

CITY OF KALISPELL
PARADE/SPECIAL EVENT PERMIT APPLICATION
(Please read and follow the instructions to insure the best service)

A Parade/Special Event Permit is required for applicants seeking to make use of city property and public right-of-ways. Parades/Special Events may include but are not limited to such activities as arts festivals, fairs, tours, concerts, holiday celebrations, business promotional events, car washes, bicycle races, runs, parades, marches and processions, motorcades, assemblies, etc. that occur in whole or in part on City owned or maintained property, such as streets, sidewalks, boulevards and parks.

1. Complete and return the application to the City Attorney's Office with a certificate of insurance. The liability insurance must be in the amount of a minimum of \$750,000 for each claim and \$1.5 million for each occurrence. The certificate must name the City of Kalispell as certificate holder or as an additional named insured.
2. The City Attorney's Office will distribute the application to the Parks Department, Public Works Department, Fire Department, and Police Department for review.
3. Following review by the City Attorney's Office, Parks Department, Public Works Department, Fire Department, and Police Department, the applicant will be contacted with either an approval or for a meeting to determine if the plan submitted may be changed to meet any liability or use concerns of the City. The following fees may be charged depending on the services required by the event. The applicant must provide the appropriate fee(s) to the City Attorney's Office before the final, signed permit is issued.
 - Parade/Special Event Fee \$100.00 (includes Traffic Control Plan Review Fee)
 - Traffic Control Plan Review \$ 50.00 per event
 Fee
 - Solid Waste Fee \$100.00 per hour
 - Refundable Damage Deposit \$200.00 (Traffic Control Devices/Barricades)
4. A traffic control plan shall be submitted as a part of this application and approved by Public Works.
5. Barricades, signs, and delineation equipment must be installed and removed per the approved traffic control plan.
6. The City of Kalispell has the right to change the event route if it is deemed necessary for safety purposes or in order to maintain a smooth vehicular flow of traffic.
7. If traffic control devices are requested or required, it will be the responsibility of the event sponsor to place and remove all the traffic control devices. A refundable damage deposit of \$200 is required at the time of approval and will be refunded when the devices are returned undamaged. **Please note:** Applicant will be held responsible for the replacement cost of any and all damaged or unreturned city equipment used for the event. The \$200 damage deposit will be used towards this cost.
8. Adult cross guards must be provided at each intersection. Use of safety vests is required.
9. Volunteers must be provided to monitor barricades in all areas not requiring traffic control personnel.
10. If the proposed event includes the sale and consumption of alcohol, a separate city Alcohol Permit application must be completed and submitted with this application. The City Manager must approve all requests for alcohol at proposed events.

Please complete the attached form, attach additional information, and click submit form - or return to:

SUBMIT FORM

City Attorney's Office, ATTN: Judi Funk, City Hall, 201 First Avenue East, (PO Box 1997, 59903) Kalispell, MT 59901 (406) 758-7977 Fax: (406) 758-7758 jfunk@kalispell.com

Date Application Received: _____

Date Issued: _____

**CITY OF KALISPELL
PARADE/SPECIAL EVENT PERMIT APPLICATION**

Application must be filled in completely. Requests for a Parade/Special Event Permit must be received with enough time for multiple department approval (preferably 3 weeks prior to the requested activity). **YOU MUST ATTACH A DETAILED MAP OF THE EVENT AND A TRAFFIC CONTROL PLAN.**

Name of Event: _____

Event Date(s): _____ **Start Time:** _____ **End Time:** _____

Group Name Sponsoring Event: _____

Organization Officer/Authorized Representative: _____

Daytime Phone #: _____ **Email:** _____

Contact Phone # and Name during Event: _____

Description of Parade/Special Event

Please include whether the parade/special event will occupy all or only a portion of the width of the streets, the location of any event areas, and the type of event including any activities planned (floats, animals, etc.). Please attach any other documentation that may be helpful:

Proposed Route if applicable including starting and termination points (Please attach a map):

I have attached a map.

Describe any recording equipment, sound amplification equipment, banners, signs, or other attention-getting devices to be used in connection with the parade/special event:

Street Closures/Parking Restrictions requested, if any:

Please specify what (if any) city equipment/assistance is requested (traffic control devices, trash containers, traffic assistance, crowd control, etc.):

Please submit on a separate sheet of paper a Traffic Control Plan and include the following:

- a. Detailed map (google map is fine) showing the route or event area, including street names.**
- b. Location of all traffic control devices and cross guards.**

I have attached a Traffic Control Plan. Additional Notes on the Plan?

Please specify what arrangements have been made for clean-up after the event:

INSURANCE

A Certificate of Liability Insurance in the amount of at least \$750,000 per occurrence and \$1.5 million aggregate must be submitted to the Kalispell City Attorney’s office prior to any permit being issued. The Certificate of Insurance must name The City of Kalispell as certificate holder or as an additionally named insured on the policy. For insurance questions please contact the city attorney’s office at (406) 758-7977.

PARADES

NO CANDY OR OBJECTS MAY BE THROWN TO SPECTATORS. The applicant will brief participants to maintain a safe and constant interval during the parade, and will notify participants they cannot ride on floats with their legs hanging over the side. This will help prevent the “accordion effect” which results in gaps in the parade procession, and will help ensure the safety of participants.

TERMS AND CONDITIONS

As an agent and acting on behalf of the requesting agency or organization, I hereby certify that the information above is complete and correct. I further understand that it is my responsibility to ensure that participants for the parade/event as requested fully understand that the City of Kalispell and the State of Montana does not endorse, encourage, condone, or protest the said parade/event. It is further my understanding that each participant will be advised by the parade/event sponsor that the City of Kalispell and the State of Montana will be held harmless and will not be responsible for injuries, damages, or deaths resulting from or while participating in the parade/event.

ACKNOWLEDGMENT OF LEGAL RESPONSIBILITIES

By signature below I acknowledge that the applicant is responsible for the prudent management of the event, for the welfare of the public at the event, for all property belonging to the applicant and to the City related to the event, and for adherence to the [Kalispell Municipal Code](#) and regulations, as well as the laws of the State of Montana.

I understand that I must pay all fees and deposits as required and replacement costs for damaged or unreturned equipment provided by the city.

I understand that my permit can be revoked at any time for good cause, that my deposit may not be returned, and I may not be able to obtain a new permit in the future.

I have read and understand all of the policies and regulations contained in the permit.

Signature of Applicant

Date

Print Name: _____ Title: _____

Organization

**INTERNAL APPROVAL PROCESS ROUTING - DO NOT WRITE BELOW THIS
SPACE (FOR CITY USE ONLY)**

Department Signature	Check One		Date
Fire: _____	Approve	Deny	_____
Parks: _____	Approve	Deny	_____
Police: _____	Approve	Deny	_____
Public Works: _____	Approve	Deny	_____
City Attorney: _____	Approve	Deny	_____

Date Permit Issued: _____ **OR Date Permit Denied:** _____

Reason for Denial: _____

**** PLEASE CHECK APPLICABLE FEES**

\$100 Parade/Special
Event Fee Date Paid: _____

\$200 Deposit Date Paid: _____ Date Returned: _____ By: _____

\$50 Traffic Control
Plan Review Fee Estimated Amount: _____ Date Paid: _____

Solid Waste Fee Estimated Amount: _____ Date Paid: _____

Additional Notes: