



# CITY OF WILDOMAR

## TEMPORARY EVENT APPLICATION & PERMIT PACKET

### Conducting a Temporary Event in the City of Wildomar

- Would you like to host a Temporary Event in the City of Wildomar? A successful event depends on good planning. This Temporary Event Packet provides instructions to guide and assist you in the preparation and processing of your Temporary Event Permit.
- The type of event and the kinds of activities you are planning determines which city departments you may need to contact.
- Remember, you may also need other permits from other agencies such as the Riverside County Health Department, Alcohol Beverage Control, or Fire Department.
- Please read the entire Information packet and instructions before you begin completing the application.
- Temporary events are permitted in accordance with the use and operational regulations outlined in Chapter 17.256 of the Wildomar Municipal Code (WMC). An application review and processing fee is required with the application packet in accordance with Chapter 3.44 of the WMC. The following fees were adopted by the City Council on February 13, 2019:

• Wildomar Resident (private property or city park):	\$100
• Non-Profit Organization with Wildomar Address (private property or city park)::	\$150
• Wildomar Commercial Business (private property or city park):	\$200
• Applicant's from Outside City Limits (private property):	\$661
• Applicant's from Outside City Limits (city park):	\$725

- Temporary events are limited to SIX (6) times per calendar year. Recurring events exceeding this amount requires approval of a conditional use permit by the Planning Commission.
- If you are a non-profit organization, you must provide written evidence that your status is current and in good standing with State and Federal agencies/regulations.
- Your application package must include a signature or signed letter from the underlying property owner authorizing the temporary event on the property in question. If the event is held within a multi-tenant commercial center, the application package must also include a signed letter from each business owner that may be affected by the event.
- This application form and all pertinent documents must be submitted in person to the Planning Department at least 60 days prior to the event at:

23873 Clinton Keith Road, Suite #201  
Monday-Thursday, 8:00 am – 5:00 pm  
Attention: Matt Bassi, Planning Director

- Applications can take up to 60 days to review and process through all city departments and outside agencies for approval, so a timely submittal is important.
- Most common questions will be answered as you read through the information. After reading the information packet, if you still have questions, you may call the Planning Department at (951) 677-7751.
- Please print the Temporary Event Permit Packet in its entirety and complete all sections.

# City of Wildomar

## Temporary Event Application & Permit

### 1. PERMIT NUMBER

Permit Number: \_\_\_\_\_ Date of Application: \_\_\_\_\_

### 2. DESCRIPTION

Name of Event: \_\_\_\_\_

Date of Event: \_\_\_\_\_ Time of Event: \_\_\_\_\_

**Estimated attendance:** \_\_\_\_\_

**Type of Event:**

☐ Run / Walk

☐ Concert / Performance

☐ Bicycle Race

☐ Farmers Market

☐ Parade / March

☐ Circus / Carnival

☐ Festival / Fair

☐ Car Show

☐ Block or Neighborhood Party

☐ Commercial Filming

Other : \_\_\_\_\_  
(i.e., craft fair/open air market, etc.)

**Detailed Description of the Event:**

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**Is this a recurring event at the same location?**    ☐ Yes    ☐ No

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### 3. CONTACTS

Name of the Organization Sponsoring/Requesting the Temporary Event Permit:

\_\_\_\_\_

Is the organization a tax exempt, non-profit organization? ☐ Yes ☐ No

If yes, please attach the following:

1. A copy of the organization's 501 (c)3 letter.
2. Letter of authorization from the organization authorizing the representative to apply for the permit on its behalf

**Name of Applicant:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Email:** \_\_\_\_\_

The Applicant must be available to answer questions regarding the event and the event application. They must also be available for any planning meetings scheduled prior to the event.

**Name of Property Owner:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Email:** \_\_\_\_\_

### 4. ON SITE CONTACT

**Name of On Site Contact:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Email:** \_\_\_\_\_

The On Site contact must be available at the event site and in possession of the approved Temporary event permit. The On Site Contact should have with them, the cell phone assigned to the above listed cell phone number during the entire event.

