

SPECIAL EVENT PERMIT APPLICATION FORM

| 1. | Name of event | |
|----|-------------------------------------|--|
| 2. | Location/Address | |
| 3. | Current Zoning: | Known Unknown U |
| | No Idea? | Zoning: |
| | Use the link to our RDN maps | |
| | to check the zoning for the | |
| | proposed location. | |
| 4. | | Known Unknown U |
| | Development Permit Area: | Known — Onknown — |
| | No Idea? | OCP Designation/Development Permit Area: |
| | Use the <u>link</u> to our RDN maps | |
| | to check. | |
| 5. | Type of Event and brief | |
| | Description | |
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| 6. | Estimated attendance | | | | | | |
|-----|------------------------------------|--------------|-----------------|-------------|-----|--|--|
| 7. | Admission charged? | Yes Addit | No Details a | as necessal | ry: | | |
| | | | | | | | |
| 8. | Date(s) of event | | | | | | |
| 9. | Hours each day of event to be held | | | | | | |
| 10. | Full name and address of applicant | | | | | | |
| 11. | Phone | | | | | | |

| 12. Email | |
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| 13. Fax (if applicable) | |
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| 14. Full names of any affiliated | |
| organizations and sponsors | |
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| 15. Please describe arrangements f | or the following, as applicable (attach further sheets if necessary) |
| a) First aid care and facilities | |
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| b) Drinkable water supply | |
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| C) | Toilet facilities | |
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| -11 | Marka callection and | |
| a) | Waste collection and | |
| | removal facilities | |
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| -1 | Food and drink stores | |
| e) | Food and drink storage, | |
| | dispensing, preparation, | |
| | the periodical properties of | |
| | and use | |
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| f) | Noise abatement | |
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| | Off-street parking of motor vehicles, as that term is defined in the Highway Act | |
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| | Policing and other necessary security on and around the site | |
| i) | Traffic control in and around site | |
| j) | Provision of a police and security command post | |

| 16. Consent of registered owner of land The registered owner(s) of the land described above consent to the holding of the above special event: | | | | | | |
|--|-----------|------|--|--|--|--|
| Name | Signature | Date | | | | |
| Name | Signature | Date | | | | |
| 17. Applicant Signature By signing below the applicant agrees to obey Regional District of Nanaimo Special Events Regulatory Bylaw No. 1010, 1996 including being solely responsible to pay all policing, clean-up and other costs and agrees to release, indemnify and save harmless the Regional District of Nanaimo, its elected and appointed officers and employees from and against all claims, actions, causes of action, suits, demands, expenses, fees or fines arising from the holding of the special event: | | | | | | |
| Name | Signature | Date | | | | |
| Name | Signature | Date | | | | |

Your application will not be considered complete and a Special Events Permit will not be issued until you have supplied the following:

- Written approval from the local medical health officer (Ministry of Health).
- Written approval from the local fire department.
- Written approval from the local RCMP detachment.
- Security deposit (if required by RCMP).
- Confirmation of BC Special Event Permit Application (if serving alcohol at the special event).

Completed forms may be submitted in person, or via email, mail, or fax: RDN Administrative Services; 6300 Hammond Bay Road, Nanaimo, BC, V9T 6N2; email: inquiries@rdn.bc.ca; Fax: 250-390-4163 (if faxing please call or email to confirm). For additional information via telephone please contact the RDN at 250-390-4111 / toll free: 1-877-607-4111.

Personal information collected by the RDN is protected in accordance with the Freedom of Information and Protection of Privacy Act, and will only be used by authorized staff for contact purposes.