



Request for Special Event

Village of Whitehouse
PO Box 2476, Whitehouse, OH 43571
Phone: (419) 877-5383/ Fax: (419) 877-5635

Name of Event: _____
Coordinator/Contact Person: _____
Address: _____
Phone: _____ Email: _____
FAX: _____
Event Date(s): _____ Event Hours: _____
Estimated Number of Attendance: _____
Brief Description of Event: _____

Will the Event Use Signage/Attraction Devices? Yes No
Amplified Voice/Music? Yes No
Food/Beverage Sales? Yes No Alcoholic Beverage Sales: Yes No
Product Sales? Yes No Other (explain): _____
If YES to any of the above, please explain: _____

Identify any Village services, public facilities, or equipment you are requesting in conjunction with this event:

() Police Assistance () Streets Closed () Enclosed Shelterhouse () Pavilion () Other
Explain: _____

PLEASE supply a map highlighting the property, temporary structures (identifying use and activity), pedestrian ways and/or streets that will be impacted by this event.

Payment for Services: The Event Coordinator/Contact Person/Sponsoring Entity shall make payment for services payable to *The Village of Whitehouse*. Payment must be received by the Village of Whitehouse no later than ten (10) business days after the event.

Total Number of Employees Required: _____ Total Amount Required per Employee: \$_____/hr.

TOTAL Amount to be submitted to the Village of Whitehouse by Event Coordinator: \$_____

READ THE FOLLOWING BEFORE SIGNING

The submittal of this event form does not ensure approval of the event.

Be advised, the Village cannot accommodate every event and some events may require reimbursement for services rendered. You must attach to this application either an Insurance Policy or a Certificate of Insurance that includes the policy number, amount of coverage, and the provision that the Village of Whitehouse is included as an Additional Insured. The insurance requirements depend on the risk level of the event.

The applicant agrees to defend, indemnify, and hold harmless the Village of Whitehouse from any claim, demand, suit, loss, cost of expense, or any damage which may be asserted, claimed or recovered against or from the Village of Whitehouse by reason of any damage to property, personal injury or bodily injury, including death, sustained by any person whomsoever and which damage, injury, or death, arises out of this activity

Signature: _____ Date: _____

**6925 Providence Street . PO Box 2476 . Whitehouse, Ohio 43571
Phone 419-877-5383 . Fax 419-877-5635
whitehouseoh.gov**

AGREEMENT FOR SERVICE – SPECIAL EVENTS

WHEREAS, by Resolution, the Village Administrator of the Village of Whitehouse, Ohio, is authorized and empowered to enter into written agreements with public or private organizations, to assign Village employees to special duties, with such organizations, when, in the opinion of the Village Administrator and Chief of Police, such duty serves the purpose of public safety, traffic control and the public welfare.

Now, therefore, it is agreed by and between the parties as follows:

- 1. The Chief of Police shall assign a designee to oversee the scheduling of officers to provide police/security services for the following event:

_____ See attached map showing locations and that such officer(s) shall at all times be subject to all Federal, state and local ordinances, including the policies and procedures of the Village of Whitehouse and the Whitehouse Police Department.

- 2. The Police Chief reserves the right to honor or reject this request based upon officer availability and/or needs of the agency.
- 3. The uniform of the officer(s) shall always be under the control of the Chief of Police.
- 4. Officer(s) who are assigned to this event shall be paid for this service in accordance with the current fee schedule for services as enacted by the Village of Whitehouse, Ohio Council.
- 5. The Village of Whitehouse agrees to furnish officer(s) under the terms of this agreement, if and only if, officer(s) are available for such duty as determined by the Chief of Police.
- 6. Duties of any officer(s) assigned shall be limited to the boundaries of the Village of Whitehouse, Ohio. Exceptions would include those that serve law enforcement interests outside the boundaries of the Village of Whitehouse (i.e., Anthony Wayne School District off-campus, school-sponsored activities, etc.).
- 7. The Event Coordinator/Contact Person/Sponsoring Entity shall make payment for services payable to *The Village of Whitehouse*. Payment must be received by the Village of Whitehouse no later than ten (10) business days after the event.

Total Number of Employees Required: _____ Total Amount Required per Employee: \$_____/hr.
TOTAL Amount to be submitted by Event Coordinator: \$_____

- 8. Officer(s) assigned under terms of this contract shall be covered by Workmen’s Compensation paid on the officer’s behalf by the Village of Whitehouse.
- 9. This agreement may be canceled by either party by 30-day written notice or to the mutual satisfaction of both undersigned parties.
- 10. Requests for additional/reduction of officers to supplement this initial agreement must be made to the Village Administrator no later than fifteen (15) days from the date of the scheduled event.

This agreement entered into on this _____ day of _____, 20_____, by and between the Village of Whitehouse, County of Lucas, State of Ohio, and the Event Coordinator/Contact Person, in witness whereof the parties hereunto have set their hands at Whitehouse, Ohio.

Village Administrator

Event Coordinator/Contact Person

REQUEST FOR SPECIAL EVENTS SERVICES—VILLAGE OF WHITEHOUSE, OHIO

TYPE OF FUNCTION/ACTIVITY: _____

DATE/TIME OF FUNCTION/EVENT: _____

LOCATION: _____

NUMBER OF OFFICERS REQUIRED: _____ (Determined by Police Chief)

NUMBER OF ADDITIONAL VILLAGE EMPLOYEES: _____ (Determined by Department Head)

EVENT COORIDNATOR CONTACT INFORMATION:

NAME _____

ORGANIZATION _____

ADDRESS _____

PHONE _____

EMAIL _____

FAX _____

Payment for services rendered in the amount of \$ _____ will be submitted to:

The Village of Whitehouse
6925 Providence St.
P.O. Box 2476
Whitehouse, OH 43571

Payment in full required by: _____

For Office Use Only

Date: _____

____ Approved as requested.

____ Approved, with modifications (specify):

____ Disapproved (specify):

Village Administrator _____

Chief of Police _____

Public Service Director _____

Fire Chief _____

Community Development Coordinator _____