



# City of Torrance

## Special Event Request (Non-Filming)

### Event Request Instructions

- STEP 1: Complete pages one through three of this request form. The form is available on the City of Torrance WEB page at [www.torranceca.gov/SEFO.htm](http://www.torranceca.gov/SEFO.htm).
- STEP 2: Submit the application with appropriate supporting documents to the Special Events and Filming Office (SEFO) by fax or in person. Fax to (310) 618-5891 Attn: Jay Scharfman. If the event has complicated elements (i.e. special effects, the use of public streets or facilities, or amplified sound, etc.) the request must be submitted four to six weeks prior to the requested date. All other permits require at least a two week notice.
- STEP 3: The Special Events Manager will review the application and determine if additional processing is required. If it does not, the application will be approved at that time and applicant will proceed to STEP 4. If the request requires additional conditions, the applicant will be directed to proceed to STEP 5.
- STEP 4: Pay fee at Business License Department.
- STEP 5: Depending on the nature of the event, processing could include special requirements for City departments or a meeting of the Special Events Committee. The Special Events Manager will explain what will be required of you when the Committee meets on your behalf. Please come prepared to answer any questions the Committee might have. This will assist in facilitating the approval of your event. At that time, the applicant will be informed of all the requirements and fees for their event.
- STEP 6: Pay fee at Business License. Please visit the website or contact the Special Events and Filming Office for more information.

### Insurance Requirements

- A. The applicant must provide, at its sole expense, the following insurance:
  1. Automobile Liability, including owned, non-owned and hired vehicles, with at least the following limits of liability:
    - a) Primary Bodily Injury with limits of at least \$500,000 per person, \$500,000 per occurrence; and
    - b) Property Damage of at least \$250,000 per occurrence; or
    - c) Combined single limits of at least \$1,000,000 per occurrence
  2. General Liability including coverage for premises, products and completed operations, independent contractors and vendors, personal injury and contractual obligations with combined single limits of at least \$1,000,000 per occurrence.
  3. Workers' Compensation with limits as required by the State of California and Employers liability with limits of at least \$1,000,000.
- B. The contractors insurance must be primary and non-contributory.  
 The City of Torrance, City Council, members of boards and commissions, every officer, agent, official, employee and volunteer must be named an additional insured under the automobile and general liability policies.  
 Each insurance policy must contain a provision that no termination, cancellation or change of coverage can be made without 30 days prior notice to the City.  
 The insurers must be admitted to do business in California and rated B+ or better in the most recent addition of the Best's Key Rating Guide and only if they are a financial class of VII or better.

### Applicant Information

Name of Event: \_\_\_\_\_ Date: \_\_\_\_\_

Requesting Organization: \_\_\_\_\_

Profit                       Non-Profit                       Non-Profit ID \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ FAX \_\_\_\_\_

Contact Person \_\_\_\_\_ Cell \_\_\_\_\_



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### Event Information

Type of Event:

- |  |                                      |  |  |
|--|--------------------------------------|--|--|
| <input type="checkbox"/> 5K/10K/Marathon | <input type="checkbox"/> Bike Race   | <input type="checkbox"/> Charity Event | <input type="checkbox"/> Demonstration |
| <input type="checkbox"/> Circus/Carnival | <input type="checkbox"/> Street Fair | <input type="checkbox"/> Boutique      | <input type="checkbox"/> Car Show      |
| <input type="checkbox"/> Outdoor Market  | <input type="checkbox"/> Parade      | <input type="checkbox"/> Concert       | <input type="checkbox"/> Exhibit       |
| <input type="checkbox"/> Other _____     |                                      |  |  |

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Location: \_\_\_\_\_

Anticipated Attendance: \_\_\_\_\_ Anticipated Participants: \_\_\_\_\_

Describe Event's Activities:

Additional Elements (Check all that apply):

- |  |                                       |                                     |                                     |
|--|---------------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Amplified Sound | <input type="checkbox"/> Generator    | <input type="checkbox"/> Barricades | <input type="checkbox"/> No Parking |
| <input type="checkbox"/> Street Closure  | <input type="checkbox"/> Lane Closure | <input type="checkbox"/> Food Sales | <input type="checkbox"/> Restrooms  |
| <input type="checkbox"/> Tent            | <input type="checkbox"/> Games/Rides  | <input type="checkbox"/> Animals    | <input type="checkbox"/> Vendors    |
| <input type="checkbox"/> Other _____     |                                       |                                     |                                     |

### Event Information Continued

Private Security:

\_\_\_\_\_  
*Name of Firm* *Contact Person*

\_\_\_\_\_  
*Address* *City* *State* *Zip*

\_\_\_\_\_  
*Phone* *License Number*

- Yes  No

\_\_\_\_\_  
*Number of Guards* *Armed*





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Fire Department	
CONDITIONS:	
<i>Department Signature</i>	<i>Date</i>

Community Development	
CONDITIONS:	
<i>Department Signature</i>	<i>Date</i>

City Manager Approval	
COMMENTS:	
<i>Signature</i>	<i>Date</i>

Finance Department	
Conditions Met And Fees Paid	
<i>Signature</i>	<i>Date</i>

Agreement	
I hereby certify that (1) the information in this application is true to the best of my knowledge; (2) I will ensure compliance with the conditions of the permit, including any attachments, and obtain approval for changes in the original permit; and (3) Failure to comply with these requirements may result in the immediate cancellation of this agreement.	
<i>Name (Print)</i>	<i>Title</i>
<i>Signature</i>	<i>Date</i>

Contact Information	
Special Events and Filming Office 3031 Torrance Blvd. Torrance, CA 90503 310.618.2456 310.618.5891 FAX Contact: Jay Scharfman <a href="mailto:jscharfman@torranceca.gov">jscharfman@torranceca.gov</a>	City of Torrance Business License Finance Department 3031 Torrance Blvd. Torrance, CA 90503 310.618.5923





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Action Check List		
Event Element		Action Required
<input type="checkbox"/>	Sound Permit	
<input type="checkbox"/>	No Parking	
<input type="checkbox"/>	Lane Closure	
<input type="checkbox"/>	Street Closure	
<input type="checkbox"/>	Barricades	
<input type="checkbox"/>	Tent	
<input type="checkbox"/>	Vendors	
<input type="checkbox"/>	Food Preparation	
<input type="checkbox"/>	Food Sales	
<input type="checkbox"/>	Notifications	
<input type="checkbox"/>	Insurance Certificate	
<input type="checkbox"/>	Generator	
<input type="checkbox"/>	Games/Rides	
<input type="checkbox"/>	Restrooms	
<input type="checkbox"/>	Airport	
<input type="checkbox"/>	Parks	
<input type="checkbox"/>	Repeating Event	
<input type="checkbox"/>	Animals	
<input type="checkbox"/>	Casino	The City does not approve casino events
<input type="checkbox"/>	Private Property	
<input type="checkbox"/>	Public Property	
<input type="checkbox"/>	Other	
<input type="checkbox"/>	Other	
<input type="checkbox"/>	Other	
<input type="checkbox"/>		
<input type="checkbox"/>		