

### BOARD OF COUNTY COMMISSIONERS

### **EVENT APPLICATION**

Thank you for your interest in holding a special event in Kittitas County. Please complete and return this application along with any other materials to the Kittitas County Board of Commissioners at least 60 days prior to the day upon the event is scheduled. Any misrepresentation in the application materials or deviation from the final agreed upon route and/or method of operation described may result in the immediate revocation of an issued permit. Specifics outlining Event Permits can be viewed at <a href="http://www.co.kittitas.wa.us/boc/countycode/title05.asp">http://www.co.kittitas.wa.us/boc/countycode/title05.asp</a>

### **Event Information**

Name of event: Heart by Heart								
Date(s) of event: Friday, July 18, 2014								
Hours of operation: 5PM-10PM								
Description of the event: An outdoor concert in the Swiftwater Cellars Ampitheater								
with approximately 700-800 guests								
Has this event taken place before? Ves No Dates: 7/6/2013								
Estimated attendance: 700-800								
How is your event being publicized? Radio, Print, Social Media, Television.								
Only posters have been created thus far.								
Please attach any flyers, posters, etc. with your application submission.								
<b>Contact Information</b>								
Name of the organizer/contact person: Colette Graham								
Address: PO Box 492, Roslyn, WA 98941 RECEIVED								
Phone number(s): 509.852.7310								
Email address: colette@swiftwatercellars.com								
Date of birth of applicant: 11/22/1984								
OF COMMISSIONS								

If the application is made on behalf of a parresidence and post office address for a peri application together with the location of proporation.	
Emergency contact name(s) and phone nur event:	nber(s) that can be contacted during the
Colette Graham	509.260.0096
Name	Phone Number
Don Watts	509.727.1814
Name	Phone Number
WRITTEN PERMISSION TO ENTER EV	ENT SITE
I/We hereby permit law enforcement and /	or County officials to enter the site for which
the Event Application has been granted at	
	ecting and enforcement of County Code and
other applicable laws, and pursuant to my connection with this Event Application.	
SWORN STATEMENT OF COMPLIANCE	CE CE
I/We hereby acknowledge that I/We have	read Kittitas County Code, have
familiarized myself with County requirement	•
agent or I/we shall be on site at all times an	
	requirements in connection with this event.
1	•
I/We understand that failure to comply wi	th the rules, regulations and conditions set
forth in Code may be deemed a gross misd	emeanor and that drug or narcotics
violations are crimes under RCW.	$\Omega$
	1 of the Carlo Man
Colette Graham	The your dorn
Applicant Name (Print)	Applicant Signature

Don Watts
Applicant Name (Print)



### BOARD OF COUNTY COMMISSIONERS

# **Fire Safety and Protection**

If more than 50 people are expected at your event, you must complete a separate application process which can be obtained through the Kittitas County Fire Marshal's office. You may contact the Fire Marshal's office at 509-962-7000.

Will there be a temporary structure erected for the event?



No

If yes, you must attach a drawing including the dimensions. The structure may require an inspection by County staff prior to the event.

### Public Health/Environmental Health

Will there be food served at the event?



No

If no food will be served at the event then, no permit or application is required.

If yes, is the food and beverage that you intend on preparing and serving at the event exempt from permit requirements <a href="http://www.co.kittitas.wa.us/health/food.asp">http://www.co.kittitas.wa.us/health/food.asp</a>?

- If yes, please submit an <u>application for exemption</u> from permit and proof of food handlers training to the Kittitas County Public Health Department (KCPHD).

If yes, and the food or beverage is <u>not</u> considered exempt from permit, then does the person or organization preparing and serving the food have a food service permit, temporary food service permit, or catering permit from KCPHD?

- If yes, please provide a list of foods and beverages that you intend on having prepared and served at the event along with the name and phone number(s) of the permitted person or organization.

If yes, and the person or organization preparing and serving the food <u>does not</u> already have a food service permit.

- Then a temporary food service permit or catering permit will need to be acquired from KCPHD prior to the event.

Please allow at least 2 weeks to complete the food service permitting process.

Are there permanent or fixed bathroom facilities already available at the location of the event?



If yes, please provide an estimated attendance for the event, a detailed map that identifies the name and address of the physical facility that will provide lavatory facilities for the event, quantity of toilette facilities available for each gender, and the distance from the event that patrons must walk.

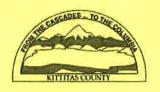
If no, please provide an estimated attendance for the event, specific information related to the number of portable restrooms that will be provided, the distance from the event that patrons must walk, and a service plan to ensure that sani-cans remain in a sanitary condition. You must include the location of the portable restrooms on a map/diagram of the event.



