

County of Santa Cruz

DEPARTMENT OF PUBLIC WORKS

701 OCEAN STREET, ROOM 410, SANTA CRUZ, CA 95060-4070

MATT MACHADO
DEPUTY CAO
DIRECTOR OF PUBLIC WORKS

SPECIAL EVENT PERMIT APPLICATION PACKAGE

General Information

- 1. Applications must be completed and returned to the Santa Cruz County Department of Public Works, Attention: Event Permits, 701 Ocean Street, Room 410, Santa Cruz, California 95060. Applications must be complete and submitted to Public Works at least 90 days prior to the event date.
- 2. An event permit is required for all parade road closures, races, triathlons, running or walking events and all bicycle events that will mark or sign the County right-of-way or significantly impact the traveling public.
- 3. The applicant shall provide Comprehensive or Commercial General Liability Insurance coverage in the minimum amount of \$1,000,000 combined single limit, including coverage for: (a) bodily injury, (b) personal injury, (c) broad form property damage, (d) contractual liability and (e) cross-liability. All insurance forms must be submitted to Public Works no later than thirty (30) days prior to the event.
- 4. The applicant shall provide Automobile Liability Insurance for each vehicle used in the parade or bicycle event, including but not limited to owned, non-owned (e.g., not owned by the Applicant, its staff, employees, or volunteers), leased or hired vehicles, in the minimum amount of \$1,000,000 combined single limit per occurrence for bodily injury and property damage. All insurance forms must be submitted to Public Works no later than thirty (30) days prior to the event.
- 5. All required Automobile and Comprehensive Commercial Liability Insurance shall be endorsed to contain the following clause:
 - "The County of Santa Cruz, its officials, employees, agents and volunteers are added as an additional insured as respects to the operations and activities of, or on behalf of, the named insured performed under Permit with the County of Santa Cruz."
- 6. All required insurance policies shall be endorsed to contain the following clause:
 - "This insurance policy shall not be cancelled until after thirty (30) days prior written notice has been given to: County of Santa Cruz, Department of Public Works, Road Operations, Senior Civil Engineer, 701 Ocean Street, Room 410, Santa Cruz, CA 95060."
- 7. For all bicycle, walking and running events, turn by turn directions for all routes to be used shall be provided with the application, as well as 8 ½"x11" legible maps that are reproducible.

- 8. For all parades, races and triathlons, an 8 ½"x11" barricade plan and/or map showing streets to be closed and detours to be used shall be provided with the application. The plan or map must include legible street names and must be reproducible.
- 9. All special events require the review and approval of the Santa Cruz County Sheriff's Office and the California Highway Patrol no later than thirty (30) days prior to the event.
- 10. The County reserves the right to revoke the current parade or event permit and to refuse to issue future permits when any of the permit conditions approved by the Board of Supervisors are not met.
- 11. Parade and Event Permit Fees are as outlined in the Santa Cruz County Department of Public Works Service and Capital Improvement Fee Schedule. Fees are to be submitted to Public Works no later than ten (10) days prior to the event.
- 12. If there are any questions, please contact Event Permits at (831) 454-2160.

COUNTY OF SANTA CRUZ SPECIAL EVENT PERMIT APPLICATION Event Name: Bike Event / Parade / Triathlon / Running Event (Circle One) **Organization / Company Information (Permittee)** Name: Address: **Pre-Event Contact Information** Name: _____ Phone #: _____ Address: City: _____ State: _____ Zip: _____ Name of Insured Party Providing Insurance for the Event (if different from Organization or Company Information) Name: _____ Zip: City: _____ State: _____ **Event Details** Date(s) of Event: _____ Anticipated Attendance: _____ Event Start Time:_____ Event End Time: ______ Road Closure Start: Roads Opened By: **Event Day Contact Information** Name: _____ Phone #: _____ Cell Phone #: _____ E-Mail Address: **Event Description** Provide 8 1/2"x11" legible and reproducible route map and a list of all streets used. Date Submitted: ___

