

**City of Shreveport  
Special Permit Application  
Street Closures (Simple)**

(1) This application must be COMPLETED and forwarded to the SPAR office forty-five (45) calendar days prior to the 1<sup>st</sup> day of the event.

**\*Submission of this application does not confirm event. The Event Task Force must review & approve the COMPLETED event application.**

SPAR Event Services  
RE: Special Events Application  
101 Crockett St, Suite A (The Depot)  
Shreveport, LA 71101

call: (318) 673-5100  
or fax: (318) 673-5105

(2) Once the event has been approved, **NO CHANGES** may be made in the plans without Task Force **APPROVAL**.

(3) No advertisement or invitations for the event may be made without Task Force **APPROVAL**.

*Any misrepresentation in this application or deviation from the final agreed upon activities and/or method of operation described herein may result in the immediate revocation of the permit and/or cancellation of the event. If you have any questions, please call (318) 673-5100.*

PLEASE SIGN AND DATE ON THE LINES BELOW INDICATING THAT YOU UNDERSTAND AND WILL ABIDE BY THE ABOVE REGULATIONS. THANK YOU.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

**City of Shreveport  
Special Permit Application  
Street Closures (Simple)**

**EVENT INFORMATION**

Public (anyone is invited)  Private (select group of people invited)

Requested Event Day & Dates: \_\_\_\_\_

**PLEASE INCLUDE A MAP of street/intersecting streets, and routes**

Street Closures: Specific intersection(s): \_\_\_\_\_

Estimated Total Attendance \_\_\_\_\_ Past Total Attendance \_\_\_\_\_

Age Range of Attendees: \_\_\_\_\_

Title of the Event: \_\_\_\_\_

Purpose of the Event: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Producing Organization (If Applicable) \_\_\_\_\_

\*\*Must match the insurance certificate

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: Day \_\_\_\_\_ Evening: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Event Coordinator (If Different from Applicant :) \_\_\_\_\_

What time frame is your event?

Start Time \_\_\_\_\_ End Time \_\_\_\_\_

What time do you need the street closed AFTER 9a? \_\_\_\_\_

**STREETS MUST REOPEN NO LATER THAN 8PM.**

**ALL PARTY RELATED ITEMS MUST STAY OFF CITY PROPERTY WHICH INCLUDES**

**SIDEWALKS TO THE STREET.**

**STREETS MUST REMAIN CLEAR FOR EMERGENCY VEHICLES**

**City of Shreveport  
Special Permit Application  
Street Closures (Simple)**

**SET-UP PLAN (DIAGRAM):**

The set-up plan (Diagram) for the event must be submitted with the application in full and include the following information:

**ALL ITEMS MUST BE ON PRIVATE PROPERTY.  
STREETS MUST STILL BE CLEAR FOR EMERGENCY VEHICLES**

Will you be using tents?  Yes  No

Will the tent have sides?  Yes  No

Private Pop Up tents?  Yes  No

If yes, how many sides: \_\_\_\_\_

OR Contracted tent company?  Yes  No

Name of company \_\_\_\_\_

**Please provide detailed entertainment lineup. \*\*\*Loud Noise permit may be required\*\*\***

DJ: \_\_\_\_\_  Live Band: \_\_\_\_\_

**\*\*NO SUBSTITUTIONS OR CHANGES** to Live Entertainment Groups are allowed without approval of The Event Task Force

**LIST ALL** Other Entertainment (i.e. Carnival rides, sporting activities, bounce houses, etc.)

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

\_\_\_\_\_ All Carnival ride and Inflatables must be inspected by the Louisiana State Fire Marshal's Office. Organizer is responsible for requesting the inspector a minimum of 14 days prior to event admission, whether free charge or admission:

Current Amusement Ride Inspector: Captain Ricky Roubique 1-225-938-2360 1-800-256-5452

Will there be Fireworks?  Yes  No

Date and Time of Fireworks: \_\_\_\_\_

Contact Name, Phone No. & Address: \_\_\_\_\_

\_\_\_\_\_ Shreveport Fire Dept Fire Prevention office must be contacted at minimum of 30 days prior. State Fire Marshal office may also be required.

Concessions or Food Vendors including Food Trucks (Please make sure each food vendor has a certificate of liability insurance)

Describe each vendor (attach additional sheet if necessary)

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

**City of Shreveport  
Special Permit Application  
Street Closures (Simple)**

**COST ASSOCIATED WITH EVENT WILL BE BILLED TO APPLICANT / PRODUCING ORGANIZATION**

All costs associated with your event including electrician, trash removal, event clean up including bathrooms, by SPAR employees, will be the responsibility of the event applicant. An estimate of the cost will be made available before the contract is signed. Call Event Services for estimates at (318) 673-5100.

Damage to City Property will be assessed and billed accordingly.

**SAFETY PROCEDURES**

**The cost of security is the responsibility of the applicant.** The number and type will be determined by the Chief of Police or his designee. A labor cost will be provided by the Shreveport Police Department by calling (318) 673-6945 or (318) 673-6946. The requirements of having EMS (318) 673-6720 or Fire Prevention (318) 673-6740 on site will be evaluated and made on the basis of each event by the City of Shreveport Task Force Committee.

**Applicant is responsible for contacting the Shreveport Police Department and/or the Shreveport Fire Department at least two (2) weeks prior to the event.**

**ADVERTISING OR INVITATIONS**

**Please provide a copy of all advertising, programs, invitations, etc**

No advertisement or invitations for the event may be made without **PRIOR APPROVAL** from the Task Force.

Please describe the type of promotion you will be using:

- TV  Radio  Poster  Billboard  City Calendar  Flyer  Newspaper  Invitations  
 Website: \_\_\_\_\_  Social Media: \_\_\_\_\_  Other: \_\_\_\_\_

Contact name & phone number to be used for public information:

\_\_\_\_\_

**PARKING PLANS**

A parking plan is required with each permit. Streets cannot be blocked from emergency parking. Where are the overflow cars going to park? What are you publicizing for overflow parking? Please submit advertisement of overflow parking.

Please submit a flyer that is placed at the neighbors door regarding overflow cars being parked on the street. With the flyer, must include your public phone number as well as SPAR Event Services (318) 673-5100 for complaints.

**City of Shreveport  
Special Permit Application  
Street Closures (Simple)**

**INSURANCE REQUIREMENTS (if required):**

For the application to be approved, the applicant must submit a City-Approved Certificate of Liability Insurance naming the City of Shreveport as the additional insured. The Certificate must have the City of Shreveport as the certificate holder. **The Insured must match the Producing Organization or Applicant's Name and information.** The Certificate of insurance must be submitted with this permit application. The time limit on the policy must include set-up and take-down times, as well as the time of the event. The beginning of the set-up is to include deliveries prior to the event date, such as tents, flowers, decorations, portable toilets, etc. User's insurance is to be written by companies licensed to do business in the State of Louisiana at the time the policies are issued and should be written by companies with A.M. Best ratings of B+VII or better. The Applicant will, at his/her own expense, provide and maintain certain insurance in full force and effect at all times during the term of the agreement. Such insurance, at a minimum, must include the following coverage's and limits of liability.

- a) **Commercial General Liability Insurance (CGL)** in the amount not less than a combined single amount (each occurrence) of \$1,000,000 (One Million) and a general aggregate of \$2,000,000 (Two Million). The policy should be endorsed to name the City and the property owner as additional insured. The policy should contain the following endorsements in favor of the Owner:
  - a. **Waiver of Subrogation Endorsement**
  - b. **Thirty (30) day notice of Cancellation Endorsement**
  - c. **Additional Insured Endorsement Naming City of Shreveport**
- b) The CGL policy must be endorsed to remove the liquor liability exclusion contained in the policy if the contractor intends to allow the sale, serving, or consumption of alcoholic beverages at the event. Host Liquor Liability is required if not already in the policy.
- c) Insurance types, limits, & prices are subject to change, depending on the type of event.
- d) **Worker's Compensation Insurance** as required by laws of the State of Louisiana and Employer's Liability Insurance in a minimum amount of \$1,000,000 (one million). The policy should contain the following endorsements in favor of the Owner:
  - a. **Waiver of Subrogation Endorsement**
  - b. **Thirty (30) day notice of Cancellation Endorsement**
  - c. **Additional Insured Endorsement Naming City of Shreveport**
- e) **Business Automobile Liability Coverage** will protect against all claims for bodily injury or property damage, covering all owned, non-owned, and hired vehicles used in connection with the work including loading and unloading with minimum limits of \$100,000 (One Hundred Thousand) per person and \$500,000 (Five Hundred Thousand) per accident. The policy should contain the following endorsements in favor of the Owner:
  - a. **Waiver of Subrogation Endorsement**
  - b. **Thirty (30) day notice of Cancellation Endorsement**
  - c. **Additional Insured Endorsement Naming City of Shreveport**
- f) **NO SUBSTITUTIONS OR CHANGES TO INSURANCE REQUIREMENTS WILL BE ALLOWED UNLESS APPROVED BY THE CITY OF SHREVEPORT, RISK MANAGER.**  
Current Risk Manager: Richard Hunter, (318) 673-5540.

