> :
Site Addi ess.			122 1 1 1
Construction/ Ever	nt Dates: Start:		Finish:
			_
Description of W	ork or Event:		
		,	

An **ENCROACHMENT PERMIT** is hereby granted to the undersigned **PERMITTEE** for the placement of a encroachment within a County highway as described above providing the following conditions are satisfied:

- 1. **PERMITTEE** agrees to move or remove this improvement at their expense if required by future improvements within the county right-of-way, and to provide all future maintenance for any and all improvements constructed under this Permit. **PERMITTEE** guarantees all work accomplished under this Permit for a period of one year from the date of final inspection.
- 2. **PERMITTEE** agrees to provide construction signs and flaggers, barricades and flashers as required, and to notify the Department of Public Works for inspection of same **prior** to beginning of construction. No lanes will be closed or detours established without the consent of the Department of Public Works.
- 3. Utility trenches shall be constructed to Plumas County Standard Plans. No open trenches will be allowed after sunset or over weekends or holidays. Temporary steel plates may be allowed with approved ramps, signage and flashing lights/barricades.
- 4. Utility poles shall be placed a minimum of 10' from the edge of pavement, unless an exception is granted. All pole and anchor locations shall be field-reviewed by Plumas County **prior** to construction.
- 5. **PERMITTEE** shall notify the Department of Public Works no less than 24 hours prior to beginning work if starting date is different than shown above. Call your district foreman (see attachment) no less than 24 hours in advance for inspection. If no answer, call **(530)** 283-6268 or stop by Public Works at 1834 East Main Street in Quincy.

- 6. Permit applications for public events, races or tours shall be accompanied by letters of notification from both the Plumas County Sheriff's Office and the California Highway Patrol (obtained by **PERMITTEE**). No traffic control or lane closures will be permitted without prior approval. A Certificate of Insurance for not less than \$1 million dollars, naming Plumas County as co-insured shall also accompany the application, along with a map showing the route or location of the public event, race or tour. No objects or liquids may be thrown or discharged onto or from the County right-of-way during a permitted public event.
- 7. <u>LIABILITIES FOR DAMAGES:</u> The *PERMITTEE* is responsible for all liability for personal injury or property damage which may occur through work herein permitted, and in the event any claim is made against the County of Plumas or any department, officer or employee thereof, through, by reason of, or in connection with such work or activity, *PERMITTEE* shall defend, indemnify and hold them and each of them harmless from such claim.
- 8. Unless a determination is made for a "no-fee" permit (i.e. public utility-sponsored projects or public events), **PERMITTEE** agrees to pay a fee for administration and inspection of this Permit, and provide a Performance Bond (if required), which will be fully refunded upon satisfactory completion of the work. The **PERMITTEE** understands and agrees that, if the work is not completed to the satisfaction of the County, the Performance Bond shall be forfeited and the Permit shall be voided. Any unsatisfactory work within County right-of-way may be removed at the County's discretion and the charges therefor billed to the **PERMITTEE**. Administrative fees are not refundable, even if no work takes place. The **PERMITTEE** also understands and agrees that, should additional inspections be necessary due to noncompliance with the terms of this Permit or because of variance from Plumas County Standards or contract plans, the **PERMITTEE** shall be billed for such additional inspection time at the County inspector's reimbursable rate, including travel time. Permits that expire prior to the completion of work may be extended for additional 1 year period(s) by written request. Extensions will not be given beyond 5 years of the first date of expiration of the permit. **Bonds may be returned, but fees for permits that expire or are cancelled shall be forfeited to the County of Plumas**.

9. Fee: \$	Performance Bond: \$	Hourly Inspection Rate: \$
Bond Refund to:		
10. CALL BEFORE YOU D call USA North at 1 (800) 22	IG! You must mark out your work a 7-2600 at least 48 hours prior to beg	rea in white paint and include the letters "USA", and inning any excavation.
11. This Permit shall become	null and void after	. This Permit extended to:
clean-up and stor required in connec	OTE: PERMITTEE is responsed meter & erosion control that notion with the work done under the control of any purpose unless and under the control of any purpose unless and under the control of the above of of	nay be this permit.  It is permit.
The <b>PERMITTEE</b> has read the requirements of this Perm	and understands PERMIT APPRoit.	OVAL BOND RELEASE
Name (Please print)	By:	By:

Title:

Signature

Title:

Date:

Graea LaPoi Quinc Green	yourth (Sierra Valley, D gle (Mohawk Valley, Jo te (Little Grass Valley) y (American Valley, Can wille (Indian Valley) er (Lake Almanor)	hnsville)	832-5 836-0 283-6 284-7 258-2	382 675-2781 5268 7921
	(Sketo	ch/Attach Plans)		
INSPECTIONS Type Preliminary Safety Final Inspection Not	Date Inspector	What we're looking Does the proposed encro provided in the applicate Are required flaggers, si Does the encroachment Standard Details? Is cle	oachment match the cion? igns and barricades in comply with the description.	place?