## 5. LOCATION

Address of Property and Location Description:

Address: \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

## 6. SITE PLAN

Site Diagram: Please attach a diagram of your event site using 8 ½" x 11" size paper.

The Following shall be included on the site plan:

Name, address and phone number of applicant and owner

Vicinity map

Existing Business(es) on site

Location of pedestrian walkways

Location of vehicular access/exit points, driveways, emergency exits and ADA paths

Identify source of electrical supply (if applicable)

Location of all buildings, parking, generators, tents, canopies, toilets, booths, beer gardens, cooking areas and other temporary structures.

Total Anticipated Attendance: \_\_\_\_\_ Daily Attendance: \_\_\_\_\_

Times: \_\_\_\_\_ To \_\_\_\_\_

Streets Closed: \_\_\_\_\_ Setup Begins: \_\_\_\_\_

Event Begins: \_\_\_\_\_ Event Ends: \_\_\_\_\_

Cleanup Ends: \_\_\_\_\_ Streets Open: \_\_\_\_\_

## 7. SECURITY PLAN

As the event applicant or organizer, **YOU** are required to provide a safe and secure environment for the event. This is accomplished by anticipating potential problems and concerns related to the event and the surrounding environment. The event may require the services of Wildomar Police, Private Security, Crossing Guards and or Public Works employees. Private Security Guards must be properly licensed and preapproved.

Have you hired a licensed professional security company to develop and manage your event's security plan? ☐ **Yes**      ☐ **No**

If yes, you are required to provide a copy of the company's valid Private Patrol Operators License issued by the State of California and a certificate of insurance naming the City of Wildomar as additionally insured.

**Name of Company:** \_\_\_\_\_ **Contact Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Email:** \_\_\_\_\_

## 8. TRAFFIC PLAN

Street Closures: Is your event going to restrict the regular flow of traffic on a City Street or sidewalk?

☐ **Yes** ☐ **No**

If yes, applicant/organizer must notify residences and businesses affected by the event. Notice shall be given to and approved by the Public Works Department.

What Street(s) will be closed for your event? \_\_\_\_\_

\_\_\_\_\_

At what intersections will the above street be closed? \_\_\_\_\_

\_\_\_\_\_

Will your event involve the use of traffic safety equipment, (i.e.) barricades, etc.?

☐ **Yes** ☐ **No**

Please give details: \_\_\_\_\_

\_\_\_\_\_

Is the applicant/organizer requesting the Wildomar Public Works Department to provide the safety equipment?

☐ **Yes** ☐ **No**

If this event requires the closure of more than one street between two intersections, please include a detailed map of the event showing all intersections and roadway access points, the location of barricades and traffic control personnel. You will be required to obtain traffic safety equipment for the safe closure of the venue and to ensure proper detour and parking information is posted. Depending upon the type of event, you may need barricades, traffic cones, directional signage etc. It is the responsibility of the applicant/organizer to obtain and to properly place this equipment prior to the beginning of the event.

The Riverside Transit Agency (RTA) must be notified if street closures will affect bus routes. Contact RTA's administrative office at 1825 Third St., Riverside, CA, 92501, or call 951/565-5000 and ask to speak to the Chief Operations Officer.

All traffic control devices on all streets and highways open to public travel in California must conform to the California Department of Transportation, Traffic Manual, subject to the provisions of California Vehicle Code.

#### Parking

It is important that you plan for the safe arrival and departure of event attendees, participants and vendors. As the event organizer, you should develop a parking and / or shuttle plan that is suitable for the environment in which your event will take place. Remember that parking, traffic congestion and environmental pollution are all areas of concern with event. You must include accessible parking and/or access in your event plans.

How many parking are available at the proposed location (site): \_\_\_\_\_

## **9. FIRE DEPARTMENT**

Will the event require electrical generators during the event?

☐ **Yes** ☐ **No**

Will fireworks, explosives or any other pyrotechnic device be used at the event?

☐ **Yes** ☐ **No**

Will the event require tents with over 200 square feet of material?

☐ **Yes** ☐ **No**

Will the event require tents or canopies with over 400 square feet of material?

☐ **Yes** ☐ **No**

Will there be use of cooking or other equipment that emits a flame, heat or spark?

