



City of Norfolk Large Event Permit Application (200+ Expected Attendance)



LARGE EVENT PERMIT APPLICATION

201 E. Brambleton Avenue • Norfolk, VA 23510 • (757) 664-6880 main

www.norfolk.gov/sevenvenues

For Office Use Only

Date Received: _____

Permit #: _____

Application Fee Paid: _____

☐ YES

☐ NO

Incomplete applications will not be processed. Indicate N/A if a question or section does not apply to your event. Information in this form will be used to determine fees and eligibility for the permit requested.

Event Information

EVENT NAME: _____

EVENT DESCRIPTION: _____

EVENT DATE(S)

SETUP TIME

START TIME

END TIME

BREAKDOWN TIME

Rain Date(s) / Time(s): _____

REQUESTED EVENT LOCATION:

Please list specific parks, streets and sidewalks. Check all that apply.

Each category of property is subject to different rules. It is the applicant's responsibility to check the regulations governing the use of specific property.

Festival Park (OVBP/TPP) _____

Streets / Sidewalks _____

Other _____

TYPE OF EVENT:

Please check all that apply.

☐ Parade

☐ Church Event

☐ Bike Race

☐ Auto Procession

☐ Fundraiser

☐ Run / Walk

☐ Carnival

☐ Community / Cultural Event

☐ Charity Event

☐ Festival

☐ Water Activities / Boats

☐ Concert

☐ Neighborhood Reunion

☐ Other: _____

EXPECTED DAILY ATTENDANCE:

Please include participants and spectators in this total.

☐ 0 - 199

☐ 200 - 499

☐ 500 - 999

☐ 1,000 - 2,499

☐ 2,500 - 4,999

☐ 5,000 - 9,999

☐ 10,000 - 24,999

☐ 25,000 +

EVENT REOCCURENCE:

Please also indicate if this is an annual event.

☐ 1st Time

☐ 2 - 4 Times

☐ 5 - 10 Times

☐ + 10 Times

☐ Annual Event

If held previously, please list location(s): _____

EVENT ADMISSION/ENTRY FEE:

Please check all that apply. Include entry fee for runs, walks & bike race events.

☐ Free

☐ Open to the Public

☐ Private Event

☐ Participation Fee \$ _____

☐ Ticketed / Gated \$ _____

☐ Suggested Donation \$ _____

Applicant Information

Applicant must be the contact person or event organizer for the event submitted.

Applicant's Name: _____

Date of Submission: _____

Organization: _____

Position / Title with Organization: _____

Street Address: _____

City: _____

State: _____

Zip Code: _____

Phone: _____

Alternate Phone: _____

Email: _____

Fax: _____



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Do you represent a non-profit organization with 501 (c) (3) status?

☐ YES
☐ NO

If yes, please attach a copy of the 501 (c) (3) certificate to this application.

501(c) (3) Identification Number: _____

Insurance Carrier: _____

Contact Name: _____

Phone Number: _____

Event Marketing & Communication Plan

Event Website: _____

Social Media Sites: _____

Do you grant permission to the City to take and/or use event photographs for promotional purposes? ☐ YES ☐ NO

Civic League Notification Plan: Please describe plan to notify impacted Civic Leagues of the event. Notification to impacted Civic Leagues is required for all events within 30 calendar days of application approval.

Street Closure Notification Plan: Check all that apply. Required for all businesses/residents surrounding the street/lane closure.

☐ N/A

☐ Mailer

Distribution Date: _____

☐ Flier

Distribution Date: _____

☐ Door Hanger

Distribution Date: _____

☐ Email

Distribution Date: _____

☐ Other: _____

Distribution Date: _____

Advertising Plan: Check all that apply.

☐ Radio

☐ Print

☐ TV

☐ Social Media

☐ Other: _____

Live Media Coverage & Vehicles: Briefly describe plans for on-site media coverage and media vehicle parking.

