



# COUNTY OF MONO

County Administrative Office  
P.O. BOX 696, BRIDGEPORT, CALIFORNIA 93517  
(760) 932-5410 • FAX (760) 932-5411

## SPECIAL EVENT APPLICATION

The following application is intended for all types Special Events.  
Special Events Are Regulated By Mono County Code Chapter 5.50.  
Completed applications must be submitted for approval between 120 and 30 days prior to event.  
**Please submit completed application to the Mono County Administrative Office.**

EVENT ORGANIZER/APPLICANT \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_ E-MAIL \_\_\_\_\_

NATURE OF EVENT (please provide a full description and continue on a separate page if necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATE OF EVENT \_\_\_\_\_ HOURS OF EVENT \_\_\_\_\_ a.m./p.m. to \_\_\_\_\_ a.m./p.m.

NUMBER OF ATTENDEES EXPECTED \_\_\_\_\_

RISK/RELEASE OF LIABILITY FORM: Signed by applicant, attached to application

ALCOHOL PRESENT ON PREMISES?

(If applicable please provide a certificate naming the County as an additional insured)

PROFITABLE EVENT  NONPROFIT EVENT (proof of tax-exempt status may be requested)

COMMUNITY CENTER RESERVED:  Antelope Valley  Benton  Bridgeport  Chalfant Valley

Crowley Lake  June Lake  Lee Vining  Other site: \_\_\_\_\_

**NOTE:** Mono County park facilities cannot be reserved; facilities will be open to the public

WILL YOU BE ERECTING/INSTALLING TEMPORARY STRUCTURES?  Yes  No

(May be subject to building codes and additional time for review)

COUNTY PERSONNEL/EQUIPMENT REQUESTED \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PUBLIC EVENT OR  PRIVATE EVENT

If your event is private you have completed the application. If your event is public, please continue

**OTHER OPERATORS/PROMOTERS**

**NAME** \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_

**NAME** \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_

**VENDORS** *Use additional sheets if necessary.*

**NAME** \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_

**NAME** \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_

**NAME** \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_

**RESTROOMS:**  On-site fixed facilities  Portable, how many? \_\_\_\_\_

**DRINKING WATER:**  On-site fountain  On-site sink  Bottled water  Other \_\_\_\_\_

**MEDICAL AID:** Type \_\_\_\_\_ Location \_\_\_\_\_

**SECURITY MEASURES:**  Portable fencing  Extra lighting  Sheriff  Other \_\_\_\_\_

**ELECTRICITY:**  No  Yes, provided by \_\_\_\_\_, paid by \_\_\_\_\_

**LIVE MUSIC:** Type \_\_\_\_\_ Number of musicians \_\_\_\_\_

Concert/dance

Amplified from \_\_\_\_\_ a.m./p.m. to \_\_\_\_\_ a.m./p.m. (generally no later than 10 pm)

**CLEANUP PLAN:** Personnel provided by \_\_\_\_\_ Finish time \_\_\_\_\_

**ADDITIONAL CONTAINERS:** Dumpsters, trash bags, etc. supplied by \_\_\_\_\_

[continued on next page]

## **ATTACHMENTS**

(Please attach all of the following that apply to your event)

**SCHEDULE OF EVENTS** (include items and times)

**SITE PLAN** (required for events anticipating more than 200 attendees)

Site plan may be hand drawn, not necessarily to exact scale, to show the following:

- Event site location
- Stage/entertainment areas
- Food booths
- Game booths
- Sales booths
- Parking areas
- Restroom facilities
- Street closures
- Dumpsters/trash cans

**MAPS OR ROUTES** (i.e., bicycle race/tour, 5K-10K runs or other event maps)

**PERMITS/LICENSES:**

- Encroachment Permit (Caltrans/Public Works)
- Road Closure (Caltrans/Public Works/ BOS Resolution)
- Temporary Food Permit (Environmental Health)
- Business License (Finance Department)
- Alcoholic Beverage License (from Alcoholic Beverage Control)
- Other: \_\_\_\_\_

**ASSUMPTION OF RISK AND RELEASE OF LIABILITY  
FOR USE OF MONO COUNTY FACILITY, EQUIPMENT,  
PROPERTY, AND/OR SERVICES**

**WHEREAS**, the undersigned, \_\_\_\_\_ (hereinafter "Permittee"), desires to use the following facility, equipment, property, and/or services owned, operated, controlled, or provided by the County of Mono, a political subdivision of the State of California ("the County") for the following purpose(s): \_\_\_\_\_ on the following date(s) or time(s): \_\_\_\_\_