# BOARD OF COUNTY COMMISSIONERS

# Law Enforcement/Security/Emergency Medical Services

Will there be security on site during the event?
If yes, please provide a complete list of names and contact information for who will providing the security.
Will Emergency Medical Services (EMS) be on site during the event? Ves No
If yes, please provide written verification from the providers.
Will there be music, sound amplification or any other noise impacts? Ves No
If yes, Kittitas County has a noise ordinance in effect (see County Code for details). I your event is scheduled for outside of the allowed time, you must submit a written letter to the Board of County Commissioners requesting a waiver and it must be included with your application materials.
Will you have traffic control? Ves No
If yes, please provide documentation on how the traffic control will be addressed.
Will there be off-site parking? Yes No
If yes, please provide the location and a parking plan.
Will there be shuttle buses provided for attendees? Ves No
If yes, provide a map of their route.
Will there be alcohol served at the event? Ves No
If yes, a State permit is required from the WA State Liquor Control Board and mus submitted with your application materials.



# Kittitas County, Washington BOARD OF COUNTY COMMISSIONERS

### **Public Roads**

Will the event obstruct, interfere or require the closure and free use of any public road, street or right-of-way? Yes

If yes, please provide a detailed adequate traffic and detour plans at the time of submission of the application.

Will there need to be road closure or detour signs posted? Yes





### BOARD OF COUNTY COMMISSIONERS

### Garbage/Recycling

Do you have a plan for garbage and recycling?



A written plan for garbage and recycling must be attached to your application materials. For questions or assistance contact the Kittitas County Solid Waste Department at 509-962-7542.

#### **Insurance**

Have you obtained a Certificate of Insurance, specifically naming "Kittitas County" as an insured? No

A copy of the Certificate of Insurance must be included with your application materials. Kittitas County must be named as an additional insured in the amount of \$1,000,000.00 per occurrence and \$2,000,000.00 aggregate coverage.

### Penal Bond - Bond of Indemnity

A \$5,000.00 Penal Bond - Bond of Indemnity is required to be deposited with the County Treasurer to save and protect the streets, pavements, bridges, etc. from damage. The deposit or its balance will be returned once the event has been held and the Board of County Commissioners has certified no damage has been done and that the County has not incurred additional expenses

Are you submitting a \$5,000.00 Penal Bond - Bond of Indemnity with your Event Application? Yes

If no, you must request a letter in writing to the Board of County Commissioners requesting a waiver to the Penal Bond – Bond of Indemnity and outline the specific reasons why it should not be required of your event.

### **County Filings and Registration**

Is there a cost to attend the event?



No

How much are you charging to attend your event? \$29 per person



For more information, contact concerts@swiftwatercellars.com or call 509.674.6590 Swiftwater Cellars // 301 Rope Rider Drive, Cle Elum, WA 98922 // swiftwatercellars.com

**SWIFTWATER** 



To Protect and Promote the Health and the Environment of the People of Kittitas County

# **FOODSERVICE PERMIT**

**PERMIT NO. FE-13-00061** 

Granted to: SWIFTWATER CELLARS, LLC

# This permit is for:

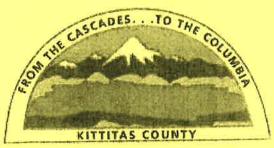
GENERAL FOOD SERVICES FOOD LEVEL 3 / SUPPLEMENTAL CATERING

Permit can only be used at this location 301 ROPE RIDER DR CLE ELUM, WA 98922

# THIS PERMIT EXPIRES ON:

10/31/2014

\*This permit is not transferable\*



PUBLIC HEALTH DEPARTMENT ENVIRONMENTAL HEALTH 507 N NANUM ST, SUITE 102 ELLENSBURG, WA 98926 (509) 962-7515 Sem Sem / Regulatory
Authority