AGREEMENT TO RELEASE, INDEMNIFY AND HOLD THE COUNTY OF SANTA CRUZ HARMLESS

- A. In consideration of the County of Santa Cruz's (hereinafter known as "County") issuance of a parade, race, triathlon, running or walking event or bicycle event permit to Permittee, Permittee hereby agrees on behalf of itself, its agents and employees, to indemnify and hold harmless the County and the County's representatives, officers, agents, employees and volunteers (hereinafter jointly referred to as "Releasees") against all damage, loss, claims, suits or action of any kind or nature whatsoever, including attorney fees, arising from damage to real or personal property, or personal injuries to or death of any person, resulting or alleged to have resulted directly or indirectly, wholly or partially, from the parade or the event or from the conduct of the Permittee.
- B. Additionally, Permittee hereby agrees to indemnify Releasees against and hold Releasees harmless from all damage, loss, claims, suits or action of any kind whatsoever, including attorney fees, which Releasees may sustain or incur, in whole or in part, as a consequence of the Permittee's negligence, intentional misconduct, or failure to adhere to the Permit Conditions.
- C. Permittee further agrees not to assert any claim against, sue, attach the property of, or prosecute Releasees for injury or damage or any kind arising out of the application and issuance of the Permit, or the conduct of the parade or the event.

NAME (Printed):	
SIGNATURE:	
DATE:	

COUNTY OF SANTA CRUZ SPECIAL EVENT PERMIT WAIVER CERTIFICATION

Date Submitted:	Bike Event / Parade / Triathlon / Running Event (Circle One)
Organization / Company Information (F	Permittee)
Name:	
Address:	
Event Information	Event Date:
Event Title:	
Number of Registered Participants:	
Number of Waivers Received:	
	ve received and have on file the signed waivers from each particpant ipant was made aware of and agreed to the items as outlined in the
Signature:	
Typed Name:	
Title:	
Attach one signed example of participant	





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/7/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the

certificate fiolider ill fied of 3dcf				
PRODUCER		CONTACT NAME: Jane Doe CISR		
John Doe Insurance Assoc	ciates	PHONE (A/C, No, Ext): (999) 999-9999	FAX (A/C, No): (999) 9	99-9999
License #9999999		E-MAIL ADDRESS: janedoe@jdoeassociate	s.com	
Р О Вож 999		INSURER(S) AFFORDING COV	'ERAGE	NAIC #
Any City	CA 99999	INSURER A: The Insurance Compan	У	99999
INSURED		INSURER B:Another Insurance Con	mpany	88888
Your Company		INSURER C:		
1111 Any Street		INSURER D :		
		INSURER E :		
Any City CA	A 99999			
COVERAGES	CERTIFICATE NUMBER:	PEVISION	ON NUMBER:	· · · · · · · · · · · · · · · · · · ·

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR		TYPE OF INSURANCE		SUBR		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s
	х	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	\$ 1,000,000
A		CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000
	х	\$100,000 SIR	_	4	AAAA0000000000	12/1/2015	12/1/2016	MED EXP (Any one person)	\$ 50,000
			_	- N				PERSONAL & ADV INJURY	\$ 1,000,000
	GEN	I'L AGGREGATE LIMIT APPLIES PER:		'				GENERAL AGGREGATE	\$ 20,000,000
		POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$ 2,000,000
		OTHER:							\$
	AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
В	Х	ANY AUTO						BODILY INJURY (Per person)	\$
		ALL OWNED SCHEDULED AUTOS AUTOS			BBBB000000000	12/1/2015	12/1/2016	BODILY INJURY (Per accident)	\$
	x	HIRED AUTOS X NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$
									\$
		UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$
		EXCESS LIAB CLAIMS-MAI	E					AGGREGATE	\$
		DED RETENTION\$							\$
		RKERS COMPENSATION EMPLOYERS' LIABILITY						PER OTH- STATUTE ER	
	ANY	PROPRIETOR/PARTNER/EXECUTIVE CER/MEMBER EXCLUDED?	N _{N/A}					E.L. EACH ACCIDENT	\$
	(Man	idatory in NH)	-					E.L. DISEASE - EA EMPLOYEE	\$
	DES	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) The County of Santa Cruz, its officials, employees, agents and volunteers are named as additional insured as respects to the operations and activities, of, or on behalf of, the named insured performed under permit with the County of Santa Cruz on the general liability as required by written contract. This insurance policy shall not be cancelled until after thirty (30) days prior written notice has been given to: County of Santa Cruz, Department of Public Works, Road Operations, Senior Civil Engineer, 701 Ocean Street, Room 410, Santa Cruz, CA 95060.

