

City of Sausalito Parks and Recreation Department 420 Litho Street · Sausalito CA 94965 415.289.4152

SPECIAL EVENT APPLICATION – HIGH IMPACT SPECIAL EVENT

Type of event:	
□ Run/Walk	☐ Bi or Triathlon ☐ Bike Tour/Race ☐ Street Festival ☐ Motion Picture
□ Parade	☐ Still Photography ☐ TV Ad. Shoot ☐ Other (specify) FINE AIL FESTIVAL
Event Title:	SAUSALITO ART FESTILIAL
Event Location:	MAKINGHIP PAKK ; THE BAY MODEL CENTER
Event Dates:	SEPT. 3-5, 2011 Total Anticipated Attendance: 30,000 Month - Date(s) - Year Participants: 1,000 Spectators: 25-30 kg
Actual "open to	the public" or "advertised" event hours: 10 MPM to 6 AM/M MONDAY
Will a staging/se	etup/assembly/construction location be required? Yes
If yes, be	egin date: August 29 Start time: 7:00 AMPM
Location	MARINSHIP PARK
Descript	ion of the scope of the setup/assembly work: Build up of Artist Tents,
	erage booths, and stages.
Will dismantling	g be required? Yes No
If yes, di	ismantle completion date: 5EPT. 8 Completion time: 4:00 AMPM
List any street(s and time of reop) requiring closure as a result of this event. Include street name(s), day, date and time of closing bening:
MA	KINSHIP WAY FROM PARK TO LIBERTY SHIP
7:	00 AM - 7:00 PM (OPEN FOR EMERGENCY ACCES)

SPONSORING ORGANIZATION AND APPLICANT INFORMATION

☐ Commercial (For Profit Organization) ■ Non-commercial (Non-Profit Organization)
Sponsoring Organization: SAUSALITO ART FESTIVAL FOUNDATION
Chief Officer of Organization (Name): DEMETLI RIZOS, EXECUTIVE DIRECTOR
Sponsoring Organizations Address: PO BOX 10 SAUSALTTO, CA 94966
Sponsoring Organizations Business Phone Number: (415) 332-3555
Applicant (Name): DEMETKI RIZOS
Applicant Address: NO BOX 10 SAUSALITO, CA 94966
Business Phone Number: (417) 332 - 3555 Evening Phone Number: ()
Cellular Phone Number: (415) 377-3625 FAX Number: (415) 331- 1340
List any professional event organizer or event service provider that is authorized to work on behalf of the Sponsoring Organization to produce this event.
Name:
Address: Phone Number: ()
Contact Person "ON SITE" day of event: DEMETRI RIZOS
(Note: This person must be in attendance for the duration of the event and immediately available to City Officials.)
Cellular Phone Number: (411) 377 - 3625 Pager Number: ()
Alternate Contact Person "ON SITE" day of event: PATILICK ROBERTS
Cellular Phone Number: (415) 84.5-1857 Pager Number: ()
REQUIRED: Obtain a written communication from the Chief Officer of the organization, which authorizes the applicant or professional event organizer to apply for the Special Event Permit on their behalf.
FEES · PROCEEDS · REPORTING
Yes No Is the organization a "Tax Exempt, non-profit" organization? If yes, obtain a copy of the IRS 501 C tax exemption letter providing proof and certifying the current tax exempt, non-profit status. IRS 501 C Letter obtained?
Are admissions, entry, and vendor participant fees required? If yes, explain: Admission fees: Vendor fees: Participant fees: Admissions, entry, and vendor participant fees required? If yes, explain: per person per person
Estimated gross receipts including tickets, product and sponsorship sales from this event?
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OVERALL EVENT DESCRIPTION