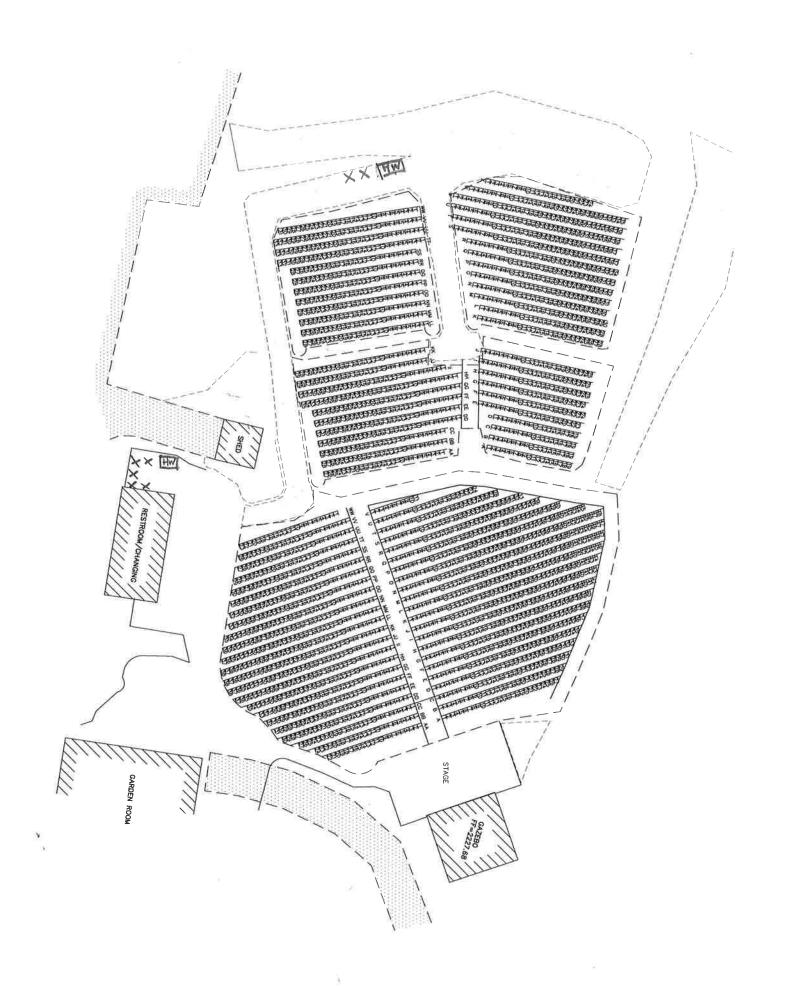
Date

her Towson M.D.

9/17/13

Health Officer

Date





### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/16/2013

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to

	e terms and conditions of the policertificate holder in lieu of such endor		policies may require an e				ils certificate does not c		
PRODUCER Richland Office PayneWest Insurance, Inc. 390 Bradley Blvd.		CONTACT NAME: PHONE (A/C, No, Ext); (509) 946-6161  E-MAIL ADDRESS:  FAX (A/C, No): (509) 946-0715							
Rich	land, WA 99352					SURER(S) AFFOR	DING COVERAGE		NAIC#
			INSURER A: Allied World Nat'l Assurance						
INSU	RED			INSURER B :					
	Swiftwater Cellars, LLC			INSURER C:					
	PO Box 492	di.		INSURER D:					
	Roslyn, WA 98941			INSURER E :					
				INSURI	ERF:				
			ENUMBER:				REVISION NUMBER:		
CI EX	HIS IS TO CERTIFY THAT THE POLICIE DICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OF MAY KCLUSIONS AND CONDITIONS OF SUCH	PERTAIN	ENT. TERM OR CONDITIO THE INSURANCE AFFOR LIMITS SHOWN MAY HAVE	N OF A	ANY CONTRA Y THE POLIC REDUCED BY	CT OR OTHER IES DESCRIB PAID CLAIMS.	DOCUMENT WITH RESPE	CT TO	WHICH THIS
INSR	TYPE OF INSURANCE	INSR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT		
	GENERAL LIABILITY	-	51150079		7/7/2013	717/0044	EACH OCCURRENCE DAMAGE TO RENTED	\$	1,000,000
A	X COMMERCIAL GENERAL LIABILITY	X	3011000/9	N.	11/12013	7/7/2014	PREMISES (Ea occurrence)	\$	1,000,000
	CLAIMS-MADE X OCCUR X Liquor Liability	400					MED EXP (Any one person)	\$	10,000
	X Wa Stop Gap						PERSONAL & ADV INJURY	\$	1,000,000
	<del></del>		Yes Yes	All Property of the Parket			GENERAL AGGREGATE	\$	2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRO- LOC			if			PRODUCTS - COMP/OP AGG	\$	2,000,000
-	AUTOMOBILE LIABILITY		To the second second	4			COMBINED SINGLE LIMIT		1,000,000
AX			51150079		7/7/2013		(Ea accident) BODILY INJURY (Per person)	5	1,000,000
	ALL OWNED SCHEDULED	Manual .			A		BODILY INJURY (Per accident)	\$	
	X HIRED AUTOS X AUTOS NON-OWNED		A MA		1	197°	PROPERTY DAMAGE (PER ACCIDENT)	\$	
	AUTOS AUTOS	1	<b>*</b>				(PER ACCIDENT)	\$	
	X UMBRELLA LIAB X OCCUR		No.				EACH OCCURRENCE	s	5,000,000
A	EXCESS LIAB CLAIMS-MADE	-0	61170079	acht litterin	7/7/2013	7/7/2014	AGGREGATE	s	5,000,000
	DED RETENTION \$				A	Mark to the second		\$	
	WORKERS COMPENSATION	4			4.500	The state of	WC STATU- TORY LIMITS OTH- ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A					E.L. EACH ACCIDENT	\$	
	(Mendatory In NH)						E L. DISEASE PENEMPLOYEE	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below		AND A	h			E,L/DISEASE - POLICY LIMIT	\$	
DESC	RIPTION OF OPERATIONS / LOCATIONS / VEHICL	LES (Attach	ACORD 101, Additional Remarks	Schedule	W more space is	required)			
re: C	oncert Events. Kittitas County is adde	d as addit	ional insured					(g)	
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						CAL STORY			W.Y.
ÇEF	RTIFICATE HOLDER			CANO	ELLATION			HOMOSON (	
				400	W		7.7111111111111111111111111111111111111		
Kittitas County 205 W 5th Ave Ellensburg, WA 98926			SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.						
anonomy of the source					AUTHORIZED REPRESENTATIVE				
		On Whene							



#### Seating

Seating for this event will be festival style seating. This means that there will be general admission with the venue being a large open area and patrons will have to bring their own seating i.e. chairs or blankets. The "seating" will be filled on a first come first served basis.

#### Food & Beverage

Swiftwater Cellars will be serving various foods that will be prepared onsite in our cooking facilities as covered under our Kittitas County Public Health Department "General food services food level 3/ Supplemental Catering" Permit. The permit number is FE-13-00061 and is valid through October 31, 2014. All staff that will be handling food will have valid food handler's permits. Beer, wine, and select hard alcohol will be available during the concert. Swiftwater Cellars staff will be on hand to check IDs for all patrons who will be consuming alcohol and staff will also be roaming the venue looking for any alcohol consumption violations that may occur.

#### **Bathroom Facilities**

Currently, the Swiftwater Cellars Amphitheater has 8 fixed restroom units. We will be bringing an additional 7 restrooms and 2 hand washing stations to handle the crowd of approximately 800 people. With a total of 15 restrooms, approximately 7 will be for males and 8 for females. Please see the attached map for the proposed restroom locations that are marked with an X. Patrons will not need to more than 100 feet to reach a restroom from anywhere inside the venue. There will also be 2 restrooms and a hand washing station located at the offsite parking location. M.T.H Septic Service will be providing the portable units for our event. The address for M.T.H Septic Service is 281 Hugh Banks Road, Cle Elum, WA 98922.

#### Security

Swiftwater Cellars staff will be providing security for the event. We anticipate have 10-15 staff members onsite for security during the event to keep patrons safe and assist in controlling human traffic in an orderly fashion. Leena Haija will be the event manager at the concert. We also plan on having 2 off-duty deputies onsite for any disturbances and safety concerns. There will also be an additional 20-30 Swiftwater Cellars staff members onsite handling various functions for the event.

#### **EMS Services**

We have an agreement with Fire District 7 and they will provide an onsite team to handle any EMS needs that may arise during the event.

#### **Traffic Control**

Parking at the event venue will be extremely limited and all event attendees will be encouraged to park at the offsite parking location. Please see the offsite parking plan below. Handicap access parking spots will be maintained at the event venue for patrons displaying a state certified placard.

#### **Offsite Parking**

Event patrons will be instructed to park at the Nelson Dairy Farm located on Suncadia Property. Parking attendants will be at the offsite location to direct traffic and maintain safety at the location. Any patrons staying at the Suncadia Lodge can park there and take the Suncadia shuttle to the venue.

#### **Shuttle Buses**

Shuttle buses will be provided for patrons parking at the Nelson Dairy Farm. There will be 2 buses shuttling between the venue and offsite parking.

#### Garbage/Recycling

We have a contract with Waste Management of Ellensburg and they will bring additional dumpsters to our location to handle the increased amount of garbage produced by the event.

#### Insurance

Swiftwater Cellars current certificate of liability has been included with the Kittitas County event application. Kittitas County will be receiving a new certificate of liability from the Swiftwater Cellars insurance agent prior to the policy expiration date and Kittitas County will be named as an insured certificate holder.