Fairgrounds and Parks Department Open Container Waiver Application

APPLICATION CHECKLIST

Application
Non-refundable fee \$25 for Park County residents, \$35 for non-residents Make check payable to Park County.
 General Liability Insurance Certificate In the amount of \$1.5 mil per occurrence & \$750,000 per claim, listing Park County (and State of Montana if necessary) as additional insured must include the endorsement for additional insured. Insurance certificate must include liquor liability.
 Safety Plan – must address the following issues: How admission of those under the legal age to drink will be handled and consequences when underage drinking occurs. How will staff handle those under the influence of alcohol? Will alternate transportation be offered? Actions to be taken in the event of a disturbance or medical or other type of emergency. Any other measures to be taken to maintain a safe environment for those in attendance.
 Proof of Responsible Beverage Server training (if more than 50 guests) Please contact Southwest Montana Prevention, Kris Romango, Prevention Specialist, at 406-223-9344 or email parkprevent@buttecares.org for information on server training.
Contact Park County Fairgrounds and Parks for questions or additional information at 46 View Vista Drive, Livingston, MT 59407 Phone 406-222-4185.



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APPLICANT INFORMATION	ON					
Organization:		Primary Contact:				
Mailing Address:		City, State, Zip:				
Phone Number:		Email Address:				
Secondary Contact:		Secondary Phone:				
EVENT INFORMATION						
Name of Event:		Planned Activity:				
Event Date(s):						
Start Time:		End Time:				
Location of Event:						
Parking Plan:		T				
Description of record	_					
amplification equipment, banners, signs						
or any other attention getting devices:						
Describe any public e						
or facilities are reque	ested:					
INSURANCE REQUIRME	NTS					
Organizer must obtain commercial general liability insurance covering the permittee						
and/or the permittee's organization for all activities related to the Event, including						
but not limited to setup, the Event itself, and all cleanup and takedown activities.						
The insurance policy shall contain no exceptions or exclusions for activities						
conducted under or related to the permitted activities. The permittee shall name						
the county, its officers, and employees as additional insureds on a primary non- contributory basis. The additional insured coverage shall be in a form acceptable to						
the county. The insurance shall be in the amounts of \$750,000 per claimant and \$1,500,000 per occurrence. The Fairgrounds and Parks Director may grant a waiver						
for county sponsored events or when it is determined the event will not present a						
substantial or significant public liability. The Fairgrounds and Parks Director shall						
consider the applicants proven financial inability to obtain insurance. If a waiver is being sought, applicant must present factual information on why the waiver is						
requested.						
FEES						
Non-Refundable Waiver Application Processing Fee						
□ \$25.00 Park County Resident □ \$35.00 Non-resident of Park County						



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DISCLAIMER

Together with any supplementary information as may be required by Park County, this form must be filed with the office of the Fairgrounds and Parks Director not more than one hundred eighty (180) days nor less than ten (10) days prior to the event to ensure proper processing.

I certify that I am an authorized representative of and have the power to execute this application on behalf of the above-named organization/applicant. All of the above statements are true to the best of my knowledge, information and belief. All questions have been answered, and if any change in fact or method occurs subsequent to the date of this application, or the issuance of a permit, I will notify Park County Fairgrounds and Parks Department, in writing, within 24 hours after such change. I understand and agree that it is my responsibility to ensure all participants comply with all permit directions and conditions and with all applicable laws and ordinances.

I agree to defend, hold the county and its employees and officials harmless and indemnify the county, its employees and officials, for any and all claims, lawsuits or liability including attorneys' fees and costs allegedly arising out of loss, damage or injury to person or person's property occurring during the course of, in preparation of, or in any way pertaining to the parade or public assembly which are caused by the conduct of employees or agents of the permit holder.

APPLICANT SIGNATURE BLOCK		
Signature:	Date:	
Printed Name:	Title:	