CERTIFICATE HOLDER	CANOLLLATION
County of Santa Cruz Attn: Road Operations, Senior Civil Eng. 701 Ocean St, Room 410	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Santa Cruz, CA 95060-4070	AUTHORIZED REPRESENTATIVE
	Mark Smith

CANCELL ATION

Mark Smith III/CLH

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CERTIFICATE HOLDER

EXAMPLE

PERMITTEE 1234 Main Street Anytown, CA 00000

SUBJECT: ABC RUNNING RACE PERMIT Dear Committee Members: Pursuant to the Santa Cruz County Board of Supervisors' action dated_______, 20XX, permission to hold the ABC bicycle ride in the unincorporated areas of Santa Cruz County on , 20XX, is granted with the following conditions: RESPONSIBILITY OF PERMITTEE Race shall form at START LOCATION and begin at TIME a.m./p.m. The route in the 1. unincorporated area of the County shall be from ROUTE BEGINNING and follow the routes indicated on Attachments A, B, and C. Any change in the route must be approved by Public Works at least one week in advance of the event. 2. Race sponsors shall obtain separate permits for the portions of the race within 3. The PERMITTEE shall provide for wheelchair participants in the race.

- 4. The committee shall provide a vehicle that can pick up any runner or wheelchair participant who is required to drop out of the race. The vehicle shall be clearly identified as a EVENT vehicle.
- 5. The PERMITTEE shall furnish at its own expense all personnel, barricades, cones and incidentals to comply with all permit conditions.
- 6. Immediately following the race, a clean-up shall be made of the race route. The PERMITTEE clean-up crew shall be positioned in front of the marked California Highway Patrol tail car thereby reopening the road to traffic behind the California Highway Patrol tail car.

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- 7. Widespread disregard of the permit conditions will result in the California Highway Patrol recommending disapproval of future EVENT races.
- 8. The PERMITTEE shall exonerate, indemnify, defend, and hold harmless the County of Santa kind or nature which the County may sustain or incur or which may be imposed upon it for injury to or death of persons, or damage to property as a result of, arising out of, or in any manner connected with the performance under the terms of this Permit, excepting any liability arising out of the sole negligence of the County. Such indemnification includes any damage to the person(s), or property(ies) of the County of Santa Cruz and third persons.
- 9. The PERMITTEE, at its sole cost and expense, for the full term of this Permit (and any extensions thereof), shall obtain and maintain at minimum compliance with all of the following insurance coverage(s) and requirements. Such insurance coverage shall be primary coverage as respects County and any insurance or self-insurance maintained by County shall be excess of the PERMITTEE insurance coverage and shall not contribute to it.
 - a. Automobile Liability Insurance for each vehicle used in the performance of this Permit, including owned, non-owned (e.g. owned by the PERMITTEE employees), leased or hired vehicles, in the minimum amount of \$500,000.00 combined single limit per occurrence for bodily injury and property damage.
 - b. Comprehensive or Commercial General Liability Insurance coverage in the minimum amount of \$1,000,000.00 combined single limit, including coverage for: (a) bodily injury, (b) personal injury, (c) broad form property damage, (d) contractual liability, and (e) cross-liability.
- 10. All required Automobile and Comprehensive or Commercial General Liability Insurance shall be endorsed to contain the following clause:
 - "The County of Santa Cruz, its officials, employees, agents and volunteers are added as an additional insured as respects the operations and activities of, or on behalf of, the named insured performed under Permit with the County of Santa Cruz."
- 11. All required insurance policies shall be endorsed to contain the following clause:
 - "This insurance shall not be canceled until after thirty (30) days prior written notice has been given to: County of Santa Cruz, Department of Public Works, Road Operations, Senior Civil Engineer, 701 Ocean Street, Room 410, Santa Cruz, CA 95060"

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- 12. The PERMITTEE agrees to provide its insurance broker(s) with a full copy of these insurance provisions.
- 13. A CERTIFICATE OF INSURANCE(S) MUST BE FILED WITH THE DEPARTMENT OF PUBLIC WORKS AT LEAST THIRTY(30) DAYS PRIOR TO THE EVENT OR THIS PERMIT WILL BE CANCELED. All Certificates of Insurance shall be delivered or sent to: County of Santa Cruz, Department of Public Works, Road Operations, Senior Civil Engineer, 701 Ocean St., Room 410, Santa Cruz, CA 95060
- 14. The PERMITTEE shall provide verification that they have met with the California Highway Patrol and Santa Cruz County Sheriff's Office to coordinate final traffic control plans and enforcement. The PERMITTEE shall also provide verification that each agency has been supplied with an event route map. Verification shall be provided to the County of Santa Cruz no later than 30 days prior to the event.
- 15. A critique shall be held on ________, 20XX at _______am/pm at the Department of Public Works offices with the PERMITTEE representatives. The PERMITTEE shall arrange for representatives from the California Highway Patrol and the Santa Cruz County Sheriffs' Office to attend as well as other interested parties to discuss recommendations or required changes as determined.