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**WHEREAS**, the County is willing to permit such use of the aforementioned County facility, equipment, property, and/or services in exchange for the Permittee's execution of this release of liability:

**NOW, THEREFORE**, as a material inducement for County to hereby grant Permittee permission to use a County facility, equipment, property, and/or services, Permittee hereby assumes all risk, holds harmless, irrevocably and unconditionally releases, and agrees to indemnify and defend, the County and its successors, predecessors, assigns, officers, employees, agents, representative, attorneys, and affiliated entities, and all persons acting by, through, under or in concert with them, with respect to any and all liability, lawsuits, and/or claims for damages or injuries to persons or property (including but not limited to theft or loss of, or damage to, Permittee's personal property) as a result of or in any way connected with Permittee's presence on, or use of, the County facility, equipment, property, and/or services for which permission is hereby granted and/or as a result of the presence on, or use of, that facility, equipment, property and/or services by Permittee's agents or by any persons invited or allowed into the facility, equipment, property, and/or services by Permittee. **Through this release, Permittee waives all rights given by Section 1542 of the California Civil Code which reads as follows: "As a general release does not extend to claims which the creditor does not know or suspect to exist in his favor at the time of executing the release, which if known to him must have materially affected his settlement."**

PERMITTEE HEREBY ACKNOWLEDGES HAVING READ AND UNDERSTOOD THE FOREGOING, AND HAVING HAD OR **EXPRESSLY WAIVING** THE RIGHT TO HAVE HIS OR HER OWN ATTORNEY REVIEW AND ASSIST IN THE PREPARATION OF THIS DOCUMENT BEFORE SIGNING IT.

MONO COUNTY  
By:  \_\_\_\_\_  
Risk Manager  
P.O. Box 696  
Bridgeport, CA 93517  
(760)932-5410 Fax: (760)932-5411

PERMITTEE:  
By: \_\_\_\_\_  
Print: \_\_\_\_\_  
Company: \_\_\_\_\_  
Date: \_\_\_\_\_

**Mono County  
Environmental Health**

PO Box 3329, Mammoth Lakes, CA 93546  
760-924-1830, fax 924-1831

PO Box 476, Bridgeport, CA 93517  
760-932-5580, fax 932-5284

**APPLICATION FOR TEMPORARY FOOD PERMIT**

Please submit application and fee (if applicable) at least two weeks prior to event.  
See page 2 for fee schedule

Name of Event \_\_\_\_\_ Date of Event \_\_\_\_\_

Location of Event \_\_\_\_\_

Sponsor of Temporary Facility \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_

Email Address \_\_\_\_\_

Will foods served be prepared in a permitted restaurant, community center, or cottage food operation?

Yes                  No                  If so, name of facility \_\_\_\_\_

**FOODS TO BE SERVED**

Food Item	Source - Where Purchased	Packaged, Bottled or Bulk?

Which of the foods listed above will be prepared at the temporary food facility?

Which foods (if any) will be brought in from a permitted facility?

Please continue . . .

**EQUIPMENT**

List all equipment to be used at the booth or concession, including grills, stoves, refrigerators, hot holding devices, sinks, etc.:

Will food be protected from customer contamination by sneeze guards?

Yes                      No

Will food be prepared at a back bar, away from customers?

Yes                      No

**FOOD FACILITY CONSTRUCTION**

Describe the construction of the temporary food facility:

Floor \_\_\_\_\_

Walls \_\_\_\_\_

Ceiling \_\_\_\_\_

Is the temporary food facility protected from dust contamination on three sides, top, and flooring?

Yes                      No    If not, describe procedure for protection of foods:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**TEMPORARY FOOD PERMITS FEE SCHEDULE - 2014**

Community Event Organizer / Individual Vendor	
14 days prior to event	\$81.00
8 to 13 days prior to event	\$101.00
2 to 7 days prior to event	\$122.00
Annual Temporary Food Permit (July 1 to June 30)	\$324.00

**Office Use Only**

**Permit fee paid:**

Yes                      No

Date \_\_\_\_\_ Receipt # \_\_\_\_\_ Check # \_\_\_\_\_

Cash \_\_\_\_\_ Credit Card \_\_\_\_\_ Amount \_\_\_\_\_

Approval to issue permit

Yes                      No                      Date \_\_\_\_\_ By \_\_\_\_\_