

Date Submitted: \_\_\_\_\_

Bastrop Hospitality & Downtown Department  
• 1408 B Chestnut Street • P. O. Box 427 • Bastrop, TX 78602 • (512) 332-8920

# Special Event Permit Application

Revised 1/12/2018 9:40 AM



Event Name: \_\_\_\_\_

Event date(s) and day(s): \_\_\_\_\_

Event Location(s): \_\_\_\_\_

Times open to public: \_\_\_\_\_

Reason for event: \_\_\_\_\_

Name of event organization: \_\_\_\_\_

Address of event organization: \_\_\_\_\_

Name of nonprofit partner, if applicable: \_\_\_\_\_

Address of nonprofit partner, if applicable: \_\_\_\_\_

**Event coordinator #1:** \_\_\_\_\_ Phone #: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**Event coordinator #2:** \_\_\_\_\_ Phone #: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**\*Fees and deposits cannot be waived and must accompany application. \***

### **Processing Fee:** (CASHIER'S CHECK OR MONEY ORDER FROM POST OFFICE ONLY)

- **\$100.00** for all **nonprofit** applicants
- **\$300.00** submitted for all applicants **without nonprofit status**
- No fee - City department as host or partner (i.e., Library, Parks & Rec, Main Street)
- Proof of nonprofit status for event organization or partner:  On file  Submitted \_\_\_\_\_
- Letter from nonprofit organization confirming partnership:  N/A  Submitted \_\_\_\_\_

### **Security Deposit Fee:** (refunded 4 to 6 weeks after event date if City property is clean and free of litter and damage after the event)

- **\$500.00** for **all applicants**
- On file from prior event(s)
- No fee - City department as host or partner (i.e., Library, Parks & Rec, Main Street)

### **Insurance** (\$1 million comprehensive general liability policy naming City and other affected entities as insured parties)

- Certificate submitted with app
- Certificate to be submitted when acquired
- On file from prior event(s)
- City coverage – city department as host or partner (i.e., Library, Parks & Rec, Main Street)

### **Campsite Hookup Fee (Mayfest Park only):** (approval required; **submitted with application**; unused portion refunded with permit security deposit)

- **\$35** per hookup site per day for water and electricity but no sewer hookup available
- # of sites \_\_\_\_\_ x \$35 x # of days (includes arrival and departure) \_\_\_\_\_ = \$ \_\_\_\_\_
- N/A

### **Checklist of items due upon submission of application** (\*\*insurance certificate due when issued to coordinator)

✓	Item	✓	Item	✓	Item	✓	Item
	Dated w/coordinator's signature		Nonprofit status letter		Itinerary & Map(s)		Fireworks permit & safety plan
	Processing fee & Security deposit		Nonprofit partnership letter		Sound & Banner Permit		TABC permit
	City Department – no fees		Insurance certificate **		CM Letter granting variance		Alcohol variance request letter

Date Submitted: \_\_\_\_\_

**Please show locations on map and details in attached Itinerary**

**Admission / Registration Fees:**  No  Yes (location): \_\_\_\_\_

**Alcohol:**  No  Yes (location, vendor) \_\_\_\_\_

- **TABC permit required if alcohol will be sold/consumed at event**
- **Request variance letter from City Manager for Council approval of sale/consumption of alcohol on city property: 512-332-8800**

**Animals:**  No  Yes (description, location, waste control) \_\_\_\_\_

**Attendance:** (anticipated #) \_\_\_\_\_

**Banner Permit:** (only nonprofit orgs. – permit required)  No OR  Banner Plaza  Colorado River Bridge poles

**Electrical Hot Checks/Plugs:**  No  Yes (location) \_\_\_\_\_

- **Must supply correct gauge-size extension cords and cord covers. Please call BP&L at 512-332-8900 for questions.**