Yes	No □	Does the ev	ent invol	ve the sale	or use of alcoholic b	everages?	
i.		Will items or services be sold at the event? If yes , please describe:					
						MERCHANDISE	
		yes, attach	a detailed	map of you	g route of any kind a or proposed route, in oute and its impa	along streets, sidewalks or highways? If dicate the direction of travel, and provide act.	
X		Does this exstreets impa			venue site? If yes, at	tach a detailed site map showing all	
	ition to the lowing iten		quired ab	ove, attach	a diagram showing t	the overall layout and setup locations for	
() ()	Food Con	cession and/	r Food P	reparation.	d/or Beer Garden Ar Area(s). the event: FOCO	ceas. 300145 ALL COORDEN ATED BY	
Loc					ATED NEAR		
Will fo	ood be cook Gas	ted in the even				ify):	
	Portable a	nd/or Permai	nent Toile	et Facilities	:		
					thereat	One for every increment of 250 peoples 10% of total portable toilets.	
	• Number	of ADA Acc	essible to	oilets:	_ REQUIRED → I	0% of total portable toilets.	
	• Note: U facilities in	nless the app n the immedi	licant car ate area c	substantia of the event	te the availability of site, the above is req	both accessible and non-accessible toilet juired.	
Other	Areas of C	Consideratio	n:				
■ 通 歯 歯 歯 歯 歯 歯 歯 歯 歯 歯 歯 歯 歯 歯 歯 歯 歯 歯	Tables and Fencing, Education Generator Canopies of Booths, Education Scaffoldin Vehicles and Other Relationship Contrash Contras	Barriers and/o Locations and or Tent Local schibits, Displ g, Bleachers, and/or Trailer ated Event Co tainers and D of Trash Can	or Barrica ad/or Sountions ays or En Platform s omponent Dumpsters s: 150	des rce of Elect aclosures as, Stages, C as Not Cove ac (Higher nu	ricity Grandstands or Relatered Above mber placed near for	ed Structures od, beverage and entertainment areas) r every increment of 400 people)	

Describe the plan for clean-up and removal of waste and garbage during and after the event:

MAYORS BUE RIBBON GARBAGE COMMITTEE IS DIRECTED BY ROBIN SWEENEY. BAY CITLES MAINTAINS GARBAGE, TRUCK, RECYCLING, AND DUMPSTERS.

Note: It is the Event Organizers' responsibility to dispose of waste and garbage throughout the term of the event. Immediately upon conclusion of the event, the venue must be returned to a clean condition. The City does not provide street sweeping services for special events unless prior arrangements have been made.

SAFETY · SECURITY · ACCESSIBILITY

Privat	te Security:	
Yes	No □	Is there a Professional Security organization hired to handle security arrangements for this event? If yes , please list:
Securi	ty Compan	Y: PRAETORIAN EVENT SERVICES
		ation Address (City, State, Zip): 925 LAKEVILLE DILVE \$129 PETALUMA CA 9497Z
Securi	ty Director	(Name): MARK SOLLUM Phone: (417) 798-4082
Interi	or Venue (I	Private Security):
Bottle Metal How n	and can che Detectors? nany guards	Arson (Security Supervisor): The results of the entering? The Yes Indian No Indian N
Parkii	ng Lot Patı	rol (Private Security):
Securi	ty Compan	y: SAUSALITO ROTARY CLUB
Contac	et person (S	ecurity Supervisor): PATICICK LEE OK HERB WEINER
		ty guards patrolling the parking lot:
Securi	ty's main fi	nection in the lot:
Person	ıs with Dis	abilities:
What i	s the Acces	sibility Plan for access to the event by individuals with disabilities:
		IAY ENTER AT FRONT ENTINACE
REQU Access	IRED → Requireme	It is the applicant's responsibility to comply with all City, County, State and Federal Disability ents applicable to this event.

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SAUSALITO ART FESTIVAL SECURITY PLAN

LOCATION	TYPE	NUMBER	DUTIES
Gate 1	Paid	. 1	Regulate all traffic
			in and out of Debris
			Yard. Maintain Fire
			access.
Gate 2	Paid	1	Regulate all traffic
			in and out of Stage
		,	Area and Debris
			Yard. Maintain Fire
Ctaga	Dil		access.
Stage	Paid.	1	Monitor and
			maintain order
<u>«</u>			during popular stage
			acts. Act as roamer
· ·		*	and relief when not
			needed for primary
Pier and Shore	Volunteer	2	responsibility.
	Voxumoci	.2 .	Prevent
			unauthorized access
			to Festival via
Gate 4/Food Gate	Volunteer	1	shore- line and pier.
		1	Limit access to food
	1 1		storage area to
			authorized persons only.
Bay Model	Paid/Volunteer	1/1	Limit access from
	; }		the Bay Model to
# .		ř	Festival grounds.
			Volunteer will be
€	·		present to stamp
			hands of those
į			persons entering the
		ē.	Bay Model who will
,			wish to return to the
			Festival.
Security	Paid	1	Duties as needed
Libertyship and	Paid/Volunteer	1/1	Monitor and limit
Marinship			traffic to permit
		e	holders and patrons
			of local businesses

