



SPECIAL EVENT APPLICATION FOR CITY OF BEVERLY HILLS PERMIT

Organization Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone#: _____

Production Contact (On-site): _____ Mobile #: _____

EVENT TITLE: _____

LOCATION: _____

Venue: Indoors Outdoors Both Expected Attendance: _____

ELEMENTS*:

- | | | | |
|---|---|--|--------------------------------------|
| <input type="checkbox"/> Generator | <input type="checkbox"/> Tent/Canopy | <input type="checkbox"/> Valet Parking | <input type="checkbox"/> Celebrities |
| <input type="checkbox"/> Amplified Sound | <input type="checkbox"/> Car Display | <input type="checkbox"/> Food/Alcohol | <input type="checkbox"/> Media |
| <input type="checkbox"/> Special Lighting | <input type="checkbox"/> Rides | <input type="checkbox"/> Oven/BBQ | <input type="checkbox"/> Animals |
| <input type="checkbox"/> Special Effects | <input type="checkbox"/> Sidewalk Closure | <input type="checkbox"/> Ticket Sales | <input type="checkbox"/> Security |

EVENT SETUP:

Dates: _____ Hours: _____ a.m. _____ a.m.
(from) (to) p.m. (from) (to) p.m.

Describe preparation activity/sidewalk setup: _____

EVENT:

Dates: _____ Hours: _____ a.m. _____ a.m.
(from) (to) p.m. (from) (to) p.m.

Describe event activity: _____

EVENT BREAKDOWN:

Dates: _____ Hours: _____ a.m. _____ a.m.
(from) (to) p.m. (from) (to) p.m.

Describe breakdown activity: _____

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PARKING REQUIREMENTS:

Number of vehicles _____ Describe types of vehicles _____

Parking location (by address or specific location) of equipment vehicles

Parking location (by address or specific location) for event guests

***YOU MAY BE ASKED TO SUBMIT A DIAGRAM, PLOTTING SPECIFIC LOCATIONS OF EQUIPMENT, TENTS/CANOPIES, BARRICADES, HEDGEROWS, EXITS, ETC.**

CATERING SERVICES:

Describe how food will be prepared/served: _____

ADDITIONAL INFORMATION: _____

PLEASE NOTE THAT A CANCELTION FEE (50% OF SPECIAL EVENT FEE PLUS ANY RUSH/RIDER FEES IN FULL) WILL BE ASSESSED SHOULD THE FILMING & SPECIAL EVENTS OFFICE RECEIVE NOTICE OF CANCELTION WITHIN LESS THAN 48 BUSINESS HOURS (2 BUSINESS DAYS) PRIOR TO SPECIAL EVENT ACTIVITY.

4-HOUR MINIMUMS FOR CITY PERSONNEL (IF APPLICABLE) WILL BE ASSESSED SHOULD SPECIAL EVENT BE CANCELED WITH LESS THAN 24 HOURS NOTICE.

A PERMIT IS NOT ISSUED UNTIL ALL RELATED CITY PERMITS AND APPROVALS ARE RECEIVED. I hereby certify that I am aware of and agree to comply with the rules and regulations as provided for in Title 4 of the Beverly Hills Municipal Code, and restrictions listed by departments on the reverse of this page, pertaining to issuance of a permit. I understand that failure to comply may result in the immediate discontinuance of operations, revocation of the permit and/or police citation. I acknowledge that lack of timeliness and/or material changes to the event may result in permit denial or assessment of additional fees. I am the authorized event organizer and/or official contact for all aspects concerning the permit.

Applicant's Name (Please Print)

Signature

Date

Title

For questions regarding the application process, please call (310) 285-2408.

Rev 12/22/17