☐ N/A

of vehicles: _____

Requested Parking Location: _____

Parking *If private parking lots will be used, a proof of permissions must be provided.*

Event attendees and participants will park:

☐ City Lots / Garages

☐ On Street Public Parking

☐ School Parking Lots

☐ Private / Church Parking Lot: _____

☐ Satellite Parking Lot: _____

Special Parking: Please describe any special parking needs for VIPs, RVs, trucks, trailers, etc.

Waste Disposal, Sanitation & Recycling

The City will provide trash cans upon request (event organizer is responsible for providing trash can liners). Event organizer is responsible for removing event waste from the premises immediately following the event or for placing all waste in a rented dumpster.

How many City trash cans do you require? _____

Do you plan to rent a dumpster? _____

Rental Provider: _____

Contact & Phone Number: _____

If no dumpster will be rented, where will trash be taken? _____

Grey Water / Grease: Please describe plan to dispose of grey water and grease from food vendors.

Clean-up Plan: Please describe plan for clean-up and waste removal following the event.

Do you plan to recycle at your event?

☐ YES ☐ NO

If yes, please contact Keep Norfolk Beautiful for information on the City's Special Events Recycling Program.



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Event Setup

Applicant must provide an EVENT MAP with the application to include tent, bleacher, stage, ride/amusement, restroom and dumpster placement.

TENTS A permit is required from the Department of Planning Office of Building Safety for tents larger than 900 square feet.

☐ N/A

Commercial Tents: ☐ YES ☐ NO

Total Number of Tents: _____

Tent Provider: _____

Contact & Phone Number: _____

Number of Cooking Tents: _____

Number of Other Tents: _____

Pop-Up / EZ-UP Tents: ☐ YES ☐ NO

Number of Tents: _____

BLEACHERS

☐ N/A

Size: _____ Number of Bleachers: _____

Provider: _____ Contact & Phone Number: _____

STAGING

☐ N/A

Size: _____ Number of Stages: _____

Provider: _____ Contact & Phone Number: _____

INFLATABLE & MECHANICAL RIDES & AMUSEMENTS

A certificate of insurance naming the City of Norfolk as additional insured is required from the provider of rides and amusements.
A permit is required for mechanical rides from the Department of Planning Office of Building Safety.

☐ N/A

Inflatable: ☐ YES ☐ NO

Number of Inflatable Rides: _____

Provider: _____

Contact & Phone Number: _____

Mechanical: ☐ YES ☐ NO

Number of Mechanical Rides: _____

Provider: _____

Contact & Phone Number: _____

AUDIO & LIGHTS

☐ N/A

Live Music: ☐ YES ☐ NO

DJ / Radio / IPOD / CD Music: ☐ YES ☐ NO

Audio Provider: _____

Contact & Phone Number: _____

Light Provider: _____

Contact & Phone Number: _____

POWER Please describe your plan to provide power for the event. Access to power is not available at most locations.

☐ N/A

Will you be providing a generator? ☐ YES ☐ NO If yes, provide location: _____

ENTERTAINMENT Check all that apply.

☐ Live Music / DJ / Band ☐ Live Animals / Petting Zoo ☐ Dance/Stage Performances ☐ Speeches/Presentations

Emergency Medical Services

Norfolk Fire-Rescue will review the event medical plan. The requirement of EMS presence will be based upon several factors, which are to be determined by Fire-Rescue Management. Fire-Rescue may be hired or a private provider may be used to fulfill requirement.

Do you plan to have EMS on-site at the event? ☐ YES ☐ NO

If yes, services will be provided by: ☐ Fire-Rescue ☐ Private Provider: _____

Medical Plan: Please describe your medical plan for the event. If necessary, please attach to the application.



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Vendors: Food, Beverage & Merchandise

IMPORTANT: Please review the vendor information on Permit Guidelines Page 3 for vendor requirements and process.

