



## Special Event Application – Park Use Form

Today's Date: \_\_\_\_\_ Sponsoring Organization: \_\_\_\_\_

Event Title: \_\_\_\_\_

Event Location: \_\_\_\_\_ Estimated Attendance: \_\_\_\_\_

Event Date(s): \_\_\_\_\_ Event Start Time: \_\_\_\_\_ Event End Time: \_\_\_\_\_

### Contact Information (This person should be reachable the day of the event)

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Social Media Links or Website for Promotional Purposes (if event is open to the public):  
\_\_\_\_\_

Upon approval you may also submit your event at [experiencecamdensc.com/events/](http://experiencecamdensc.com/events/)

### Event Description:

Please describe the specific type and size of the event. Please attach a map on a separate sheet of paper illustrating placement of tents, restrooms, trash, vending areas, etc. Any cooking on site must be approved by the Fire Marshal. No cooking or open flames are allowed on grass.

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### Event Setup:

Will tents be used for the event?  Yes  No \*Identify location(s) on map.

Will there be vendors or sale of items at the event?  Yes  No \*Temporary Business License will be required for each vendor without a current City business license (Fee - \$25) See application attached.

Will any signs or banners be erected?  Yes  No \*Must be approved

Will any inflatable equipment be used?  Yes  No \* Additional insurance will be required

Will generators be used for the event?  Yes  No \*Identify number, size and location(s)

Will a sound system be used?  Yes  No

Would you like to rent the City's mobile restroom trailer (3 stalls)?  Yes  No

**The Mobile Restroom Trailer application is page 6 in this Special Event Application Packet**

If not, what arrangements have been made for restrooms? \_\_\_\_\_



**Event Setup (continued):**

Will food items be cooked or prepared at the event?  Yes  No

If yes above, please describe the steps taken to ensure fire safety.

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\*Charcoal grills are prohibited on City property. If using propane gas, you must have at least one (1) approved and certified fire extinguisher for every two cooking stations while maintaining a three (3) foot clearance for any and all combustible and ignition sources. Cooking stations shall be no closer than 10 feet from any building. Fire safety inspection is required by Camden Fire Department. Please contact the Fire Marshal at 803-425-6040 or [egardner@camdensc.org](mailto:egardner@camdensc.org).

Will alcohol be served at the event?  Yes  No \*If so, include copy of alcohol license.

Describe the steps you will take to discourage underage drinking. (wristbands, security, etc.)

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A liquor liability insurance policy is required, and can be purchased from an insurer authorized to do business in the state of South Carolina. Alcohol vendors or servers are responsible for obtaining a license from the SC Department of Revenue to serve alcohol during an event.

**City Services**

Event organizer may request the following services, per availability:

- Mobile Restroom Trailer – 3 stalls (one wheelchair accessible, heat/air, water) - \$200
- 95 gallon Roll-carts - \$25 per pair, minimum 1 pair (trash bags are not included or required in roll-cart rental. Renter should supply their own, if desired)
- Electricity - \$5 flat rate, where applicable (not available in all city)
- Stage – 20’x12’ with cover - \$500.00
- Police barricades/cones - \$50
- Police Assistance/Crowd/Traffic Control - Camden Police Department will reach out to the event organizer to discuss specific needs. Mandatory police presence for events where alcohol is served. - \$50/hour/officer

**(Please check all that you will require for your event)**

Number of Roll Carts Needed (\$25 per pair) = \_\_\_\_\_ Electricity \_\_\_\_ = (\$5)

Mobile Restroom Trailer/Stage Rental \_\_\_\_\_ **(Please complete page 6)**

Number of Barricades/Cones Needed \_\_\_\_\_ (\$50 Total)

Police Assistance (Crowd and Traffic Control) \_\_\_\_\_ **(Please complete page 5)**

Please explain below. Camden Police Department will reach out to event organizer to discuss specific needs.



