

Dear Event Producer:

Thank you for choosing to host your event with Coconino County Parks & Recreation. Please read the following information very carefully and supply answers to all required questions. Submitting this application does not guarantee dates or use of facility. Full Payment will be required after a contract is issued. **The only payment due with the application is the \$25 application fee.** Do not submit deposit, rental, and service payment with your application.

Special Event Applications are processed in the order received. Preference is given to organizations that are in "Good Standing" (see [Special Events Rules and Procedures](#) document) and are an established annual event.

Applications must be submitted by the deadline according to the Event Tier and will not be reviewed after that deadline. See [Special Events Rules and Procedures](#) document for more information on Event Levels.

- Level 1 – The application must be received at least *60 days* prior to the first day of the Use Period.
- Level 2 – The application must be received at least *45 days* prior to the first day of the Use Period.
- Level 3 – The application must be received at least *15 days* prior to the first day of the Use Period.

Application Packet Checklist – **ALL ITEMS ARE REQUIRED.** If any portion of the application is incomplete the proposed event **WILL NOT** be considered until a complete application is submitted.

- Special Event Application
- \$25 Application Fee – Checks payable to 'Coconino County Parks & Recreation'
- DRAFT Event Site Plan – An illustrative, detailed, and descriptive map of the event area, showing the locations of all items addressed in the Special Event Application. The site plan can (and likely will) change as the event gets closer.

[Special Event Rules and Procedures](#), [All Park Rules and Policies](#), the [Special Event Fee Schedule](#), and other Special Event information is available at coconino.az.gov/parkevents.

Please e-mail events@coconino.az.gov or call (928) 679 8000 with any questions regarding Special Event Facility Rentals.

Sincerely,

Coconino County Parks & Recreation

SPECIAL EVENT APPLICATION

PEAKS VIEW COUNTY PARK

Event Management Representative Information

Representative must be an employee, board member, or authorized with a letter on entity letterhead signed by an authorized employee or board member at the time of application. Applications will not be accepted without this authorization.

The representative will be the only individual receiving communication from the Special Events Coordinator until the entity provides a letter stating a change.

<i>Items marked with an asterisk (*) are required</i>			
First Name*		Last Name*	
Street Address*		Apartment/Unit Number	City & State* Zip Code*
Home Phone*	Cell Phone*	Do you agree to receive Text Message Alerts?*	Cell Phone Service Provider (For Text Message Alerts)
		<input type="radio"/> Yes <input type="radio"/> No	
E-mail Address*		Do you agree to receive promotional e-mails?*	Gender/Preferred Pronouns*
		<input type="radio"/> Yes <input type="radio"/> No	
May we contact you regarding opportunities to volunteer?*		How did you hear about us? (Flyer, Website, Word of Mouth, etc.)	
<input type="radio"/> Yes <input type="radio"/> No			
Would You Like Your Event to be Included on Our Online Calendar of Events, located at coconino.az.gov/parks?*		If Yes, Please Fill Out the Following:	
<input type="radio"/> Yes <input type="radio"/> No		Public Contact Name: _____	
		Public Phone Number: _____	
		Event/Company Website: _____	

Organization Information (if applicable)

<i>Items marked with an asterisk (*) are required if renting as part of an organization</i>			
Organization Name*			
Organization Address*		Unit Number	City & State* Zip Code*
Organization Phone Number*	Additional Phone	Tax ID Number*	Event Website (If Different)
Type of Organization*		Organization Website	
<input type="radio"/> Commercial <input type="radio"/> Non-Profit**			

**A copy of your non-profit status is required to receive non-profit pricing.

General Event Information (All Fields REQUIRED – put N/A if Not Applicable)

Event Name (i.e., Coconino County Fair)	Estimated Attendance (Include participants, attendees, vendors, staff, etc. for duration of event)
Anticipated Peak Event Attendance Day: _____ Time: _____ Total Attendance: _____	Attendance/Registration Cap (If applicable, please state your cap and how you will communicate that to attendees.)
Move-In Date(s)	Move-In Time(s)
Event Date(s)	Event Time(s)
Move-Out Date(s)	Move-Out Time(s)
Who is Coming to Your Event? <input type="radio"/> Private (Invite Only) <input type="radio"/> Open to Public	Type of Event (Check All That Apply) <input type="checkbox"/> Bicycle Event <input type="checkbox"/> Company Picnic/Event <input type="checkbox"/> Concert <input type="checkbox"/> Family/Private Gathering <input type="checkbox"/> Festival <input type="checkbox"/> Livestock Show <input type="checkbox"/> Merchandise/Service Sale <input type="checkbox"/> Walk/Run Event <input type="checkbox"/> Wedding/Reception <input type="checkbox"/> Other, Enter Below _____ _____
Is This Event New or Returning to Fort Tuthill County Park? <input type="radio"/> New <input type="radio"/> Returning In What Year Was this Event Last Hosted at Fort Tuthill County Park? _____	
Have you held this event elsewhere before? If so, where and when? <input type="radio"/> Yes Where: _____ When: _____ <input type="radio"/> No	
Describe Your Event in Detail. Use an Extra Sheet of Paper as Needed.	