**City of Shreveport  
Special Permit Application  
Street Closures (Simple)**

**HOLD HARMLESS CLAUSE**

Applicants (Organizations/Applicant) will indemnify, defend and hold harmless the City of Shreveport, its agents, its employees and authorized volunteers from and against all claims, damages, losses and expenses, including attorney's fees, arising out of the permitted activity or conduct of permittee's operation of the event if such claim (1) is attributable to personal injury, bodily injury, disease or death or injury to or destruction of property, including the loss of uses there from and (2) is not caused by any negligent act or omission of willful misconduct of the City of Shreveport or its employees acting within the scope of their employment.

The City of Shreveport shall not be liable for Applicants' inability to hold the permitted activity for any reason including, but not limited to, catastrophe, act of war, civil disturbance, global pandemic, public health emergency, act of God or similar contingency beyond the reasonable control of the City of Shreveport. Applicants shall take all such measures as may be necessary to develop contingency plans to mitigate any disruption for such permitted activity. Applicants will indemnify, defend and hold harmless the City of Shreveport, its agents, its employees and authorized volunteers from and against all claims, damages, losses and expenses, including attorney's fees, arising out of the Applicants' inability to hold the permitted activity.

**APPLICANT STATEMENT**

I, the undersigned, do attest that the information provided is true and correct to the best of my knowledge. If any part of this application IS NOT TRUE, then the application WILL BE REJECTED and/or the contract WILL BE VOIDED. I understand that it is my responsibility to ensure compliance with the following:

- a) The observance of all applicable laws and ordinances;
- b) Any stipulations or restrictions of the permit;
- c) The applicant will assume any and all liabilities that may arise by the permitted activity as noted in the above Hold Harmless Clause; and
- d) Applicant will notify the Division Manager of Event Services, (Charles Hymes) or designee, in writing if any of the information given in this application changes **ten (10) days prior to the first day of the event.**

\_\_\_\_\_  
Signature of Person Requesting Permit

**City of Shreveport  
Special Permit Application  
Street Closures (Simple)**

**FOR OFFICE USE ONLY: EVENT INFORMATION**

Requested Event Day & Dates: \_\_\_\_\_

Title of the Event: \_\_\_\_\_

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

<b>EVENT TASK FORCE</b>	<b>DATE</b>	<b>APPROVED BY:</b>	<b>Notes:</b>
Traffic Engineering			
Sportran			
Shreveport Police			
Shreveport Fire Prevention			
Shreveport Fire/EMS			
Risk Management			
SPAR Maintenance			
SPAR Event Coordinator			
Division Manager			

**Notes:**

City of Shreveport  
Special Permit Application  
Street Closures (Simple)

# USE ONLY FOR STREET CLOSURE / BLOCK PARTY APPLICANTS:

**Block Parties cannot begin earlier than 9:00 AM and end no later than 8:00 PM.**

**Please ask all residents living on the street(s) to be closed to sign the petition below indicating their approval or disapproval. EACH RESIDENT MUST PRINT NAME. THE APPLICANT IS NOT TO COMPLETE THIS PAGE IN ANY FASHION.**

**I AGREE / DISAGREE WITH THE CLOSING OF**

**THE \_\_\_\_\_ BLOCK(S) OF \_\_\_\_\_ STREET**

**ON THE FOLLOWING DATE(S) \_\_\_\_\_ & TIME \_\_\_\_\_ AM TO \_\_\_\_\_ PM**

NAME	ADDRESS	PHONE #	DO NOT APPROVE	APPROVE

**Block Parties cannot begin earlier than 9:00 AM and end no later than 8:00 PM.**

**Map of requested street closure must be included.**