☐ N/A

Number of **FOOD** vendors: _____ Number of **BEVERAGE** vendors: _____ Number of **MERCHANDISE** vendors: _____

Food / Beverage will be:
Please check all that apply.
☐ Given Away (Free) ☐ Sold ☐ Sampled ☐ Other: _____
☐ Cooked On-Site ☐ Cooked Off-Site ☐ Prepackaged ☐ Other: _____

Merchandise will be:
Please check all that apply.
☐ Given Away ☐ Sold ☐ Other: _____

Food Service Dates	Setup Time	Service Time	Breakdown Time

What time will food vendor setups be ready for inspection? _____

Will gas or propane grills be utilized in food service? _____

Vendors: Sponsors, Informational and Arts & Crafts

IMPORTANT: Please review the vendor information on Permit Guidelines Page 3 for vendor requirements and process.

☐ N/A

Number of **SPONSORS**: _____ Number of **INFORMATIONAL**: _____ Number of **ARTS & CRAFTS** vendors: _____

Vendors: Alcohol

IMPORTANT: Please review the vendor information on Permit Guidelines Page 3 for ABC License information.

☐ N/A

Number of **BEER** vendors: _____ Number of **WINE** vendors: _____ Number of **LIQUOR** vendors: _____

Alcohol will include:
Please check all that apply.
☐ Draft Beer ☐ Bottled Beer ☐ Canned Beer ☐ Wine ☐ Liquor

Alcohol will be:
Please check all that apply.
☐ Served or Sampled (Free) ☐ Sold

Alcohol Service Dates	Setup Time	Service Time	Breakdown Time

Security

The Norfolk Police Department will review the event security plan and determine the number of Officers, Sheriff's Deputies or private security required for the event. Private security must have DCJS certification. Norfolk Police Department has final authority for security requirements.

Who will provide uniformed security presence at the event? ☐ Off-Duty NPD Officers ☐ Sheriff's Deputies ☐ Private Provider

Planned Number of Off-Duty Officers / Sheriff's Deputies: _____

Contact: _____ Phone Number: _____

If private security, please give the name of the company: _____ # of Guards: _____

Contact: _____ Phone Number: _____

Please list any equipment that will be left overnight at the event location: _____

Security Plan: Please describe your security plan for the event. If necessary, please attach to the application.



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Street / Lane / Sidewalk Closure

Please complete this section if your event involves a street, lane or sidewalk closure.

☐ N/A

1. A permit will not be issued unless application is accompanied by a map and approved traffic control plan for proposed closure.
2. The traffic control plan must show work zone, all traffic control devices, street, lane or sidewalk to be closed, closest cross street and north arrow. All plans must comply with the latest version of the Virginia Work Area Protection Manual and the Manual for Uniform Traffic Control Devices

Closure Starting Date: _____ Closure Starting Time: _____
Closure Ending Date: _____ Closure Ending Time: _____

RUN / WALK / BIKE RACE / PARADE

☐ N/A

Name & Address of Start/Staging Location: _____

Name & Address of Finish/Disbanding Location: _____

Route Description: Please provide a written description of the proposed route, including street names, lane designation, number of lanes, direction, etc. A map of the route is required as an attachment to this application.

Volunteers / Course Marshals NPD will determine the required number of officers for the closure and traffic control. Applicant may be asked to provide volunteer support to serve as Course Marshals.

How many volunteers do you plan to provide? _____

Parade Units

☐ N/A

Total # of Units: _____ Total Time (Step-off to Finish): _____
of Floats: _____ # of Motorized Vehicles: _____ # of Marching Bands: _____ # of Walking Units: _____
of Equestrian Units: _____ # of Other Animal Units: _____ Other: _____

BLOCK PARTY / STREET FESTIVAL / OTHER CLOSURE

☐ N/A

Closure: Provide a written description of the proposed street, lane or sidewalk closure and include street names, number of lanes, etc.

ALL CLOSURES

Parking Removal

Please indicate if the closure requires removing or restricting on-street parking or using metered parking spaces.

☐ N/A

Traffic Control Plan

Please attach traffic control plan and map to the application.

Who will be providing street closure equipment?

If a private provider will be used, please list the name of the company: _____

Contact: _____ Phone Number: _____



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Portable Restrooms

Event organizer is required to provide portable restrooms if sufficient public facilities are not available. It is recommended that a minimum of (1) portable restroom is provided per 150 people during peak event hours. 10% should be ADA accessible.

☐ N/A

Do you plan to provide portable restrooms? ☐ YES ☐ NO If yes, how many? Standard: _____ ADA: _____

Rental Provider: _____ Contact & Phone Number: _____
Delivery Date/Time: _____ Pickup Date/Time: _____

Event Permit Agreement

Applicant agrees to abide by the following regulations:

1. All pre-event determined fees shall be paid at least 10 business days (2 weeks) prior to the event. Any costs determined after the event need to be settled immediately upon receipt of the invoice.
2. Proof of insurance will be provided 30 calendar days (1 month) prior to the event. The applicant(s) shall at their own cost and expense furnish a policy or policies for property damage or bodily injury in the amount specified by the City's Risk Management Division. Also, the City of Norfolk MUST be named as additional insured. It is the applicant's responsibility to obtain the required certificate of insurance when it is required from a third party vendor.
3. Applicant will have developed a comprehensive security plan in conjunction with the Norfolk Police Department. An emergency medical services plan will be submitted to Fire-Rescue Management for review and approval.
4. Premises will be left in as good a condition as received with reasonable wear and tear expected. All trash will be disposed of properly. Applicant accepts responsibility for any damages which might occur during the period of use. City property shall not be removed from the premises.
5. Applicant will comply with all laws, rules and regulations of the federal, state and city governments governing operations and conduct on City property.
6. The noise level will not exceed the maximum permissible level of 110dB, in accordance with Chapter 26 Norfolk City Code.
7. Premises will be available to all citizens without discrimination.
8. All events are required to comply with all City, State and Federal Disability Requirements. The event must have reasonable modifications to the programs, services and activities of your event to insure accessibility to all individuals with disabilities.
9. This agreement may be terminated by SevenVenues at any time upon finding violation of any rule, ordinance or condition of the permit or upon good cause shown.
10. For applicant and any other persons, organizations, firms, and corporations sponsoring the event which is the subject of this permit application, jointly and severally, hereby contract and agree to pay all costs of services provided by the City of Norfolk, in support of said event.
11. The Permittee, its agents, employees, officers and assignees assume all responsibility and liability for any injury to persons or damage to public or private property caused, directly or indirectly, by the permitted event. Furthermore, the Permittee, its agents, employees, officers and assignees agree to save and hold harmless the City of Norfolk, its agents, employees and officers from any and all claims, demands, actions, judgments, executions, damages or proceeding for any and all personal actions, judgments, executions, damages or proceedings from any and all personal injury, and injuries to property, real or personal, public or private caused by or arising out of directly or indirectly, in connection with said event.
12. Any misrepresentation or deviation from the final permit conditions will result in immediate revocation of the permit, halting of the event, and probationary use of city property in the future.
13. Cancellation of a permit or permit application must be submitted in writing. Permit fees and application fees are non-refundable if the event is cancelled due to any circumstance, including inclement weather. Failure to use the dates approved on the permit are grounds for cancellation of your permit and may result in possible restrictions future permits.

ALL FINANCIAL OBLIGATIONS AND TAXES DUE TO THE CITY RELATED TO PRIOR EVENTS MUST BE PAID IN FULL IN ORDER FOR AN APPLICATION TO BE APPROVED FOR A SUBSEQUENT EVENT. APPLICATIONS RECEIVED FOR WHICH THE APPLICANT / ORGANIZATION HAS OUTSTANDING FINANCIAL OBLIGATIONS OWED TO THE CITY WILL NOT BE PROCESSED UNTIL THE BALANCE IS PAID IN FULL.

By signing below the applicant certifies that the above information is accurate. The applicant also acknowledges receipt, review and understanding of the Event Permit Guidelines and Schedule of Fees.

Signature: _____

Date: _____

Print Name: _____