Volunteer Check-	Volunteer		
In/Gate 5	volunteer	1	Volunteer greeter,
In Cate 5			direct volunteers to
Gate 5A/Volunteer	7:1		· check in area.
Entry point	Paid	1	Limit access to
Entry point			verified volunteers.
		F	No access for
Coto 770 for	7.1171		bicycles, dogs.
Gate 7/Main Entrance	Paid/Volunteer	2/6	Paid security to
Entrance			monitor and
			maintain front gate
	• •	·	area and provide
			ticket booth
			security. Volunteer
			security to conduct
			bag checks and
	*	*	assist with lines as
Gate 8/Exit	TD-11/77 1		needed.
Gate 6/EXII	Paid/Volunteer	1/2	Paid security to act
			as loss prevention
	•		and monitor exit
			from Festival.
	¥		Volunteers assist
	<i>\$</i>		with loss prevention
Marinship North	Volunteer		and stamp hands.
THE PROPERTY OF THE PARTY OF TH	v Olumeer	1	Control intersection
			traffic and assist
			with lines as
Roamer	Volunteer		needed.
	Volunteel	1	Respond to assist
			other volunteer
			positions or requests
	5		as needed. Act as
5 .	,		relief for volunteer
			positions as needed.

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Lighting:
If this is a night event, state how the event and surrounding areas will be illuminated to ensure the safety of the participants and spectators. (If required, show a separate site map detailing streetlights, portable lights, and other illuminating devices.)
Top Productions/Stuart Rentals provide temporary fixed and
Top Productions/ Stuart Rentals provide temporary fixed and portable lighting to augment the existing lighting at Mannship Park and Bay Model Areas.
Mannship Park and Boy Model Areas.
Medical:
Indicate what arrangements have been made for providing First Aid Staffing and Equipment:
1 Ambulance(s) How provided?
Doctors (Names and Specialties):
Nurses (Names and Specialties):
Paramedics (How provided)?
3 Emergency Medical Technicians (How provided)? FED CR095/SMEMS
VEHICLE/BICYCLE PARKING PLAN · SHUTTLE PLAN · MITIGATION OF IMPACT
Note: Parking, traffic congestion, and environment pollution are all factors for concern with events. Consider and encourage the use of car pools, public transportation, and alternate modes of non-polluting transportation when in the planning stage of the event.
Parking and Shuttle plans (provide a detailed description, for events with over 1000 participants include bicycle parking plan):
please refer to attacked Materials

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Impact to residents, businesses, churches, etc. (Describe plan to notify those impacted): _____

please refer to attached materials

Disabled Parking (Describe the plan):

PARKING PLAN · SHUTTLE PLAN · MITIGATION OF IMPACT (continued)

SAUSALITO ART FESTIVAL SHUTTLE PLAN

Each year the Sausalito Art Festival operates a shuttle service to transport visitors from remote parking lots (see parking plan) and Downtown Sausalito, to the Art Festival site.

Shuttle Stop #	Location
1	Coloma Street @ MLK/Lot B Service
2	Coloma east of Bridgeway - D Lot Service
3	Coloma west of Gate 5 Rd D Lot Service
4	Gate 5 Rd. north of Harbor Dr D Lot
	Service
5	One Harbor Drive – C Lot Service
- 6	Marinship SAF stop – SAF Service
7	Anchor Street – Downtown Service

SAUSALITO ART FESTIVAL PARKING PLAN

Vehicle parking at the Sausalito Art Festival is a cooperative venture between the Sausalito Rotary Club and the Sausalito Art Festival. All parking is conducted with the full permission of the effected landowners and/or their agent.

Location	Use	Spaces
Manzantia Lot	Artist Parking	120
MLK Field	Public Parking	500
1 & 3 Harbor Drive		415
180 Harbor Drive		50 .
475. Gate 5 Road		75
Coloma St. Lots		120
3020-3030 Bway		50
Arquez		60
Marina Plaza		400
SWA		25
Bay Model/Berkell		25
Lab Lot		55
10/20 Libertyship	Public Portung	, ,
30/50 Libertyship		
		15
		75
	Manzantia Lot MLK Field 1 & 3 Harbor Drive 180 Harbor Drive 475 Gate 5 Road Coloma St. Lots 3020-3030 Bway Arquez Marina Plaza SWA Bay Model/Berkell Lab Lot 10/20 Libertyship 30/50 Libertyship	Manzantia Lot Artist Parking MLK Field Public Parking 1 & 3 Harbor Drive Public Parking 180 Harbor Drive Public Parking 475 Gate 5 Road Public Parking Coloma St. Lots Public Parking 3020-3030 Bway Public Parking Arquez Public Parking Marina Plaza Public Parking SWA ADA Accessible Bay Model/Berkell Entertainer Lite Lab Lot Limited/Army Corp 10/20 Libertyship Artist OF Dunphy Pk/Locust Oversize/Artist OF