### RELEASE AND WAIVER OF LIABILITY for VENDORS

This Release and Waiver of Liability is executed, by the Vendor in favor of
and its directors, officers, employees, volunteers, and agents.
I, the Vendor, hereby freely and voluntarily, without duress, execute this Release under the following terms:
Waiver and Release. I hereby release and forever discharge and hold harmless
and its successors and assigns from any and all liability, claims, demands, and causes of action, of whatever kind of nature,
either in law or equity, which may bereafter arise from my participation with
either in law or equity, which may hereafter arise from my participation with and/or any project, activity, or event sponsored, managed, arranged, or promoted by, or otherwise affiliated or associated with
. I understand and acknowledge that this Release discharges
from any liability or claim that I may have against it, with respect to any bodily or
other injury, illness, death, or property damage that may result from my participation. I also understand that
other injury, liliness, death, or property damage that may result from my participation. Talso direction that
goes not assume any responsibility incurrence in the event of injury illness death or
other assistance, including, but not limited to, medical, health, or disability insurance, in the event of injury, illness, death, or
property damage.
the many and the state of the s
2. Insurance. I understand that may elect to provide group accident or other liability insurance. Any coverage so provided will be governed by the policy language. Except to the extent that it may provide such
insurance. Any coverage so provided will be governed by the policy language. Except to the extent that it may provide such
insurance, does not carry or maintain any health, medical, disability, damage, or
insurance. Any coverage so provided with be governed by the perior insurance, does not carry or maintain any health, medical, disability, damage, or other liability insurance coverage for the benefit of its vendors, and expressly disclaims any responsibility or obligation to do
AC A C A VENDOD LAM EXPECTED AND ENCOURAGED BY T
MEDICAL, HEALTH, AND ALL OTHER APPLICABLE INSURANCE COVERAGE FOR MY OWN BENEFIT.
WEDIOTIE, HEALTH, TWO TIES ON THE STATE OF T
3. Medical Treatment, Except as otherwise agreed to by in writing, I hereby release
3. Medical T reatment. Except as otherwise agreed to by and forever discharge from any and all liability claims, demands, and causes of
and forever discharge from any and all liability claims, demands, and causes of action whatsoever that may arise on account of any first aid or other medical treatment rendered during my participation with
action whatsoever that may arise on account of any first and of other medical relative testing my paragraph or promoted by
action whatsoever that may arise on account or any mote discount or any project, activity, or event sponsored, managed, arranged, or promoted by,
or otherwise affiliated or associated with
and/or any project
4. Assumption of Risk. I understand that my participation with and/or any project,
activity, or event sponsored, managed, arranged, or promoted by, or otherwise affiliated or associated with
may include activities that may be hazardous to me. I further recognize and
understand that such participation may involve certain inherently dangerous activities. I hereby expressly and specifically
assume the risk of injury or harm in the activities and releasee from all liability for
injury, illness, death, and/or property damage that may result.
, , , , , , , , , , , , , , , , , , ,
5. Photography/Audio Release. I do hereby grant and convey unto rights, titles,
and interest in and to any and all photographic images and video or audio recordings made by or on behalf of
, or made with its consent, limited to, any royalties, proceeds, or other benefits derive
from such photographs or recordings.
If a thirty Delegant is intended to be as broad and inclusive as parmitted by law
6. Other. I expressly understand and agree that this Release is intended to be as broad and inclusive as permitted by law,
and that this Release shall be governed by and interpreted in accordance with the laws of this state, county, city and/or
township. I agree that in the event that any clause or provision of this Release shall be held to be invalid by any court of
competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this
Release.
By signing below, I acknowledge that I have read and understand this Release, and agree to its provisions.
D.I.
Signature of participant/ vendor Date

## Participant Accident Waiver and Release of Liability

I acknowledge that participating in	
carries with it the potential for serious i limited to, those caused by facilities, fo	injury and/or death. The risks include, but are not ood, equipment, actions of other people including, ers, spectators, event officials, and event monitors
that liability may arise from negligence entities being released, from dangerous maintained or controlled by them or becertify that a qualified medical person betwent. I acknowledge that this accident the event holder, sponsors, and organiz will govern my actions and responsibility application and permitting me to particularly executors, administrators, heirs, next I hereby consent to receive medical treat event of injury, accident and/or illness of I understand that at this event or relate allow my photo, video or film likeness holders, producers, sponsors, organized This Accident Waiver and Release of L	ed activities that I may be photographed. I agree to to be used for any legitimate purpose by the even ers and/or assigns.  Liability shall be construed broadly to provide a cent possible under applicable law. I hereby certify
Signature of Entrant:	Date:
Signature of Entrant:	<u> </u>
Print Name Here:	

## Letters to the county

When planning an event, it's often necessary and always recommended to send letters to various county departments, letting them know of the time and place of the event along with a brief description.

It's recommended to send letters to the Board of Supervisors, the California Highway Patrol, the Plumas County Sheriffs Office and Public Works.

Following are sample letters demonstrating what a simple letter to a department can look like. The request for an encroachment permit can be sent with the letter to Public Works.

Plumas County Board of Supervisors 520 Main St. Quincy, Ca 95971

Honorable Plumas County Supervisors,

I am requesting your permission for the \_\_\_\_\_event set to take place on (date) at (time) at (location). I hope the event will be a highlight of the county, as it will include members of the community.

(Any necessary details of the event, including route if it's

a parade or race. Also include a map).

Please contact me if you have any questions or need additional information.

Respectfully,

(name)

Date

County Department Address City

Dear department,

This letter is to inform your office that \_\_\_\_\_ will take place on (date) at (duration) in (location).

(Any necessary details of the event, including route if it's

a parade or race. Also include a map).

I respectfully request that you provide a letter stating that you have been notified. Please contact me if you have any questions or need additional information.

Respectfully,

(name)