General Event Information Continued

Select, Describe, and Provide an *Estimated* Quantity for **All Event Fees** That Apply. Use an additional sheet of paper if there is not enough room below.

Admission

Charge Description: _____ Amount: \$ _____ EST QTY: _____

Charge Description: _____ Amount: \$ _____ EST QTY: _____

Charge Description: _____ Amount: \$ _____ EST QTY: _____

Registration/Participation

Charge Description: _____ Amount: \$ _____ EST QTY: _____

Charge Description: _____ Amount: \$ _____ EST QTY: _____

Parking

Charge Description: _____ Amount: \$ _____ EST QTY: _____

Charge Description: _____ Amount: \$ _____ EST QTY: _____

Will There be **Amplified Sound**?

- Yes
 No

Description of **Amplified Sound** (Include time for sound check and performances, scope and scale, power & space needs, etc.)

Will the Event Include **Vendors Selling Merchandise and/or Services**?

- Yes
 No

QTY: _____

Describe Your Plan for Coordinating **Vendors** for **Set-Up, Tear-Down, Unloading, Parking**, etc.

Will the Event Include **Vendors Selling Food**?

- Yes
 No

Will You **Give Away** Food at Your Event?

- Yes
 No

What **Kind of Food** Will You Have?

- Food Trucks QTY: _____
 Other Food Stands QTY: _____
 Catering Company: _____

Coconino County Health & Human Services requires the Event Producer to fill out a 'Temporary Event Coordinator Application'. See <https://www.coconino.az.gov/522/Informational-Packets-Applications> for more information.

Will Vendors Need Utilities?

- Yes
 No

How Many Vendors Need Utilities? Please note that utilities are limited at this park.

QTY 110v/20 Amp: _____ QTY 220v/50 Amp: _____
 QTY Water: _____ QTY Grey Water: _____

Describe Your Plan for Containing and Disposing of Grease, Oils, Ashes, and Other Food Waste.

Will There Be Alcohol Consumption? **Glass Containers Are Not Permitted in Any Coconino County Park.**

Base General Liability Insurance coverage that names Coconino County as additional insured (as described in the Rules & Procedures) is required for all events.

Yes, event will serve alcohol at **no cost** and is **free to attend.**

(No additional license or coverage is required as long as *no payment or tips are exchanged.*)

Yes, attendees will **provide their own** alcohol.

(No additional license or coverage is required)

Yes, event will serve alcohol at **no cost** but there will be a **fee to attend.**

(Retail liquor liability insurance coverage with endorsement of Coconino County as additional insured is *required* if there is an event fee to enter or participate.)

Yes, event will **sell** alcohol.

(Event Producer must obtain Series 15 Liquor License and provide retail liquor liability insurance coverage with endorsement of Coconino County as additional insured.)

No, alcohol will not be consumed.

Describe Your **Plan for Coordinating Alcohol Sales or Distribution** During Your Event. Include How Event Attendees of Legal Drinking Age (21 Years or Older) will be Identified.

Logistical Information (All Fields **REQUIRED**)

Will You be Using **Pop-Up Tents**?

Yes

No

QTY: _____

Sizes: _____

If Yes, are You **Renting the Tents**?

Yes

No

Company: _____

Delivery Date: _____

Removal Date: _____

Will You be Using **Inflatables/Rock Walls/Interactive Equipment**?

Yes

No

Company: _____

Delivery Date: _____

Removal Date: _____

Will You be Using **Live Animal Exhibits (e.g., a petting zoo, livestock show, etc.)**? Note that Live Animal Exhibits are permitted only in specific facilities. Inquire with Events Coordinator.

Yes

No

Company: _____

Delivery Date: _____

Removal Date: _____

Describe Your Plan for **Ensuring Tents, Inflatables/Rock Walls/Interactive Equipment, etc. are Anchored Appropriately (Staking is NOT Permitted in Our Park System).**

<p>Will You be Using Portable Restrooms and/or Hand Washing Stations?</p> <p><input type="radio"/> Yes <input type="radio"/> No</p> <p>QTY ADA: _____ QTY Standard: _____ QTY Hand Wash: _____</p> <p>Company: _____ Delivery Date: _____ Removal Date: _____ Servicing Schedule: _____</p>	<p>Will You be Using Trash and/or Recycling Dumpsters?</p> <p><input type="radio"/> Yes <input type="radio"/> No, I will pack my trash out after the event.</p> <p>QTY Trash Dumpster: _____ SIZE: _____ QTY Recycling Dumpster: _____ SIZE: _____</p> <p>Company: _____ Delivery Date: _____ Removal Date: _____</p>	
<p>Describe Your Plan for Trash Collection During Your Event & Removal from the Premises. How Will You Address Nearby Areas Impacted by Your Event?</p> 		
<p>A Traffic Control Plan is mandatory for any event altering the flow of traffic in and around the park and may be required for events of 500 or more attendees. Will you alter the flow of traffic and/or have over 500 attendees?</p> <p><input type="radio"/> Yes (Please supply a map with additional information. A Traffic Control Plan may be required. Events Coordinator will advise.) <input type="radio"/> No</p> <p>Company: _____ Delivery Date & Time: _____ Removal Date & Time: _____</p>	<p>What is Your Plan for Attendee Parking?</p> 	<p>What is Your Plan for Other (vendors, staff, volunteers, etc.) Parking?</p>
<p>Will You be Using Off-Duty Law Enforcement Officers?</p> <p><input type="radio"/> Yes <input type="radio"/> No</p> <p>QTY: _____ Company: _____ Purpose: _____ Start Date & Time: _____ End Date & Time: _____</p>	<p>Will You Be Using Private Security?</p> <p><input type="radio"/> Yes <input type="radio"/> No</p> <p>QTY: _____ Company: _____ Purpose: _____ Start Date & Time: _____ End Date & Time: _____</p>	

Please provide us with your Medical Plan below or on another sheet of paper. Your plan should include, but not be limited to: <ul style="list-style-type: none"> • A map of the event with locations of first aid stations and other staging locations • Communications plan for emergencies • The number of first aid and/or CPR certified staff that will be onsite and when • The schedule of ambulance standby See the Special Events Rules and Procedures document for more information.	Do you Plan to Use Signage and/or Banners for Your Event? <input type="radio"/> Yes <input type="radio"/> No
	What is Your Plan for Signage/Banner Placement ? Include Locations and Dates on Event Site Plan.

Facility Use Information – Check All Facilities You’d Like to Utilize

Facility & Description	Daily Rental Fee For-Profit Organizations	Daily Rental Fee Non-Profit Organizations
Event Centers Requests for Event Center use is dependent on CCPR Director approval. Access to private operations and park amenities, such as playgrounds must remain open to the public.		
<input type="checkbox"/> Peaks View County Park Includes Fremont, Agassiz, and Humphrey Ramadas, Athletic Field, and access to restrooms. Walkways, trails, playground, and restrooms shall remain open to the public. Parking lot is to be used for parking and not an event activity area.	\$439.00	\$329.00

Facility & Description	Daily Rental Fee For-Profit Organizations	Daily Rental Fee Non-Profit Organizations
Trails & Fields All facilities include 1 trash barrel with 1 liner and use of parking lots for parking purposes. Additional barrels & liners are available to rent.		
<input type="checkbox"/> Equestrian Trail Includes access to restrooms.	\$96.00	\$72.00
<input type="checkbox"/> Exercise Trail Includes access to restrooms.	\$97.00	\$73.00
<input type="checkbox"/> Athletic Field There is a \$250 deposit for this facility.	\$10.00 / hour Weekday \$15.00 / hour Weekend	\$7.50 / hour Weekday \$11.25 / hour Weekend

Facility & Description	Weekday Rental	Primetime/Holiday Rental
Ramada rental may be required if event footprint inhibits the rental of the ramada to another party. Ramadas used for Special Events are charged a \$100 deposit for each ramada.		
<input type="checkbox"/> Humphrey Ramada Capacity of 125 people. Includes 8 picnic tables, 3 charcoal grills, and access to nearby restrooms, a playground, and athletic field.	\$76.00	\$114.00
<input type="checkbox"/> Agassiz Ramada Capacity of 40 people. Includes 2 picnic tables, 1 charcoal grill, and access to nearby restrooms, a playground, and athletic field.	\$46.00	\$69.00
<input type="checkbox"/> Fremont Ramada Capacity of 40 people. Includes 2 picnic tables, 1 charcoal grill, and access to nearby restrooms, a playground, and athletic field.	\$46.00	\$69.00