${f ENTERTAINMENT \cdot ATTRACTIONS \cdot RELATED \; EVENT \; ACTIVITIES}$

Yes	No	Are there any musical entertainment features related to your event? If yes , state the number of stages, number of bands, and type of music. (Consider use of the "Concert Information Sheet")
		Number of Stages: 2 Number of Bands: 3 per day on earn Stage
		Type of Music: LOCK
3 7		Will sound amplification be used? Start time:
		Will sound checks be conducted prior to the event? Start time: AM/PM – Finish time: AM/PM
		Describe sound equipment that will be used?
		Will any inflatable, hot air balloons, or similar devices be used?
		Will fireworks, rockets, or other pyrotechnics be used?
		Will any signs, banners, decorations, or special lighting be used? Artist Booths, directional Signage, entry signage and stage bonners.
PRON	MOTION	· ADVERTISING · RELATED EVENT ACTIVITIES
Yes	No □	Will this event be promoted, advertised or marketed in any manner? If yes, describe:
		Strategic advertising compaign via radio, print, social media
		Will there be any live media coverage during your event? If yes, describe: Local Tu Status muited encouraged to attend.
INSU	RANCE 1	REQUIREMENTS
Insura	ance for t	he event is required before final permit approval.
Name	of Insura	nce Agency: HAAS ! WILFERSON
Agent	's Name:	CALOL MARTIN Business Phone: (800) 821-7703 SAY 83720 Policy Type: GENERAL LIABILITY
Policy	Number:	5A483720 Policy Type: GENERAL LIABILITY

Address (City, State, Zip) PO BOX 2946 5HAWNEE MISSION, EANSAS 66201

For final permit approval, the event organizers will need commercial general liability insurance that names "The City of Sausalito, its officers, employees, representatives, volunteers and agents" and any other public entities impacted by this event, as additional insured. Insurance must be maintained for the duration of the event.

CONCERT INFORMATION SHEET

	Name:	DEMETRI RITOS		
	Position:	EXECUTIVE DIRE	ECTOR	
	Organization:	9AUSALITO ATT F	ESTIVAL FO	UNDATION
	Date:	6-16-11		
	Generál Informati Day/Date:	SERT 3-5 7 11	11	()
	Name of event:	SAUSALITO AKT	PEST DUAL	(59th Annual)
	Location of event:	MARINS HIP P		
	Expected attendance	e: 30,000	as of (date)	
3	Concert fees range	from \$ to \$		
	Timeline: Parking lot opens:_	7:004M Ticket office on-site op	ens: 10:00AM _{Do}	
13-	Opening band #1:	Romantics, Measurmant Hats	Time: <u>IPM</u>	
19 -	Opening band #2:	Montrose, Edger Winfori	Time: 1PM	to 6PM
15-	Opening band #3:	the Smithereons, -	Time: PCUN	_to _ 5? M _
	Opening band #4:	tenny Loggins	Time:	_ to
	Main attraction:		Time:	to
	Parking lot closes a	it:		
	Parking Lot:			
	Parking location(s):	o fer Premium / \$\frac{1}{2}0 \tag{5} : ies in the lot before or after the event?		
	Organizatio	n:		1
				organited
		n:		1 0 by the
				Loton Club
		7 of		of Sovsalita

Has permission been obtained from management for these parties? Are keg permits required and/or are any issued? Any portable toilets in the lot? Yes No Has management allowed distribution of handbills in lot or on cars? Yes No Are any radio stations broadcasting in the lot? Yes No
If yes, which radio stations and where?
Are any TV stations doing a remote broadcast at the venue? Yes \(\sigma \) No If yes, which TV stations and where? Impromptu Coverage from local TV Stations
Alcohol:
What types of alcohol served (i.e. beer, wine): BEEK, WINE LIQUOK
Where served: Beverage boutns localed in Mannship Pork i. Bay Model Parking
Time last a last and the same 10:00 AM
Time alcohol service begins: 6:00 PM (5:00 PM ON MONDAY)
Is the alcohol served in pre-existing licensed locations? ☐ Yes ☐ No
If not, and is outdoors, is the area fenced? Yes No
Has ABC issued a permit/license? ■ Yes □ No
Seating (obtain an interior map): Festival seating (no seating in front of stage)? ☐ Yes ☐ No General Admission (no assigned seating)? ☐ Yes ☐ No Reserved? ☐ Yes ☐ No
Special Event Traffic Controllers:
Are traffic controllers needed for this event? ■ Yes □ No Is a traffic plan already in place? ■ Yes □ No
Billing Information:
Company/Organization: Sousalito AA Festivel Fandation
Contact Person: DEMERI RIZOS
Address: PO BOX 10 SAUSALTTO CA 94966
Phone number: (415) 332 - 3555 Fax phone number: (415) 331 - 1340
Letter of agreement on file? ■ Yes □ No