**Hold Harmless Clause**

Permittee/organization hereby shall assume all risks incidental to or in connection with the permitted activity and shall be solely responsible for damages, or injury, of whatever kind or nature to person or property directly or indirectly arising out of or in connection with the permitted activity or the conduct of permittee’s operation. Permittee hereby expressly agrees to hold the City harmless from any penalties for violation of law, ordinance, or regulation affecting its activity and from any and all claims, suits, loss of damages, or injuries directly or indirectly arising out of or in connection with the permitted activity or conduct of its operation or resulting from the negligence or intentional acts or omission of permittee or its officers, agents, and employees.

Please note, completion and submittal of this application does not guarantee approval. Event contact person will receive an approved copy of the permit when all of the event requirements have been met. Special Events Coordinator will keep the contact person updated on the approval process. The approved Special Event permit must be in the possession of the on- site contact person during the event.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For City Use Only**

- Roll carts and collection - \$25.00 per pair Total \_\_\_\_\_
- Electricity use - \$5
- Race, parade or other event requiring closure or traffic/pedestrian control - \$50.00
- Map/Site Layout of Event
- Police Assistance
- Certificate of Insurance – General/Property
- Liquor Liability Insurance

Total Fees = \_\_\_\_\_

**Reviewed and approved by:**

Police Representative: \_\_\_\_\_ Date \_\_\_\_\_

Fire Marshal: \_\_\_\_\_ Date \_\_\_\_\_

**Event Team Lead:** \_\_\_\_\_ **Date** \_\_\_\_\_



## Special Event Application Guidelines

Special event permits (“Permits”) are required for any organized event, block party, or performance (“Event”) in the City of Camden, South Carolina (the “City”) involving the use of, or having an impact on City-owned or publicly-maintained property (“City Property”) in a manner that varies from its current land use. Our goal is to assist Event organizers in planning safe and successful Events that create minimal impacts on the communities surrounding the Events. For all applicable ordinances, please see Chapter 99: Special Events and Performances in the City’s Code of Ordinances.

- Applications for a Permit (“Applications”) should be submitted a minimum of thirty (30) days prior to a one-day Event, and sixty (60) days prior to the first day of an Event lasting two or more consecutive days. Completion and submittal of this Application does not ensure approval.
- Proof of insurance must be submitted fourteen (14) days prior to the Event. Any Event located on City Property is required to provide a certificate of general/property liability insurance for one million (\$1,000,000) dollars, no exclusions, with the City named as additional insured on applicable liability coverages.
- Camden Police Department special event/parade application (pg 5) must be submitted if streets are to be blocked.
- Restroom arrangements are required to be made for Events of more than 100 people. The City has a mobile restroom trailer available for rent.
- Outdoor cooking requires approval from the City Fire Marshall. No cooking may take place on grass surfaces.
- All vendors without a current City Business License are required to obtain a Temporary Event License (\$25) from the Finance Department for the duration of the Event. A list of all participating vendors may be requested by the Finance Director prior to the Event.
- The City has the authority to send a representative to the Event to ensure compliance.
- Applicants are responsible for cleaning and restoring the site after the Event.

Please notify the City if there are any changes after submitting an Application (time/date/location). Inaccurate information and/or deviation from final approval may result in immediate revocation of the Permit and potential cancellation of the event.



## Parade/Special Events Permit Application

This form must be completed for public events where street closures are required and/or where alcoholic beverages are to be sold or consumed on City property. Please submit requests by mail or e-mail at least sixty (60) days in advance of the event. Requests may be sent by e-mail to [kspadacenta@camdensc.org](mailto:kspadacenta@camdensc.org) and [drabon@camdensc.org](mailto:drabon@camdensc.org) or mail to City of Camden, Attn: Kat Spadacenta, 1000 Lyttleton St., Camden, SC 29020.

