



Galt Parks & Recreation Department  
610 Chabolla Ave., Galt, CA  
(209) 366-7180 [galtpandr@ci.galt.ca.us](mailto:galtpandr@ci.galt.ca.us)

City of Galt  
**SPECIAL EVENTS APPLICATION**

To determine conformance with the Panic, Fire and Life Safety Standards of Titles 19 and 24 of the California Code of Regulations, please complete this application.

(1) Event Sponsor/Organization: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_

(2) Authorized Representative/Contact Person: \_\_\_\_\_

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

Contact Numbers: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

(3) Alternate Contact Person: \_\_\_\_\_

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

Alternate Contact's Numbers: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

(4) Date(s) of Event: \_\_\_\_\_ to \_\_\_\_\_

(5) Time of Event:

Date: \_\_\_\_\_ to \_\_\_\_\_ Date: \_\_\_\_\_ to \_\_\_\_\_

Date: \_\_\_\_\_ to \_\_\_\_\_ Date: \_\_\_\_\_ to \_\_\_\_\_

Date: \_\_\_\_\_ to \_\_\_\_\_ Date: \_\_\_\_\_ to \_\_\_\_\_

(6) Event Type: \_\_\_\_\_

(7) Location of Event: \_\_\_\_\_

(8) Admission to Event/Activity? Yes No If Yes, Admission Fee: \_\_\_\_\_

(9) \*Estimated Attendance: \_\_\_\_\_

\*This estimate allows for a ten (10%) percent increase to the number of attendees for the event. Once the ten percent is reached, **NO** additional attendees shall be permitted to enter the event.

(10) Will Any Food or Non-Alcoholic Beverages Be Sold or Consumed at the Event? YES NO  
(If YES, please provide proof of compliance with all applicable local, state and federal laws, rules and regulations, including proof that the applicant has obtained all necessary permits.)

(11) Will Any Alcoholic Beverages Be Sold or Consumed at the Event? YES NO  
(If YES, please provide proof of compliance with all applicable laws, rules and regulations of the Alcohol Board of Control.)

**Continue only if your event is considered a Category II (500-3,000) or Category III (over 3,000) event.**

(12) Type and Estimated Number of Vehicles, Animals, and Structures Used at the Event: \_\_\_\_\_

(13) Parking Requirements for the Event: \_\_\_\_\_

(14) Will You Be Using Sound-Amplification Equipment? (If no, skip to 15):      YES      NO

(15) Description of Sound-Amplification Equipment: \_\_\_\_\_

Time of Use: \_\_\_\_\_ to \_\_\_\_\_

(16) Comments: \_\_\_\_\_

In addition, please attach:

- (a) A site and a setting floor plan, indicating the exits and path of travel, tables and/or chair rows and/or dance floor, the location of the fire extinguishers;
- (b) A detailed description of the event;
- (c) A description of the accessibility and availability of the sanitary facilities;
- (d) Proof of liability and property insurance as required by Section 9.38.120 of the City of Galt Municipal Code; and
- (e) Written proof of consent by the owners of the property where the event is to be held.

Supplemental information may be required by the Parks & Recreation Director if, based upon the circumstances of the special event, the Director or his/her designee finds additional information reasonably necessary to determine whether to approve or conditionally approve the permit.

Approval of this event does not authorize or approve any omission or deviation from application regulations. Final approval of this event may be subject to field inspection by the AHJ (Authority Having Jurisdiction); Cosumnes Fire Department and/or Galt Police Department, Galt Parks & Rec., Galt City Council.

**Approved:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**INTERNAL USE ONLY**

|               |       |                     |       |
|---------------|-------|---------------------|-------|
| City Manager  | _____ | Public Works        | _____ |
| Police        | _____ | Building Department | _____ |
| CSD           | _____ | Finance             | _____ |
| County Health | _____ | Other               | _____ |