Additional Special Event Fees, Equipment, & Services

Equipment, Service, and/or Fee	Fee	Unit
Check All That Apply & Include Quantity as Applicable		
<small>Equipment includes delivery and removal. Staff will stage equipment in agreed-upon area – they will not set up for your event.</small>		
<input checked="" type="checkbox"/> Special Event Application Fee (Required) <small>Non-refundable fee charged per Special Event Application.</small>	\$25.00	Per Application
<input type="checkbox"/> Use Impact Fee <small>Paid at end of event. Required for any event charging admission, entry, parking or registration fees.</small>	\$0.50 if fee is \$10.00 or less \$1.00 if fee is \$11.00 or more	Per Person Per Fee
<input type="checkbox"/> Alcohol Beverage Sales <small>Must obtain Series 15 Special Event Liquor License</small>	30% of Gross Sales	Per Event
<input type="checkbox"/> Vendor Permit w/ Utilities QTY: _____ <small>Utilities include 110v/20 amp access and water hook-ups.</small>	\$25.00	Per 3-Day Period
<input type="checkbox"/> Vendor Permit w/o Utilities QTY: _____	\$15.00	Per 3-Day Period
<input type="checkbox"/> Group Vendor Permit w/ Utilities <small>Utilities include 110v/20 amp access and water hook-ups.</small>	\$220.00	Per 3-Day Period
<input type="checkbox"/> Folding Chair QTY: _____ <small>195 chairs available</small>	\$2.00	Per Chair Per 3-Day Period
<input type="checkbox"/> Folding Table QTY: _____ <small>15 - 8', 5 - 6', & 25 - 60" round available</small>	\$10.00	Per Table Per 3-Day Period
<input type="checkbox"/> Trash Can Liner Case QTY: _____ <small>100 liners per case.</small>	\$60.00	Per Case
<input type="checkbox"/> Spider Box QTY: _____ <small>230 Volt w/ six 110v outlets.</small>	\$18.00	Per Spider Box Per Day
<input type="checkbox"/> 50' Electrical Cord QTY: _____	\$12.00	Per Cord Per Day
<input type="checkbox"/> 100' Electrical Cord QTY: _____	\$25.00	Per Cord Per Day
<input type="checkbox"/> 3' Electrical Cord Ramp QTY: _____	\$8.00	Per Ramp Per Day
<input type="checkbox"/> Ticket Booth QTY: _____ <small>Includes 2 windows per booth, electrical connection, air conditioner, microphone/speaker, and 2 cash drawers.</small>	\$30.00	Per Booth Per Event
<input type="checkbox"/> Smoking Genie QTY: _____	\$7.00	Per Genie Per 3-Day Period
<input type="checkbox"/> PA System <small>Includes set-up.</small>	\$25.00	Per Day
<input type="checkbox"/> Picnic Table Relocation or Removal	\$22.00	Per Table Per 3-Day Period
<input type="checkbox"/> Small Bleacher Relocation <small>Single-Level Bleacher</small>	\$50.00	Per Bleacher Per 3-Day Period
<input type="checkbox"/> Large Bleacher Relocation <small>Double-Level Bleacher</small>	\$200.00	Per Bleacher Per 3-Day Period
<input type="checkbox"/> Equipment or Trailer Storage w/ Electric <small>Based on availability. 110v/20 amp access.</small>	\$16.00	Per Item Per Day
<input type="checkbox"/> Equipment or Trailer Storage w/o Electric <small>Based on availability.</small>	\$13.00	Per Item Per Day
<input type="checkbox"/> Staff Assistance Between 7 AM – 4 PM <small>Minimum of 30 minutes, based on availability</small>	\$25.00	Per Staff Per 30 Minute Period
<input type="checkbox"/> Staff Assistance Outside 7 AM – 4 PM <small>Minimum of 30 minutes, based on availability</small>	\$50.00	Per Staff Per 30 Minute Period
<input type="checkbox"/> Post-Event Clean Up Fee <small>Minimum of 30 minutes, based on availability</small>	\$37.50	Per Staff Per 30 Minute Period
<input type="checkbox"/> Camping in Parking Lot <small>Based on availability in advance of event.</small>	\$16.00	Per Vehicle Per Day

Certification of Information

I have read, understand, and, if approved, will comply with the **Special Event Rules & Procedures** and **All Park Rules & Policies**, available at coconino.az.gov/parkevents and in print upon request.

I understand that I must be able to provide the Events Coordinator with a **Certificate of Insurance that names Coconino County as additional insured for general liability** and has at least the minimum coverage of **One Million Dollars (\$1,000,000) per occurrence/Two Million Dollars (\$2,000,000) aggregate**. Coconino County reserves the right to require other insurance and/or higher limits, dependent upon the nature of the event.

I hereby certify that the statements made in this application are true and complete to the best of my knowledge. I understand that intentional omissions or falsification of information is sufficient grounds for denial of the application and subsequent revocation of the permit.

By signing this application, I acknowledge that my event has NOT been approved by Coconino County Parks & Recreation. The Coconino County Events Coordinator will reach out to continue the special events process.

Event Producer Name: _____

Event Producer Signature: _____

Date: _____