



APPLICATION

Use of Public Property for Business Use

Complete and return this application to City Hall.

Applicant:

Business Name: _____ Phone: _____

Address: _____

Mailing Address: _____

Contact Name: _____ Phone: _____

Email Address: _____

Request Description:

Type/Purpose of Use: _____

Requested Area Description including description of closure length/ times (attach detailed map): _____

Describe impact on adjacent commercial/residential property: _____

A signature form acknowledging the closure must be attached from adjacent commercial/residential properties.

OTHER REQUIREMENTS:

Will sound be amplified in space? Yes No

If yes, Sound Amplification Equipment Registration Statement must be completed and attached with receipt of payment.

Will this area have food, beverage or concession? Yes No

If "yes," Health Department approvals and temporary food license required.

Do you plan to serve alcohol in this area? Yes No

If "yes," Liquor Liability Insurance is required.

If "yes," please describe how you will manage security/traffic control:

Do you plan to have special signs and/or banners? Yes No

If "yes," signs must conform to City ordinances.

The applicant understands and agrees to the following by submitting this application:

- Provide a certificate of insurance for all coverages deemed necessary, name the City of Mason as an additional insured on all applicable policies, and submit the certificate to City Hall no later than one business day before the use of area.
- The applicant is responsible to manage trash and is required to empty any City receptacle that is impacted by this area.
- Comply with all City and County ordinances and applicable State laws, City policies and acknowledges that the public use permit does not relieve from meeting any application requirements of law or other public bodies or agencies.
- Promptly pay any billing for City services which may be rendered or deemed necessary as a result of the use of this space
- Applicant and sponsoring organization further understand the approval of the use of this space may include additional requirements and/or limitations based on the City's review of this application. The applicant and sponsoring organization understand that it may be necessary to meet with City staff during the review of this application and that City Council approval is necessary. The applicant agrees the sponsoring organization will operate in conformance with the written approval.

Agreement

In consideration of the closing of the public space and permitting its use by _____
(Name of Company)

on the _____ day of _____, 20_____, to the fullest extent permitted by law, the
 _____ agrees to defend, pay on behalf of, indemnify, and hold harmless the
(Name of Company)

City of Mason, its elected and appointed officials, employees, agents and volunteers, and others working on behalf of the City of Mason against any and all claims, demands, suits, or loss, including all costs connected therewith, and for any damages which may be asserted, claimed, or recovered against or from the City of Mason, by reason of personal injury or otherwise, including bodily injury or death and/or property damage, including loss of use thereof, which arises out of, or is in any way connected or associated.

_____ further agrees to procure and maintain during the life of this
(Name of Company)

agreement, Liability Insurance with limits of liability not less than \$1,000,000 per occurrence and aggregate. Liability insurance, as described above, shall include an endorsement stating the following shall be additional insureds: The City of Mason, all elected and appointed officials, all employees and volunteers, agents, all boards, commissions, and/or authorities and board members, including employees and volunteers thereof. It is understood and agreed by naming the City of Mason as additional insured, coverage afforded is considered to be primary and any other insurance the City of Mason may have in effect shall be considered secondary and/or excess.

 (Applicant signature)

For Office Use Only:

Received by: _____ Date: _____

Reviewed Applicant and All Required Attachments by: _____ Date: _____

Approved by (Council if in ROW): _____ Date: _____

Permit No: _____ Date Issued: _____ Date Expires: _____

Revised 6.2.20