☐ **Yes** ☐ **No**

**Note:** If any of the boxes above are checked yes, a supplemental fire application/fee must be submitted.

## **10. FOOD SERVICE**

Will food or beverages be provided or sold at the event?

☐ **Yes** ☐ **No**

Will the event be professionally catered?

☐ **Yes** ☐ **No**

If your event is being catered, please provide information on the company.

**Name of Company:** \_\_\_\_\_ **Contact Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Email:** \_\_\_\_\_

Applicant/organizer must contact the Riverside County Department of Environmental Health for a permit if any food or beverages will be sold or distributed. A copy of the Health department permit must be submitted with the application packet.

Department of Environmental Health  
38740 Sky Canyon Drive  
Murrieta, CA 92563  
951.461.0284

## 11. ANIMALS

Will there be animals present: (I.E. Petting zoo, circus, pony rides, dogs, other)? ☐ **Yes** ☐ **No**

Please Specify:

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## 12. MEDICAL PLAN

Have applicant/organizer hired a licensed professional emergency medical service provider to develop and manage the event's medical plan?

☐ **Yes** ☐ **No**

If yes, please provide information on the company on the following page.

**Name of Company:** \_\_\_\_\_ **Contact Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Email:** \_\_\_\_\_

Please describe the medical plan including your communications plan. The plan should include the hours of setup and dismantling of medical aid areas (add a separate sheet if more room is needed)

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**13. AMPLIFIED NOISE**

Will the event have amplified sound at your event?

☐Yes ☐ No

Will the event have live music?

☐Yes ☐ No

Will the event have mechanical noise?

☐Yes ☐ No

**14. SANITATION**

What provisions applicant/organizer made for sanitation facilities?

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(Male) Number of Toilets: \_\_\_\_\_ Urinals:\_\_\_\_\_ ADA:\_\_\_\_\_

(Female) Number of Toilets: \_\_\_\_\_ ADA: \_\_\_\_\_

(Combined Male/Female) Number of Toilets: \_\_\_\_\_ ADA: \_\_\_\_\_

All temporary sanitation facilities placed at the event must be removed on the first business day following the event unless in the pubic right away.

**15. CLEAN UP**

What provisions have the applicant/organizer made for clean up after the event?

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Who is the person responsible for clean up?

**Contact Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Email:** \_\_\_\_\_

\* Your organization may be eligible to receive FREE trash and recycling waste boxes. Please contact CR&R Incorporated 800-755-8112 for more information.

\* Event location and adjacent areas must be returned to "Pre-Event" conditions

## 16. ADDITIONAL INFORMATION

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## 17. AGREEMENT OF APPLICANT (REQUIRED)

1. Applicant agrees, upon request, to provide a certificate of insurance providing Evidence of General Liability Insurance coverage in the minimum amount of \$1,000,000 combined single limit AND an additional Insured Endorsement naming the City of Wildomar, its officers, employees and agents' as additional insured. The two documents must be submitted no later than (10) days prior to the event.

☐ **Yes** ☐ **No**

2. Applicant agrees, upon request, to submit a security plan setting forth the proposed security measures to be taken to protect the health, safety and welfare of the participant, spectators, bystanders and passersby. This plan may be reviewed by the Police Department who may require alterations to the plan. Security measures may include, but are not limited to, the hiring of private security or Riverside Police Officers at the applicant's expense.

☐ **Yes** ☐ **No**

3. Applicant agrees, upon request, to provide a copy of their "Determination Letter" as issued by the Internal Revenue Service of the United States, if the application is made on behalf of any organization representing itself as a "tax-exempt," "non-profit" and/or "charitable."

☐ **Yes** ☐ **No**

4. Applicant agrees, upon request, to pay a refundable "Clean-Up Deposit," at least ten (10) days

prior to the event as a condition of the issuance of the Temporary Event Permit. Applicant also agrees to pay clean-up costs, in excess of the deposit, incurred by the City as a result of additional clean-up required to return the event location and surrounding area to its pre-event condition.