TRAFFIC CONTROL

- 1. The PERMITTEE shall provide verification that they have met with the California Highway Patrol to coordinate final traffic control plans and supplied the California Highway Patrol with an event route map no later than 30 days prior to the event.

Sample Running Event Permit

- 3. Signs shall be placed at the beginning of all cross streets which intersect the race route indicating that the road is closed at the race route, including entrances to mobile home parks.
- 4. Provide sufficient traffic cones, barricades, barriers and signs as necessary to provide all road, lane, and parking lane closures which the will safely detour traffic. Placing of all traffic control devices to be at the direction and approval of the California Highway Patrol.
- 5. Access shall be provided to emergency vehicles at all times.

a.	One unit to monitor the race between
b.	One unit to monitor the race between
c.	One Sergeant to provide overall coordination between the California Highway Patrol unit and Santa Cruz and Capitola Police Department units.
1.	Provide instructions to the uniformed officers who will be on fixed post at the seven
	intersections outlined in Traffic Control, 2. a. through g.
	TRAFFIC CONTROL/MONITORS
1.	Each monitor shall be clearly identifiable to the participants through use of arm bands, T-shirts, etc.
2.	Monitors shall be positioned at each intersection entrance along the entire race course to
	prevent vehicle traffic from turning into the race course. Also, to maintain control of race participants and spectators.
3.	Each exit from the shall

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- 4. Monitors shall be instructed by the race sponsors in the following:
 - a. Assure that all spectators remain off the roadway and refrain from interfering with race participants or emergency vehicles.
 - b. Assure that vehicle traffic desiring to cross the race course be allowed to do so whenever it will not interfere with race participants.
 - 5. Additional race monitors are to be provided by race sponsors to safely monitor foot traffic (both racers and spectators) along the race segment adjacent to the ______.

RACE PARTICIPANTS

- 1. Each race participant must be advised and agree to the following:
 - a. Certain obstacles exist along the roadways which could cause injury to runners. Attention is hereby directed to the many sign posts, utilities, curbs, medians, guardrails, retaining walls, pavement markings, delineators, barricades, road bumps, etc.
 - b. Drop out of the race when the officer trailing the race determines that the participant has failed to maintain a minimum 15 minute per mile pace.
 - c. If directed to drop out of the race, the participant must thereafter obey all the rules applicable to pedestrians.
- 2. Advise all participants that runners reported (to race officials by enforcement officers or monitors) as being in violation of permit conditions will be automatically disqualified, and could result in enforcement action against the runner.

NOTIFICATION

- 1. Notification shall be made in a newspaper of general circulation via press release or paid advertisement giving the time, date, and names of all roads on the ride route no later than five (5) days prior to the event and no sooner than twenty (20) days prior to the event.
- 2. At least thirty (30) days before the event, PERMITTEE shall in writing notify local emergency services including fire, the Santa Cruz County Sheriff's Office, the California Highway Patrol, and the Metropolitan Transit District of the ride and ride routes.
- 3. Residents and businesses that have requested notice of rides shall be given written notice by the PERMITTEE of the time, date, and names of roads on the ride route no later than ten (10) days prior to the event.
- 4. Construction type warning signs shall be posted a minimum of five (5) days prior to the race day at key intersections as a further aid in notifying residents and motorists of street closures. The positioning of these warning signs shall not block safe sight distance nor access for vehicles, bicycles, and pedestrians.

Please sign below and return the original of this letter to our office.

	Tours truly,
KNC:rw Attachement:	Matt Machado, Deputy CAO, Director of Public Works
Map	

The terms and conditions of this permit are understood, and we agree to comply with all conditions.

	PERMITTEE
DATE:	By:
Sample Running Event Permit	Title: