



CITY OF COLUMBUS

RACE EVENT APPLICATION

A

THIS APPLICATION IS USED FOR ALL WALKS, RUNS AND CYCLING EVENTS

RP#16 _____

1. INSTRUCTIONS

The CRPD Office of Special Events requires submission of a completed Race Event Application with payment, all support documents, and required approvals. Incomplete applications will not be processed and submitting an application does not guarantee you will be issued a Race Event Permit. Additional permits may be required to conduct your race event, please refer to the Race Event Planning Guide (www.columbusrecparcs.com) or contact 614-645-3335 for information.

The application fee is based on number of participants and if the race event is designated "For-Profit" or "Non-Profit." The designation of a race event as a "Non-Profit" does not involve the contributions it makes to a charity. A volunteer board of directors cannot profit personally from a race event and requires an IRS designation as a 501 (c) 3 organization.

2. APPLICANT INFORMATION

Organization Coordinating Race Event: _____ Non-Profit Tax ID: _____

Organization Contact: _____ E-Mail: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Registration Web Site: _____

On-Site Coordinator: _____ Phone: _____

3. RACE EVENT OPERATIONS

Name of Race Event: _____

List the distance(s) and anticipated race participation: _____

Start/Finish Location(s): _____

Type of Race Event: Running Walk A Thon Cycling Other _____

A processing fee will be required for development of custom road courses by the Columbus Division of Police and must be submitted with your race event application. Is this a New Course? Yes No

COURSE DETAILS (Check all that apply): Park Trail Street Sidewalk Private Property

Set-Up Date: ___/___/___

Set-Up Hours: ___ AM or PM

to ___ AM or PM

Race Event Date: ___/___/___

Registration: ___ AM or PM

to ___ AM or PM

Start Time: ___ AM or PM

End Time: ___ AM or PM

Tear-Down Date: ___/___/___

Tear-Down Hours: ___ AM or PM

to ___ AM or PM

4. RACE EVENT AUTHORIZATION

POLICE: Have you contacted Columbus Police Special Events Unit regarding your race event? Yes No
Contact Columbus Police, 614-645-4375, to determine the number of officers and vehicles needed for your event.

FIRST AID SERVICES: Who will be providing your on-site first-aid? _____
Contact Columbus Fire Special Events Office, 614-221-3132 ext.75010, to determine an approved first-aid plan.

5. COURSE LOCATION

STREET CLOSURE: Will you be applying for a Street Closure Permit? Yes No

If "yes", an official Street Closure Application must be submitted to CRPD Permits Office 30 days prior to race event.

What street(s) will be closed? _____

Please provide the date and time the street(s) will be closed: _____

Who are you contracting with to provide traffic control devices? _____

METER REQUEST FORM: Are you removing any parking meters from service? Yes No

If "yes", an official Meter Request Form must be submitted to Parking Violations Bureau 30 days prior to race event.

COURSE/PARK MAP: You MUST attach your approved course map, include a turn by turn description of the course, and include the location of the following on a map:

- Start/Finish Lines • Water Stations • Portable Restrooms • First-aid • Tents
Portable Restrooms • Stages • Amplified Sound Site(s) • Inflatables • Fencing

When utilizing city streets, a "Notification of Intent" must be distributed to all properties adjacent along the course 15 days prior to the race event. If using a trail, "Race in Progress" signs may be posted along the trail course.

6. CITY PARK USE

The Race Event Application allows for use of city parks without the need to file for a separate park use permit. Prior to issuing a Race Event Permit, CRPD Office of Special Events must confirm availability of any park requested and collect facility rental fees. Contact 614-645-3335 to determine fees. If a city park is used in conjunction with your race event, an additional park map is required to identify the items listed above and/or other temporary items (i.e. dumpsters, cooking areas, tents) that will be located on park property.

7. SUPPLEMENTAL NOISE ABATEMENT LICENSE

Section 2329.11 of Columbus City Code allows CRPD Office of Special Events to issue an exemption from the City Noise Ordinance to a Race Event that has met the requirements for having amplified sound for a non-commercial purpose. Amplified sound is only permitted in areas "zoned commercial" when a Race Event Permit has been issued for a trail, road or combination course. Amplified sound can be used for pre-race announcements at the start/finish area up to 90 minutes prior to the start time. Continuous amplified sound may begin 60 minutes prior to the start time and may not go beyond 11:00 PM. The Race Event Permit will include the Noise Abatement License if all city requirements are met.

What type of amplified sound will be used? Sound System Band Other _____

What time will amplified sound begin for pre-race announcements? _____ AM/PM to _____ AM/PM

What time will continuous amplified sound begin at the start/finish? _____ AM/PM to _____ AM/PM

Will amplified sound be stationary? Yes No If "no," you must clearly mark locations and duration of sound on your course map to be exempt from the City Noise Ordinance.

8. RACE EVENT COMPONENTS

Will you be collecting money in a city park? Yes No Is this a timed event? Yes No

Please check all boxes that apply to your race event and provide numbers when requested:

- Product Giveaway Soliciting Donations Advertising Inflatables #
Food Giveaway On-site Cooking Bounce Amusements #
Food Vendors Merchandise Vendors

WATER SERVICE: The Division of Water can provide hydrant access to supply potable water for the race event.

Please list any needs for water access: _____

PARKING: Describe the parking arrangements you have made for staff, volunteers, vendors, & persons with disabilities:

RESTROOMS: Delivery date: _____ Removal date: _____

Name of company supplying restrooms: _____ Phone: _____

Number of single units: _____ Number of multi-units: _____ Number of handicap units: _____

TEMPORARY STRUCTURES: If you do not have any temporary structures, please write "N/A" in the following section:

TENTS: Size(s): _____ Total number: _____

Name of tent supplier: _____ Phone: _____

Delivery date: _____ Removal date: _____

PORTABLE STAGES/PLATFORMS Size(s): _____ Method of anchoring stage: _____

START/FINISH ARCH: Size of height: _____ Size of width: _____ Method of anchoring: _____

Delivery date: _____ Removal date: _____

CLEAN UP MANAGEMENT: Person signing application is responsible for all trash/waste generated by the race event.

Describe how you will collect and remove trash generated: Events may be assessed \$500/day/park for items remaining in riverfront parks above and beyond permitted use.

Are you ordering a dumpster? Yes No

Size of dumpster: _____ Delivery date: _____ Removal date: _____

9. ALCOHOL SALES

Do you plan to apply for an "F Permit" from the State of Ohio? Yes No

If "yes", where will alcohol be consumed? Public Property Private Property

10. RACE EVENT INSURANCE

You are required to submit a Certificate of Insurance with a minimum of \$1,000,000, combined single limit bodily injury, property damage, product liability for each occurrence and cover all operations of the race event including but not limited to participants, contractors, subcontractors, vendors, exhibitors, staff, volunteers, etc. Organizations whose certificate of insurance will expire after the application deadline and prior to the race event must submit a copy of the existing policy, but are required to submit an updated certificate to the CRPD Office of Special Events no less than 5 days prior to the date of the race event or the race event permit will be revoked. Please list the Certificate Holder as: **City of Columbus, 1111 East Broad Street, Suite 101, Columbus, Ohio 43205-1303.**

11. FEES

RACE APPLICATION FEES	NON-PROFIT BASE FEE	TOTAL NON-PROFIT COST (WITH EXPEDITING FEE*)	FOR-PROFIT BASE FEE	TOTAL FOR-PROFIT COST (WITH EXPEDITING FEE*)
Up to – 1,999 Participants	\$550	\$1,100	\$1,100	\$2,200
2,000-7,499 Participants	\$900	\$1,800	\$1,800	\$3,600
7,500-14,999 Participants	\$1,500	\$3,000	\$3,000	\$6,000
Over 15,000 Participants	\$3,000	\$6,000	\$6,000	\$12,000

*Applicant will be subject to an expediting fee if filing after the deadline. Trail Course applications must be submitted **30 days prior**; Road or Sidewalk Course applications must be submitted **60 days prior**.

CUSTOM COURSE PROCESSING FEE*	
5K distance or less	\$100
5K – 10K distance	\$250
10K to Half Marathon	\$500
Half Marathon – Marathon	\$1000

*Custom course processing fee applies to road courses only and must be submitted with race application.

RIVERFRONT PARK RENTAL FEES	½ DAY RATE	FULL DAY RATE	SET-UP DAY	TEAR-DOWN DAY
Public Event	\$300	\$600	\$500*	\$500*
Gated/Private Event	-	\$1200	\$500/day/park	\$500/day/park

Riverfront Park Rental Fees apply to the following Parks: Bicentennial Park, Genoa Park, McFerson Commons, Battelle Park, North Bank Park, West Bank and East Bank/Promenade Park

* Public events, **produced by a non-profit organization**, will receive one (1) set-up and one (1) tear-down day (Monday – Friday), per park, at no-charge, provided availability. Each additional day will be charged at \$500/day/park.

12. ACKNOWLEDGEMENT/SIGNATURE

I, the applicant understand that I am responsible to provide all information necessary to meet the conditions and requirements of the application process and that by providing such information it is no guarantee that my proposed race event will be issued a permit by the Columbus Recreation and Parks Department. I further accept responsibility to hold free and harmless the City of Columbus and will abide by all local, State, and Federal regulations applicable to conducting a race event. I understand that all information listed on my application, permit, attachments and supporting documents are subject to public disclosure by the City of Columbus. I verify that I have read and understand this application and the conditions under which my request will be considered and that the risk of promoting a race event before a Race Event Permit is issued is the sole responsibility of the applicant. Should the premises be made impractical for use by any cause, the City of Columbus may, at its discretion, reissue the permit for another city property, or terminate and void the permit. The user expressly waives any and all claims for damage or loss of profit and other compensation should the permit be terminated.

Applicant's Signature: _____ Date: _____

13. RACE EVENT CHECKLIST

YOU MUST SUBMIT THE FOLLOWING:

- Non-refundable Race Event Application Fee
- Certificate of Insurance
- Course/Park Map (See Section 5)
- Bicentennial Park Stage Rental Fee (If Applicable)
- Park Usage Fee (If Applicable)
- Turn by Turn Description

Make check payable to "City of Columbus" submit to 1111 E. Broad St., Suite 101 Columbus, OH 43205

FOR OFFICE USE ONLY—DO NOT WRITE BELOW THIS LINE (UPDATED LAST 1/27/2016)	
COLUMBUS POLICE SPECIAL EVENTS UNIT AUTHORIZATION	
RACE EVENT COURSE APPROVED: <input type="checkbox"/> YES <input type="checkbox"/> NO	NOTIFICATION OF INTENT REQUIRED: <input type="checkbox"/> YES <input type="checkbox"/> NO
APPROVAL SIGNATURE:	DATE:
COLUMBUS FIRE SPECIAL EVENTS OFFICE AUTHORIZATION	
RACE EVENT FIRST-AID PLAN APPROVED: <input type="checkbox"/> YES <input type="checkbox"/> NO	CITY EMERGENCY MEDICAL SERVICES REQUIRED: <input type="checkbox"/> YES <input type="checkbox"/> NO
APPROVAL SIGNATURE:	DATE:



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
Month/Date/Year

PRODUCER NAME OF INSURANCE AGENCY/BROKER NAME Street Address or P.O. Box City, State & Zip Code Contact & Phone Number	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
	INSURERS AFFORDING COVERAGE	NAIC #
INSURED RESPONSIBLE ORGANIZATION (NAME OF GROUP ON THE PERMIT) Street Address or P.O. Box City, State & Zip Code	INSURER A: Name of Insurance Company	Enter NAIC#
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	<input checked="" type="checkbox"/>	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR _____ _____ GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	Enter Policy #	Enter Effective Date	Enter Expiration Date	EACH OCCURENCE	\$1,000,000
						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$100,000
						MED EXP (Any one person)	\$5,000
						PERSONAL & ADV INJURY	\$1,000,000
						GENERAL AGGREGATE	\$1,000,000
						PRODUCTS - COMP/OP AGG	\$1,000,000
							\$
	<input type="checkbox"/>	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS _____ _____				COMBINED SINGLE LIMIT (Each Occurrence)	\$
						BODILY INJURY (Per person)	\$
						BODILY INJURY (Per accident)	\$
						PROPERTY DAMAGE (Per accident)	\$
	<input type="checkbox"/>	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO _____				AUTO ONLY - EA ACCIDENT	\$
						OTHER THAN EA ACC	\$
						AUTO ONLY: AGG	\$
	<input type="checkbox"/>	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$ _____				EACH OCCURENCE	\$
						AGGREGATE	\$
							\$
							\$
							\$
	<input type="checkbox"/>	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER	
						E.L. EACH ACCIDENT	\$
						E.L. DISEASE - EA EMPLOYEE	\$
						E.L. DISEASE - POLICY LIMIT	\$
A	<input checked="" type="checkbox"/>	OTHER LIQUOR LIABILITY required if event is selling/consuming alcohol	Enter Policy #	Enter Effective Date	Enter Expiration Date		\$1,000,000

SAMPLE

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

The City of Columbus, its elected officials, officers, employees, agents and representatives are included as an additional insured as respect to the Commercial General Liability policy and Liquor Liability policy if alcohol is sold/consumed during the event.

Insert event name, dates including load-in and load-out, name of venue location (park, trail, facility, or public right-of-way) and list all types of activities.

CERTIFICATE HOLDER

CITY OF COLUMBUS
 CRPD OFFICE OF SPECIAL EVENTS
 1111 East Broad Street, Suite 101
 Columbus, Ohio 43205-1303

Fax #: (614) 645-8839 or e-mail: jt nicholson@columbus.gov

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE INSURER AFFORDING COVERAGE WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE