

Procedure to fill out this form

1. All sections must be completed.
2. The completed application must be sent by email to **events@cotesaintluc.org**.

- The application must be submitted between 45 and 60 working days prior to the scheduled date of the event.
- For events taking place between June 20 and September 10: the application must be submitted 60 working days before the scheduled date of the event.
- There is a non-refundable \$25 administrative fee to process each request.

1. Information about the organization

Name of group

Quebec Entreprise
Number (NEQ)
(if relevant)

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Name of applicant

Office address (number, street, suite)

Telephone

City

Postal code

Is this a(n)...?

- Company Organization
- Individual Association
- Other (please specify)
- _____

What is the group's main area of activity?
(please specify)

Name of the person in charge during the event

First name

Cell phone

2. Information about the event

Name of the event

Date(s) of the event

DD MM YYYY

to DD MM YYYY

Number of years the event has been held _____

Is the event recurring? Yes No

Description and objectives of the event

Proportion of programming taking place outdoors: _____ %

Scale of the event

- Block party Regional
 Municipal Provincial
 National

Nature of the event

- Cultural Corporate/Private
 Recreational Community
 Sports Fundraising
 Outdoor event Promotion of business or products/services
 Historical
 Touristic
 Life event

Number of participants and visitors expected

- 1 to 100 501 to 1 000
 101 to 250 1 001 to 1 500
 251 to 500 1 501 +

Target clientele for the event

- Children Adults Families
 Teens Seniors
 Other (specify) _____

Type of Event

- Celebration Class
 Wedding Camp
 Block Party Fundraiser
 Other (specify below) Religious Ceremony

Do you plan to charge for the event?

- Yes No Ticketing/Registration fees: \$ _____
 before on site

Are there any collaborating organizations acting as partner in your event (service, material or financial)?

- Yes (specify below) No

Organizations

Collaboration and partnerships

Are there volunteers involved in your event?

- Yes No

If yes:

Number of volunteers _____

Their involvement

Are you planning to advertise?

- Yes (provide a visual) No

3. Information on the location and scheduling of event

Location
(name of park or public space, building, street, etc.):

- Park or public place
- Other: _____

- Municipal building
- Street

Room reservation:

- Yes (specify below) No

Accommodation capacity: _____

Dates: _____

From: am pm to: am pm

Service pavilion (if available):

- Yes (specify below) No

Dates: _____

From: am pm to: am pm

Timetable of the event	Dates		Schedules	
	From:	to:	From:	to:
	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm
	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm
	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm

Setting up	Dates		Schedules	
	From:	to:	From:	to:
	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm
	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm
	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm

Tearing down	Dates		Schedules	
	From:	to:	From:	to:
	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm
	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm
	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm

In case of bad weather, is the event rescheduled? Yes (specify below) No

Location (name of park or public space, building, street, etc.) : _____

Timetable of the event	Dates		Schedules	
	From:	to:	From:	to:
RAIN DATE	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm
	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm
	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm

Montage	Dates		Schedules	
	From:	to:	From:	to:
RAIN DATE	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm
	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm
	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm

Démontage	Dates		Schedules	
	From:	to:	From:	to:
RAIN DATE	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm
	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm
	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm

4. Technical requirements

Street closure Yes (specify below) No

Street name: _____ Closure: Total Partial

	Date	Time
At what point in time is the street closure required?		<input type="checkbox"/> am <input type="checkbox"/> pm
		<input type="checkbox"/> am <input type="checkbox"/> pm
		<input type="checkbox"/> am <input type="checkbox"/> pm
	Date	Time
At what point can the City proceed with the reopening of the street?		<input type="checkbox"/> am <input type="checkbox"/> pm
		<input type="checkbox"/> am <input type="checkbox"/> pm
		<input type="checkbox"/> am <input type="checkbox"/> pm

In the event of a partial street closure, identify the numbers of parking stations or homes located in the closed section of the street:

From number _____ to number _____ Not applicable

Parking bollard blocking schedule (if applicable)	Dates	Schedules	
		From:	to:
		<input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> am <input type="checkbox"/> pm
Additional information			

Parade—March Yes (Please ask for the march request form—Police Department)
 No

Event details and equipment

- Please note that the Organization is fully responsible for providing all of its own equipment, material, supplies, and security for their event.
- Bonfires, fireworks, pyrotechnics, fire-eaters and other activities that pose a fire risk are not permitted at any event in the public domain.
- Should the City deem that your event requires additional resources from the City, you will be billed accordingly.
- The City will provide rolling garbage, compost and recycling bins.