☐ Yes ☐ No

5. Applicant agrees to notify all residents and businesses that will be affected by the street closure and/or amplified sound. If the event/closure will affect access to more than one business, the applicant must notify the Murrieta/Wildomar Chamber of Commerce.

☐ Yes ☐ No

6. Applicant agrees to supply warning signs and barricades and to situate them in such position that the road closure may be maintained in a safe and orderly manner. Such devices may be rented from companies listed in the telephone directory under "Traffic Safety Devices."

☐ Yes ☐ No

Applicant agrees to submit, upon request of the City, any additional information required to evaluate this application and permit. Applicant certifies that all information contained herein and any other information submitted in support of this application and permit is true and correct to the best of their knowledge.

Applicant agrees to submit, upon request of the Planning Department, any additional information required to evaluate this application and permit. Applicant certifies that all information contained herein, and any other information submitted in support of this application and permit is true and correct to the best of their knowledge.

Applicant agrees that any false statement or material misrepresentation made in support of this application and permit is cause for denial of issuance of a Temporary Event Permit. Applicant also agrees that failure to adhere to the policies and procedures established by the City of Wildomar or any conditions or restrictions imposed upon the permit by the Wildomar Police or Fire Department is cause for revocation of the Temporary Event Permit.

Applicant further agrees the permit may be revoked at any time by any supervisor of the Wildomar Police Department or Planning Department.

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Signature of Applicant

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Date

I certify under the penalty of the laws of the State of California that I am the property owner of the property that is the subject matter of this application and I am authorizing to and hereby do consent to the filing of this application and acknowledge that the final approval by the City of Wildomar, if any, may result in restrictions, limitations and construction obligations being imposed on this real property.

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Signature of Property Owner

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Date

**NOTE:** A LETTER OF AUTHORIZATION FROM THE PROPERTY OWNER MAY BE ATTACHED IN PLACE OF SIGNATURE ABOVE

18. INSURANCE/ INDEMNIFICATION AGREEMENT (REQUIRED)

If the event will take place on any portion of public right-of-way, City owned property or City sponsored events, the applicant shall provide and maintain general liability insurance with minimum limits of \$1,000,000 per occurrence for bodily injury, personal injury and property damage. If alcoholic beverages are served, liquor liability in the amount of \$1,000,000 per occurrence is required. General liability and liquor liability shall be endorsed naming the City, its officers, agents, employees and volunteers as additional insureds. The insurance provided to the City as an additional insured shall be primary to, and non-contributory with any insurance or self-insurance program maintained by the City. Use of the facility may be denied if satisfactory proof of the required insurance is not timely received prior to the event. In consideration of the granting of this Application and Permit for Temporary Event for:

(name of event)

On (date of event)

The (name of organization)

agree(s) to defend, indemnify and hold harmless the City of Wildomar, and the City's employees, officers, managers, agents, council members, and volunteers from any and all losses, damages, claims for damage, liability, lawsuits, judgments, expense and cost arising from any injury or death to any person or damage to any property including all reasonable costs for investigation and defense thereof (including, but not limited to, attorney fees, costs and expert fees) arising out of or attributed to the issuance of Applicant's Temporary Event Permit regardless of where the injury, death or damage may occur, unless such injury, death or damage is caused by the sole negligence or willful misconduct of the City.

Dated: Signature:

Printed Name:

Title:

## 19. Temporary Event Application Permit Checklist:

Please check off all documents attached:

- ☐ Temporary Event Application Packet
- ☐ Application Fee (per Sec. 3.44 of the WMC)
- ☐ Site Plan/ Traffic Plan
- ☐ Property Owner Signature or Letter of Authorization
- ☐ Letter of Authorization from business owners if located in an existing commercial center (If Applicable)
- ☐ Certificate of Insurance (If Applicable)
- ☐ ABC License (If Applicable)
- ☐ Health Department License (If Applicable)
- ☐ Security Plan (If Applicable)
- ☐ Fire Department Permit (If Applicable)
- ☐ If you are a non-profit organization, you must provide written evidence that your status is current and in good standing with State and Federal agencies/regulations.

I certify that all filing requirements have been satisfied for my application. I further understand that an incomplete application cannot be accepted for processing.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_