**Emergency Services:** (location of First-Aid Station) \_\_\_\_\_

- **Notify Acadian Ambulance Service at 512-929-1662 or 512-632-8322**

**Fireworks Permit & Safety Plan:**  No  Yes \_\_\_\_\_

- **Applicant must contact City's Fire Chief at 512-332-8670, State Fire Marshal at 512-305-7932 and City Manager at 512-332-8800**

**Litter Control:**  Event crew  City crew  Extra dumpsters (location) \_\_\_\_\_

- **Applicant must contact Waste Connections at 512-282-3508 for extra dumpsters and be responsible for invoice**

**Parade:**  No  Yes (show route, street closures, details on map and itinerary)

**Parking:**  Streets & Public Parking lots  Event site  Shuttle (route details and location): \_\_\_\_\_

**Port-a-Cans:**  No OR (applicant's responsibility)  Handicap #\_\_  Hand-washing stations #\_\_  Regular #\_\_

**Security:**  No OR  Yes If Yes, please check:  Off-Duty Police Officers (\$40/hr. – 2 hr. minimum)

Private Security Company (Name: \_\_\_\_\_)  Event Volunteers

**Show Barn at Mayfest:**  No OR  Yes \_\_\_\_\_ **Applicant must contact Phyllis Mathison at 512-332-6001 for usage**

**Signage:** (applicant's responsibility)  No  Yes (remove within 24 hours after event) \_\_\_\_\_

**Sound Permit:**  No  Yes (describe location & amplified sound) \_\_\_\_\_

**Street Closures:** (show on map & Itinerary)  No  Yes (applicant must notify businesses/residents) \_\_\_\_\_

**Temporary Structures/Vehicles/Equipment:**  No OR (circle applicable, locate on map): Stages, tents, carnival, circus, inflatables, dunking booths, cars, tractors, other (describe) \_\_\_\_\_

**Vendors:**  No OR  Food (tax ID#, health permit 512- 332-7276)  Dry goods  Other \_\_\_\_\_

**Volunteers:**  No  Yes (t-shirts, badges...) \_\_\_\_\_

**Water:** (non-drinking: fish tanks, exhibits...)  No  Yes (explain): \_\_\_\_\_

**I, the undersigned Applicant, hereby agree to indemnify and hold harmless the City of Bastrop, its officers, employees, agents, and representatives against all claims of liability and causes of action resulting from injury or damage to persons or property arising out of the Special Event.**

**Applicant Signature**

**Date**

Date Submitted: \_\_\_\_\_

# Special Event Itinerary

01/09/2018 3:03 PM



**Please mark "N/A" if not applicable ● If more days are needed, copy this page while still blank.**

**Day # \_\_\_\_\_:** Date of Event: \_\_\_\_\_  
Time open to public: \_\_\_\_\_ Time closed to public: \_\_\_\_\_

## Vendors/Activities

*(Describe--food, merchandise, groups/organizations/businesses with informational flyers/pamphlets, bands, games, etc.)*

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Vendors/Activities Location:

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Please list vendor/activities set-up time, street closures and times, the enter areas for the vendor/activities:

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Please list vendor/activities break down time, time streets re-open, and the exit areas for the vendor/activities.

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Date Submitted: \_\_\_\_\_

**Parade:**

Entire Parade route (**must include maps**):

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Please include the following in the Parade description:

- Set-up/Clean-up Time
- Street – closures/re-open and times
- Start & End Time

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**Notes:**

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Date Submitted: \_\_\_\_\_

Date Dropped Off: \_\_\_\_\_

Dropped Off By: \_\_\_\_\_

Installed: \_\_\_\_\_

Removed: \_\_\_\_\_

Date Picked Up: \_\_\_\_\_

Picked Up By: \_\_\_\_\_



# Banner Permit Application for Banner Plaza

Greenbelt on west side of Old Iron Bridge

**ONLY for nonprofit organizations issued Special Event Permits**

Event Name: \_\_\_\_\_

Event Date(s): \_\_\_\_\_

Event Location(s): \_\_\_\_\_

Reason for Event: \_\_\_\_\_

Name of event organization: \_\_\_\_\_

Address of event organization: \_\_\_\_\_

**Event coordinator #1:** \_\_\_\_\_ Phone #: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**Event coordinator #2:** \_\_\_\_\_ Phone #: \_\_\_\_\_