Date of Application: \_\_\_\_\_ Date of Event: \_\_\_\_\_

Name of Requestor: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Email Address: \_\_\_\_\_

Agency/Entity Sponsoring Event: \_\_\_\_\_

Agency Contact (if different than above): \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Email Address: \_\_\_\_\_

Event Name/Type of Event: \_\_\_\_\_

Location of Event: \_\_\_\_\_

Hours of Event: \_\_\_\_\_

Hours of Service of Beer/Wine: \_\_\_\_\_ Approximate

Number of Event Participants: \_\_\_\_\_

### Road Closure(s) if applicable:

Date(s): \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Requested Closure(s) Please attach illustration of requested closure(s): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Approximate Number of Vehicles or Units Participating: \_\_\_\_\_

Composition and Interval of Space to be Maintained between Units: \_\_\_\_\_

### Approved by:

Police Representative: \_\_\_\_\_ Date \_\_\_\_\_



## Mobile Restroom Trailer/Stage Rental Agreement

Upon approval of the Mobile Restroom Trailer/Stage Agreement, a \$200 security deposit will be required. The deposit will be refunded after satisfactory inspection of the mobile restroom trailer or stage after the completion of the approved rental. A non-refundable \$200 per day use fee will be required for the mobile restroom trailer. A non-refundable \$500 rental fee will be required for the stage. The stage will only be installed and taken down by City of Camden staff at times agreed upon with renter in advance. Forecast of inclement weather may prevent stage from being set up for outdoor events or may incur additional labor fees for installation/take down.

Name of Renter: \_\_\_\_\_

Agency/Entity Sponsoring Event: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Day of Event Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

This person should be available the day of the event and be present to meet city crews for placement.

Rental Period of Use Date(s) and Time: Start \_\_\_\_\_ End: \_\_\_\_\_

(The maximum rental period of MRT is 2 days, subject to review and renewal, and dependent on the physical limitation of the freshwater and wastewater tank capacity).

\_\_\_\_\_ I would like to rent the Mobile Restroom Trailer Requested Location: \_\_\_\_\_

\_\_\_\_\_ I would like to rent the City Stage Requested Location: \_\_\_\_\_

IN WITNESS THEREOF, the parties have executed this Agreement as of the date set forth below:

AUTHORIZED REPRESENTATIVE  
FOR RENTER

AUTHORIZED REPRESENTATIVE  
FOR THE CITY

BY: \_\_\_\_\_

BY: \_\_\_\_\_

DATE: \_\_\_\_\_

DATE: \_\_\_\_\_



## Mobile Restroom Trailer Renter Responsibilities

This Mobile Restroom Trailer Agreement and the responsibilities as outlined hereunder are not transferable without the written approval of the City of Camden (“City”). By executing this Agreement, the Renter agrees to comply with all terms set forth herein and the guidelines associated with rental of the mobile restroom trailer. The Renter shall comply with all federal, state and local laws, ordinances, and regulations, if any, applicable to the use of the MRT. Failure to comply with city standards may result in loss of deposit (if applicable) and possible denial of future use. No reservation request will be issued on a repetitive basis.

### A. PRIORITY OF USE

Decisions to grant use of the mobile restroom trailer will be made based on the following prioritized ranking:

1. City of Camden programs/events.
2. Programs of community-wide interest approved, endorsed, or co-sponsored by the City of Camden and supporting organizations.

### B. INSURANCE

The Renter is responsible for the full cost of repair or replacement of any or all of the Mobile Restroom Trailer (“MRT”) that is damaged, lost, confiscated, or stolen from the time Renter assumes custody until it is returned to the City. The Renter shall maintain adequate insurance coverage to cover loss or damage to the MRT. A Certificate of Insurance will be required naming the City of Camden as an additional insured. If the MRT is lost, stolen or damaged, the Renter must immediately notify the City.

### C. USE/DISCLAIMER

The Renter shall be responsible for the proper use of the MRT in accordance with any MRT use procedures. The Renter accepts responsibility for operating the MRT at its sole risk. The Renter agrees to use the MRT for government, public benefitting, or non-profit use only, and not for any private event. MRT use procedures:

1. Smoking in the MRT is prohibited.
2. Please do not flush feminine products in the toilet; use waste container provided in the stall.
3. The MRT will be inspected prior to drop off and at the time of pick up. Any graffiti found in the MRT is the responsibility of the Renter, who will be charged for cleaning and/or repair.

