



City of Hermosa Beach  
Community Resources Department

CONTRACT NUMBER:

EVENT DATE: **RECEIVED**

DATE STAMP  
JAN 20 2015

STAFF  
INITIALS

*(Handwritten initials)*

COMMUNITY RESOURCES

# COMMERCIAL AND NON-PROFIT SPECIAL EVENT PERMIT APPLICATION

710 Pier Avenue • Hermosa Beach, CA 90254 • 310.318.0280 • Fax: 310.372.4333

- APPLICATION MUST BE SUBMITTED BY OCTOBER 30, 2014 FOR EVENTS SCHEDULED FROM JANUARY THROUGH JUNE 2015, AND DUE MARCH 2, 2015 FOR EVENTS SCHEDULED FROM JULY THROUGH DECEMBER, 2015.
- \$758 Non-Refundable Application FEE required with application.
- \$505 Non-Refundable Application FEE, for VERIFIABLE non-profits (SEE INSTRUCTIONS)

Requested Event Date (1<sup>st</sup> Choice<sup>\*\*</sup>): March 7, 2015  
2<sup>nd</sup> Choice <sup>\*\*</sup> (Required): \_\_\_\_\_

**\*\*Date choice is not guaranteed until final calendar has been determined by City staff.**

## ORGANIZATION'S INFORMATION

EVENT TITLE: Mira Costa girls beach volleyball tournament  
 Applicant Name: Amy Micheletti Birthdate: 02/20/1970  
 Organization Name: MBX  
 Non-Profit?  No  Yes Non-Profit I.D. or Tax Exempt #: \_\_\_\_\_  
 Address: 1033 9th St  
Hermosa Bch. CA 90254  
 City State Zip  
 Phone: \_\_\_\_\_ Cell: 310 936 7095  
 Email Address: mic4@verizon.net Fax: \_\_\_\_\_

## CONTACT PERSON'S INFORMATION (IF DIFFERENT FROM ABOVE)

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_ City State Zip  
 Phone: \_\_\_\_\_ Cell: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Fax: \_\_\_\_\_

## REQUIRED: CONTACT PERSON ON THE DAY OF THE EVENT:

Name: Amy Micheletti Cell: 310 936 7095

**EVENT INFORMATION**

Event Type (please select all that apply):

- Race (run, walk, bike, etc.)
- Parade
- Street Fair/Festival
- Concert
- Other

- Tournament Type: Mira Costa girls VB
- Pass-Through
- Fundraiser Benefitting: \_\_\_\_\_
- Swim Event

Event Start Time: 9:00 am

Event End Time: 5:00 pm

Set-Up Date: 3/7/15

Set-Up Time: 7:00 am

(If set up includes multiple days, please include additional pages with a daily set-up schedule).

Break Down Date: 3/7/15

Break Down Time: \_\_\_\_\_

Event Location: South side Hermosa pier

Estimated # of Participants: 64

Age of Participants: 14-18

Estimated # of Spectators (daily): 100-75

Total Estimated Attendance: 150

**Overall Event Description** - Briefly explain event and activities:

Doubles tournament w/ play against other H.S. in the area.

**Street Closure Information** – For Parades, Races, Walk/Runs, etc. taking place on City streets.

Names of Streets to be closed (please include additional sheets if necessary):

_____	between	_____	and	_____	_____	to	_____
_____	between	_____	and	_____	_____	to	_____
_____	between	_____	and	_____	_____	to	_____
_____	between	_____	and	_____	_____	to	_____
_____	between	_____	and	_____	_____	to	_____

**Event Route** (official map must be submitted with application)

NA

Assembly Area/Event Start: \_\_\_\_\_

Disbanding Area/Event End: \_\_\_\_\_

**Sponsors**

List ALL proposed/anticipated Co-Sponsors. Each Co-sponsor is a \$250 per co-sponsor fee. Co-sponsors may sample only, not sell.

*0*

**Parking (\$1.25 per hour or \$30 per space per day)**

Will you need reserved parking spaces?  Yes  No

If YES, please list requested parking times for each day of request (attach additional sheets if necessary):

# of Spaces _____	Date _____	from _____	to _____
# of Spaces _____	Date _____	from _____	to _____
# of Spaces _____	Date _____	from _____	to _____

Will official event merchandise be sold at the event (Business License required)?  Yes  No  
(Note: No sales on beach per HBMC)

Does your event involve the sale or consumption of alcoholic beverages?  Yes  No  
Alcohol is prohibited on the beach per HBMC 12.26.300

Will the event have amplified sound?  Yes  No

-If YES, please describe (live music, PA, number and size of speakers, microphone, bullhorn, etc):

Is this a fundraising event?  Yes  No

-If YES, please describe:

Will there be any fenced areas?  Yes  No

-If YES, please describe:

Will there be construction of stages or structures, including any tents or awnings?  Yes  No

-If YES, please describe:

What is your clean-up plan post event?

All participants expected to clean their areas w/ max adults to supervise + assist as needed.

Will you be requesting street banners?  Yes  No

Will you be requesting light pole banners?  Yes  No

Will you be filming or having television coverage?  Yes  No

Entrance or Registration Fee: \$50 per team

Methods of Registration (please check all that apply):

- Website  Mail  
 Active.com  Other

Prizes (including anticipated cash prizes):

0

#### SAFETY/SECURITY/VOLUNTEERS

Have you hired a security company to handle security arrangements for this event?  Yes  No

-If YES, please include the following information:

Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_ # of Guards: \_\_\_\_\_

Guard Schedule:

Do you plan on utilizing volunteers?  Yes  No

-If YES, please describe:

Parents to help the girls figure out play sched + for check in.

Please describe your procedures for both crowd control and internal security:

Small group

**EVENT PROMOTION INFORMATION**

Please describe marketing and promotional efforts for this event. Include event website, social networking sites, radio play, etc.

emails to the other high schools invited.

**EQUIPMENT INFORMATION (ATTACH SITE PLAN)**

**A DIAGRAM OF YOUR SITE PLAN THAT INCLUDES ALL FACILITIES, EXACT PLACEMENT OF ALL EQUIPMENT, STREET CLOSURES, INGRESS AND EGRESS ROUTES, SHUTTLE ROUTES, FENCING, ACCESSIBILITY PLAN, AND PARKING MUST BE ATTACHED TO THE APPLICATION.**

**YOUR APPLICATION WILL NOT BE PROCESSED WITHOUT A SITE PLAN**

Please check all the boxes that apply to the equipment that will be on site for your event and specify the number and size of each (if applicable).

- Cars \_\_\_\_\_
- Semi-Trucks \_\_\_\_\_
- Generator \_\_\_\_\_  
Size/Type: \_\_\_\_\_
- Vans \_\_\_\_\_  
Size: \_\_\_\_\_
- Sound Equipment \_\_\_\_\_
- Enclosed Tents \_\_\_\_\_
- Other (please attach list with description of each item)
- Porta Potties \_\_\_\_\_
- Motor Homes \_\_\_\_\_  
Size: \_\_\_\_\_
- Trailer \_\_\_\_\_  
Size: \_\_\_\_\_
- Stage \_\_\_\_\_  
Measurements: \_\_\_\_\_
- Canopies \_\_\_\_\_

**GREEN MATRIX (ENVIRONMENTAL PROTECTION PLAN) - REQUIRED**

**COMPLETE THE ATTACHED GREEN MATRIX AND ATTACH TO YOUR APPLICATION.**

**ACCESSIBILITY PLAN**

It is the applicant's responsibility to comply with all City, County, State and Federal disability access requirements applicable to the event, including the American with Disabilities Act (ADA). All indoor and outdoor sites, activities and programs must be accessible to persons with disabilities.

Please describe your accessibility plan:

**INSURANCE**

Unless greater or lesser coverage is requested, applicant agrees to furnish the City of Hermosa Beach evidence of \$2 million comprehensive general liability insurance in the form of a certificate, including endorsement, covering the entire period of this permit, naming the City of Hermosa Beach, its officers, agents and employees as additionally insured. Permittee waives claims against the City of Hermosa Beach, its officers, agents and employees, for fees or damages caused, arising out of or in any way connected with the exercise of this permit.

**APPLICANT AGREES TO COMPLY WITH ALL APPLICANT'S LAWS AND AGREES TO MAINTAIN PREMISES IN GOOD  
CONDITION AND RETURN IN THE SAME CONDITION AS BEFORE SAID USE.**

I certify that the information contained herein is true and correct to the best of my knowledge. I have read and agree to comply with the City of Hermosa Beach Sustainability Measures. All fees, charges and other material will be paid and or furnished to the Department of Community Resources as mutually agreed to by both parties.

*Amy Micheletti*

\_\_\_\_\_  
Name/Company Representative

*A. Micheletti*

\_\_\_\_\_  
Signature

*1/20/15*

\_\_\_\_\_  
Date



## **PUBLIC RELATIONS INFORMATION**

Please provide the following information to be given out to the general public, if requested:

Name of Event: Mira Costa girls Beach VB tournament  
Name of Organization: MBX

### **Event Dates and Times:**

Date	<u>3/7/15</u>				
Times	<u>9-5pm</u>				

Event Information can be found online at: \_\_\_\_\_

Public Relations Contact: Bill Inman

Day Phone: \_\_\_\_\_ Evening Phone: 949-735-9608

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

Please provide a brief description of your event. Please include any information that would be helpful for someone looking for more information.

Doubles tournament against various other high schools.