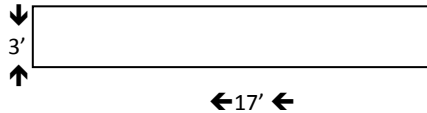
E-mail address: \_\_\_\_\_

Banner must be **delivered** no later than the **Friday before the Monday** it is to be hung.

Please bring banner in a container with event name, contact name, and number written on it.

Banner will hang for no more than **3 weeks prior** to date of event. If there are more than 4 banners submitted to hang for the same time, the timeframe will be shortened.

Banners must measure **17 feet in width** and **3 feet in height**.



Banners made of **vinyl** must have numerous slits to prevent wind tears.

Banner must have one **grommets/eyelets** (metal reinforced holes) on each corner and at least one in the middle of both sides, as well as spaced equally across the top and bottom of the banner.

Date Submitted: \_\_\_\_\_

# Sound Permit Application

Revised 1/9/2018 3:06 PM



Permits are required for use of any and all amplified sound within the city limits by other than normal household portable stereo equipment, occurring on private (*not City*) and public residential and non-residential property. Permits are valid only for the duration of the event named in this application.

A permit for events held in **residential areas** is valid between the hours of **8:00 a.m. and 10:00 p.m.**

A permit for events held in **non-residential areas** is valid between the hours of **8:00 a.m. and midnight (12:00 a.m.)**.

The volume of the sound amplified shall not exceed **85 dB(A) (daytime)** or **80 dB(A) (night time)** when measured from the nearest receiving property. The Police Department can request the permit holder to turn down or turn off the amplified sound if there are complaints.

## YOU MUST HAVE THIS PERMIT IN YOUR POSSESSION AT THE TIME OF THE EVENT!

Name of event/rental/activity: \_\_\_\_\_

Date(s) and day(s): \_\_\_\_\_

Location(s): \_\_\_\_\_

Reason for event/rental/activity: \_\_\_\_\_

Name of event organization or responsible party: \_\_\_\_\_

Address of event organization or responsible party: \_\_\_\_\_

**Event/Party coordinator #1:** \_\_\_\_\_ Phone #: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**Event/Party coordinator #2:** \_\_\_\_\_ Phone #: \_\_\_\_\_

E-mail address: \_\_\_\_\_

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Location(s) of amplified sound equipment: \_\_\_\_\_

Start time (*AM or PM*) : \_\_\_\_\_ End time (*AM or PM*): \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**Signature of Applicant**

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**Date**



## CITY OF BASTROP APPLICATION TO OPERATE GOLF CART

### APPLICANT INFORMATION

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

State Driver License No.: \_\_\_\_\_

### GOLF CART INFORMATION

Address Where Golf Cart is stored:

Street Address \_\_\_\_\_

Apartment Number \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### REASON FOR GOLF CART USE

Specific event necessitating the use of the golf cart.

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

Date of Event \_\_\_\_\_ (application must be submitted within ten (10) days of event.)

### GOLF CART IDENTIFICATION

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_

Color \_\_\_\_\_

Vehicle Identification/Serial Number \_\_\_\_\_

All operators are required to be licensed pursuant to Texas Transportation Code Sections 521.001(3) and 521.021, as amended and that all equipment required herein is installed and will be kept operational during the permit period. The registration permit holder, as well as any user of the golf cart, shall indemnify and hold harmless the City of Bastrop for any and all civil liability associated with said registration and waives any all rights to sue or allow subrogation by an insurance company.

\_\_\_\_\_  
Signature

State of Texas

County of \_\_\_\_\_

Sworn to and subscribed before me on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by  
\_\_\_\_\_.

**SEAL**

\_\_\_\_\_  
Notary Public's Signature



## **GOLF CART**

1. To operate a golf cart on any authorized public streets, parking areas and traffic ways the person must be issued a valid registration permit.
2. Application for a permit authorizing the operation of a golf cart shall be made in writing and filed with the City Manager or his/her designee by a person who owns, leases, or otherwise uses a golf cart.
3. Registration permit fee of \$20 must be paid by applicant prior to registration decal being issued.
4. The registration permit decal shall be affixed on the left side of the golf cart, it may not be damaged, altered, obstructed or otherwise made illegible and may only be placed upon the golf cart for which it was issued. The driver of a golf cart on public street, if permitted, must have a valid driver's license and comply with all applicable federal, state and local laws and ordinances.
5. Except for public safety personnel, golf carts shall not be operated on any sidewalk, pedestrian walkway, jogging path, park trail or any location normally used for pedestrian traffic.
6. The number of occupants in a golf cart shall be limited to the number of persons for whom factory seating is installed and provided on the golf cart.
7. No person may stand or ride in the lap of the driver and/or other passenger of a golf cart while it is moving.
8. Owners are fully liable and accountable for the action of any individual that they provide permission to operate and drive said golf cart, both on personal and/or any authorized public streets, parking areas and traffic ways. This described liability responsibility especially applies to personal injuries (including death) or property damage resulting from golf cart drivers who are minors under the age of twenty-one (21) with or without a current and valid driver's license.
9. Registration permits/decal must include the dates and times the operation of the golf cart is allowed. A registration permit may not be valid for longer than seven (7) calendar days. The registration permit/decal is only valid for the dates and time periods listed on the permit/decal.
10. Lost or stolen permit/decal are the responsibility of the owner. If no record can be found of a previous application, or the receipt of a permit/decal, the city may direct the applicant to reapply, and also resubmit any and all fees necessary before a replacement permit/decal is issued.

# Special Event Review Committee Signatures



**The Community Events & Recreation Specialist will obtain the following applicable signatures. In order to expedite the process, a designee may sign for any of the following in his or her absence.**

**Meeting:** \_\_\_\_\_

\_\_\_\_\_  
**Parks Department** **Date**

\_\_\_\_\_  
**Hospitality & Downtown Department** **Date**

\_\_\_\_\_  
**Police Department** **Date**

\_\_\_\_\_  
**Other:** \_\_\_\_\_ **Date**

**Hospitality & Downtown Department**  
1408 B Chestnut St. *physical address*  
P. O. Box 427 *mailing address*  
Bastrop, TX 78602  
  
(512) 332-8920 Victoria Psencik

Sarah O'Brien, Hospitality & Downtown Director  
Victoria Psencik, Community, Events & Recreation Specialist  
Matt Wagner, Administrative Police Officer  
David Junek, Parks & Rec Superintendent  
Tim Goetz, BP&L Superintendent  
Ann Franklin, City Secretary  
Launa Eckert, Planning & Development

512-308-8046  
512-985-7016  
512-848-6930  
512-718-3766  
512-581-8781  
512-332-8800  
512-332-8840



# City of Bastrop - Health & Safety Plan

## Outdoor Event Gatherings over 10

Per the City of Bastrop’s Phased Reopening Plan, each event organizer hosting an event under a Special Event Permit and/or hosting an outdoor event with 10 or more attendees in the City limits must develop a written Health and Safety Plan to be reviewed by the Emergency Management Coordinator and Mayor for approval. The goal of the Plan is to communicate the additional safeguards being put in place by the event organizer to prevent the spread of COVID-19 within our community.

Please fill out and submit the Plan to Victoria Psencik at [vpsencik@cityofbastrop.org](mailto:vpsencik@cityofbastrop.org).

If the Health and Safety Plan is approved, the event organizer will receive a signed copy that must be present at the time of the event.

**\*CITY USE ONLY\***

Submitted Date: \_\_\_\_\_

Event Gathering Date: \_\_\_\_\_

**Emergency Management Coordinator**

RECOMMEND

NOT RECOMMEND

\_\_\_\_\_ Initial

Notes:

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

**APPROVED:**

\_\_\_\_\_  
Connie B. Schroeder, Mayor

\_\_\_\_\_  
Date

**1. EVENT STAFF & VOLUNTEERS**

- a. All event staff and volunteers will be required to wear face covering/mask when interacting with the public and/or preparing food and beverages.

\_\_\_\_\_  
**Initial**

- b. Please perform a health screening including temperature checks on all event staff and volunteers before the start of the event and before any new staff/volunteer begins a shift. If any event staff member or volunteer is feeling sick or experiencing any of the COVID-19 symptoms, please send them home.

\_\_\_\_\_  
**Initial**

- c. **Please provide in detail below the process of how all the above precautionary measures will be enforced and communicated to the event staff and volunteers.**

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**2. EVENT ATTENDEES**

- a. All event attendees will be required to wear face covering/mask when social distancing of six (6) feet cannot be maintained.

\_\_\_\_\_  
**Initial**

- b. **Please provide in detail below how it will be communicated to the event attendees about wearing a face covering/mask.**

- c. Face covering/mask exemptions:

- i. Any person younger than 10 years old
- ii. Any person with a medical condition or disability that prevents the wearing of a face covering
- iii. Any person that is consuming food and/or beverage
- iv. Any person participating in any kind of physical activity or exercise

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**3. EVENT ACTIVITIES**

**a. Please provide in detail all activities that will be taking place during the time of the event.**

Please provide your answer on the lines below. (Examples – bounce house, petting zoo, race, kids’ games, etc.)

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**4. SANITATION**

**a. All frequently touched surfaces must be sanitized often to ensure the limit of COVID-19 exposure.**

**b. Adequate amount of hand sanitizing stations must be provided at the event.**

**Please provide a sanitation plan on the lines below to address (a) and (b).**

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**5. VENDORS (FOOD & BEVERAGE)**

- a. All vendors will be required to wear face covering/mask when interacting with the public and/or preparing food and beverages.

\_\_\_\_\_  
**Initial**

- b. Will food and/or beverages be sold/handed out at this event?      **YES**      **NO**

- c. Please list below all the food and beverage vendors that will be at the event.

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- d. Please provide in detail below how all the event precautionary measures will be enforced and communicated to the vendors.      Restaurant Checklist – [www.open.texas.gov](http://www.open.texas.gov)

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**6. VENDORS (NON-FOOD)**

- a. All vendors will be required to wear face covering/mask when interacting with the public.

\_\_\_\_\_  
**Initial**

- b. Please list below all the non-food vendors that will be at the event.

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- c. Please provide in detail below how all the event precautionary measures will be enforced and communicated to the vendors.

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**7. PORTABLE TOILETS**

- a. If the event is having portable toilets, a sanitation plan needs to be in place to ensure proper and frequent sanitation is being completed. **Please provide in detail the sanitation plan for portable toilets.**

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**8. RISK MANAGEMENT**

It is imperative that there is a process in place for risk management if the event organizer gets notification of a positive COVID-19 case within staff, volunteers, vendors, and/or attendees following the rental gathering.

- a. **If event organizer/staff, volunteers, vendors, and/or attendees tests positive for COVID-19, what will be the process for notifying the Bastrop County Health Authority ([desmar.walkes@co.bastrop.tx.us](mailto:desmar.walkes@co.bastrop.tx.us))?** Please provide your answer on the lines below.

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**9. OTHER**

Please use this area to provide any additional details about your Special Event’s Health and Safety Plan, including anything to address specific industry guidelines as found on Open Texas website.

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For more information and recommendations – visit Governor Abbott’s Open Texas website at [www.open.texas.gov](http://www.open.texas.gov)

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**Signature**

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**Date**