### D. DELIVERY AND RETURN OF EQUIPMENT

City of Camden Public Works staff will be responsible for the drop off and pick up of the MRT. The location and availability of the MRT is subject to change based on the discretion of city staff with regards to electrical and water sources and topography.

### E. INDEMNIFICATION

In consideration for the MRT rental, the Renter agrees to indemnify, defend and hold the City of Camden harmless from any and all damages, losses, claims, causes of actions, expenses and liability of any nature whatsoever associated with its use of the MRT.

### F. HOURS OF USE

Normal start time shall be no earlier than sunrise; normal end time shall be no later than midnight. Hours of operation required outside the stated normal start and end times must be documented in application and are subject for approval.





## APPLICATION FOR TEMPORARY BUSINESS LICENSE

Please complete this form and submit it by mail or in person along with your Check, Money Order or Cashier's Check in the amount of \$25 made out to the City of Camden.

Mail to: City of Camden, PO Box 7002, Camden, SC 29021

In person: City of Camden, 1000 Lytleton Street, Camden, SC, 29020.

**NOTE: Vendors with a current City of Camden Business License do not need to complete this form. However, they should have a copy of their business license on site at the event.**

BUSINESS NAME \_\_\_\_\_ OWNER/OFFICER \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

SC SALES TAX NO \_\_\_\_\_ FEDERAL EIN/SOCIAL SECURITY # \_\_\_\_\_

BUSINESS PHONE \_\_\_\_\_ EMERGENCY PHONE \_\_\_\_\_

ON-SITE/DAY OF EVENT CONTACT (IF APPLICABLE) \_\_\_\_\_

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### COMPUTATION OF REVENUE FOR BUSINESS LICENSE FEE

**Total Fee Due: \$25.00**

EVENT DATE(S): \_\_\_\_\_

EVENT LOCATION: \_\_\_\_\_

EVENT NAME: \_\_\_\_\_

EVENT CODE (for City Use Only): \_\_\_\_\_

BY SIGNING BELOW, THE APPLICANT CERTIFIES THAT THE ABOVE INFORMATION IS ACCURATE, THAT ALL REQUIRED PERMITS AND FEES HAVE BEEN PAID, AND THAT ALL PROPERTY TAXES DUE AND PAYABLE TO THE CITY OF CAMDEN HAVE BEEN PAID.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
DATE





STATE OF SOUTH CAROLINA  
DEPARTMENT OF REVENUE  
**LAW ENFORCEMENT NOTIFICATION FOR  
SPECIAL EVENT APPLICATION**

Special event organizers must submit this application to the Chief of Police of the municipality where their event is located. If the special event does not take place within municipal limits, submit this application to the Sheriff of the county where the event is located.

If the Chief of Police or Sheriff is unable to sign, you must include a written statement from the Chief of Police or Sheriff authorizing another law enforcement representative to sign on their behalf.

**To be completed by the applicant**

\_\_\_\_\_  
Legal entity name or sole proprietor

\_\_\_\_\_  
Physical location of event

\_\_\_\_\_  
Municipality (if applicable)

\_\_\_\_\_  
County

\_\_\_\_\_  
Date(s) of special event

\_\_\_\_\_  
Beginning time

\_\_\_\_\_  
Ending time

**To be Completed by the Chief of Police or Sheriff**

I have been informed by the applicant above about their application for a Special Event license to sell beer, wine, and/or liquor at the address shown above.

**I do not object to the issuance of the Special Event License.**

**I object to the issuance of the Special Event License.**

\_\_\_\_\_  
Signature of authorized law enforcement official

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name and title of authorized law enforcement official

\_\_\_\_\_  
Department

\_\_\_\_\_  
Phone number

**If this form is not completely filled out, your application will be returned to you.**

The entire application **must** be presented to law enforcement officials with this form.  
Any alterations of this form will void the agreement.

If you are applying for multiple locations, this form must be submitted for each location.