Alcohol consumption

Yes (specify below) No

Date: DD MM YYYY

From: am pm to: am pm

Sale of alcohol

Yes (specify below) No

Date: DD MM YYYY

From: am pm to: am pm

Alcohol management—monitoring consumption

Identified volunteers Number: _____

Recognized security agency

Name of the agency: _____

Number of officers: _____

First Aid

Identified volunteers Number: _____

Recognized security agency

Name of the agency: _____

Number of officers: _____

4. Technical requirements (continued)

Selling food

Yes (specify below) No

Date: DD MM YYYY

From: am pm to: am pm

Selling articles and products

Yes (specify below) No

Date: DD MM YYYY

Details: _____

Cooking equipment

Yes (specify below) No

Details: _____

Sound system

Yes (specify below) No

Date: DD MM YYYY

From: am pm to: am pm

Music

Live performers DJ

Date: DD MM YYYY

From: am pm to: am pm

Where will the music be set up and what equipment will be used? (provide a detailed plan)

Use of heating equipment

Yes (specify below) No

Details: _____

Inflatable games

Yes (provide a site plan with their location)

No

Tent-canopy

Yes (specify below) No

Dimensions: _____ x _____

Decoration

Yes (provide a visual)

No

Motorized equipment

Yes (specify below) No

Details: _____

Will any vehicle(s) be onsite for this event?

Oui Non

If yes, How many? _____

What for? _____

Presence of animals

Yes (specify below) No

Details: _____

Chemical toilets

Yes (provide a site plan with their location)

No

5. Commitments of the organization and signature

- The company or the individual undertakes to respect the regulations, standards and instructions relating to the occupation of the public domain and the holding of a local event.
- The company or the individual undertakes to ensure the safety of the public at all times on the event site.
- The company or the individual agrees to make the event site accessible to people with reduced mobility.
- The company or the individual agrees to maintain accessibility to all public property owned by the City of Côte Saint-Luc.
- The company agrees to maintain, for the duration of the occupation of the public property belonging to the City of Côte Saint-Luc, a public liability insurance policy providing a minimum of \$1,000,000 coverage for bodily injury, property damage or any other loss, and protecting the City of Côte Saint-Luc and the business or individual. The company shall also provide an insurance endorsement that co-insures the City of Côte Saint-Luc.
- The company agrees to indemnify and save harmless the City of Côte Saint-Luc from all claims and damages of any nature whatsoever caused by the company, its employees, servants, agents or contractors in connection with the holding of a local event.
- The company or the individual company agrees to keep the public property owned by the City of Côte Saint-Luc clean and to restore it to the condition in which it was taken. In the event of damage, the company or individual shall repair any breakage to the satisfaction of the City at their own expense. The City may repair the damage and forward the invoice to the organization or individual.
- The company or the individual agrees to notify the Community Activities and Initiatives Committee of any changes to the nature of the local event as well as any changes to the objectives, timelines or any other component of the event.
- If alcoholic beverages are sold, the company or the individual agrees to provide a copy of the liquor licence prior to the event.

In witness whereof, the undersigned acknowledges that he/she has read all the provisions of this application.

The undersigned(s) confirm(s) that the purpose and objective of the Organization is in compliance with Canadian Laws, Quebec Laws, City policies and by-laws, and in the best interest of the community.

The undersigned(s) confirm(s) having the authority to represent the Organization in this application.

Name

Signature (required)

Signed in

Date

DD MM YYYY

6. Sending your form and other documents

Documents to attach to your project:

Mandatory

- Timeline
- Programming
- Insurance endorsement
- Layout plan—walking, running, etc.

If required

- Budget
- Technical estimates (sound and lighting)
- Additional forms (march—parade, fire)
- Any other document relevant to the analysis of the request
- Visual of the decorations
- Strategic planning
- Communication plan
- Safety plan (emergency measures), for any event of 100 participants and more

Relevant information required for the report

- Course of the event, weather conditions and final program
- Number of participants and visitors
- Describe the specific clientele, if applicable
- Strengths and areas for improvement
- Financial statement

To avoid delays in the processing of your application, please ensure that this form is completed in full and that all required documents are submitted.

Please send your complete request for authorization:

By email: **events@cotesaintluc.org**

By mail: Community Activities and Initiatives Committee
c/o General Management Department
5801 Cavendish Blvd.
Côte Saint-Luc, QC
H4W 3C3