



CITY OF BELLEVUE City Hall Events Program

BELLEVUE CITY HALL
FACILITY REQUEST FORM

EVENT DATE: _____

CONTACT INFORMATION

PRIMARY CONTACT: _____
This is the person held primarily responsible for providing to the City all required event information including licenses, permits, and certificates by the established deadlines.

PHONE: _____ **EMAIL:** _____

ADDRESS: _____ **CITY:** _____ **ST:** _____ **ZIP:** _____

ORGANIZATION: _____

ORGANIZATION'S AFFILIATION:

City of Bellevue Program Governmental Agency Neighborhood/Community Association Local Non-Profit ID # _____

IS CITY OF BELLEVUE CO-SPONSORING THE EVENT? Yes No

IF YES, WHICH CITY DEPARTMENT? _____ **CITY STAFF CONTACT:** _____
Co-sponsoring means City staff are collaborating on planning, are providing staff to assist with logistics, share responsibility for ensuring facility usage guidelines are met, and will attend the event.

IF FEE APPLIES, INVOICE IS TO BE SENT TO: Primary contact Other (see below)

NAME: _____ **COMPANY:** _____

ADDRESS: _____ **CITY:** _____ **ST:** _____ **ZIP:** _____

SPACE & USE

EVENT NAME: _____

EVENT PURPOSE/DESCRIPTION: _____

DOES EVENT INVOLVE DISCUSSION/DIALOGUE WITH THE GENERAL PUBLIC? Yes No

If yes, **WHAT IS THE DISCUSSION TOPIC?** _____

TOTAL TIME REQUESTED: From _____ To _____ (Include setup, takedown, cleanup)

ACTUAL EVENT TIME: From _____ To _____

ANTICIPATED ATTENDANCE: Total _____ Adults _____ Children _____

DOES THE EVENT NEED ACCESS TO THE CITY'S PROJECTION EQUIPMENT? Yes No

The City does not guarantee our AV equipment will be operational or compatible with your electronic equipment. The City does not provide IT or AV technical assistance.

INDICATE THE SPACE YOU ARE REQUESTING: (if unsure, leave blank and we will place you in a space appropriate for your event):

- | | | | |
|--------------------------------------|--------------------------------------|--------------------------------------|--|
| <input type="checkbox"/> Room 1E-108 | <input type="checkbox"/> Room 1E-111 | <input type="checkbox"/> Room 1E-118 | <input type="checkbox"/> Room 1E-121 |
| <input type="checkbox"/> Room 1E-109 | <input type="checkbox"/> Room 1E-112 | <input type="checkbox"/> Room 1E-119 | <input type="checkbox"/> Council Chamber (food/beverage not allowed) |
| <input type="checkbox"/> Room 1E-110 | <input type="checkbox"/> Room 1E-113 | <input type="checkbox"/> Room 1E-120 | <input type="checkbox"/> Concourse ¹ |

¹Special Events require a plan/drawing indicating where items will be setup. A detailed event timeline from beginning to end is also required.

ENTERTAINMENT / FOOD / BEVERAGES

WILL THERE BE ENTERTAINMENT? Yes No **DESCRIBE:** _____

WILL THERE BE AMPLIFIED SOUND? Yes No **FOR WHAT PURPOSE?** _____

HOW WILL SOUND BE AMPLIFIED? PA System Stereo Live Band DJ Other _____
For Outdoor Plaza: See BCC 9.18 for Noise Control requirements. A sound amplification permit may be required. Contact Development Services for requirements 425-452-4898.

WILL YOU SERVE FOOD AND/OR BEVERAGES? Yes No DESCRIBE: _____
Food and beverages are not allowed in our facility unless you have advised us in advance. City Hall is not equipped with kitchen facilities.

WILL EVENT BE CATERED? Yes No
If yes, COMPLETE A "BELLEVUE CITY HALL CATERING FORM."

WILL STERNO/FLAME BE USED? Yes No
If yes, fire extinguishers are required and we will have Fire Department review space setup for Fire Code compliance.

REQUEST PERMISSION TO SERVE WINE/BEER? Yes No **WILL YOU BE SELLING WINE/BEER?** Yes No
The City of Bellevue reserves the right to deny permission to serve wine/beer at the Bellevue City Hall campus.

SELLING CONCESSIONS or PROVIDING GIVEAWAYS? Yes No Vendor Name(s) _____

DESCRIBE CONCESSIONS / GIVEAWAYS: _____
The City of Bellevue reserves the right to deny the sale or distribution of items deemed to be hazardous, a nuisance, or not family friendly.

SPACE SETUP

FOR MEETING ROOMS, IS THE STANDARD SPACE CONFIGURATION SUITABLE FOR YOUR USE?

- Yes I will use the space "as is" and will ensure the space remains in its standard configuration.
 No I would like to request a different configuration. Speak with us about available options; fees apply.

DO YOU NEED ACCESS TO ELECTRICITY? Yes No WHAT FOR? _____

WHAT EQUIPMENT ARE YOU BRINGING? _____

ARE YOU RENTING EQUIPMENT? Yes No Rental Company: _____
For some items, a certificate of insurance is required from rental company naming City of Bellevue as an additional insured with \$1 million General Liability Coverage.

WILL YOU HAVE DELIVERIES MADE TO CITY HALL? Yes No WHAT WILL BE DELIVERED? _____
On-site storage is not available. You must be available to receive your deliveries on-site unless you have made other arrangements with our staff.

AGREEMENTS

The applicant agrees that during the use of the City of Bellevue City Hall facility to not exclude anyone participation in, deny anyone the benefit of, or otherwise subject anyone to discrimination because of the person's race, color, national origin, age, sex, or disability.

The undersigned hereby makes application to the City of Bellevue for use of the City Hall facility described above and certifies that the information given in the application materials is correct. The undersigned further states that he/she has the authority to make this application for the applicant and agrees that the applicant will observe the rules/regulations and policies/procedures of the City of Bellevue. The applicant agrees to exercise the utmost care in the use of the premises and property and to defend and hold the City of Bellevue harmless from all liability resulting from the use of said facilities. The applicant further agrees to reimburse the City of Bellevue for any damage arising from the applicant's use of said facilities. The applicant signing this agreement will be considered the responsible party in case of damage, theft, or disturbances during the usage period.

- I have read, understand, and accept all procedures and regulations in the City of Bellevue's City Hall Meeting & Event Facilities Guidelines & Information document. I further certify that I am 21 years of age or older and I understand that failure to comply with the established facility use guidelines (and within the established timeframes), puts my meeting or event at risk for cancellation.

Primary Contact Signature: _____ **Date:** _____

City of Bellevue Department Director Signature: _____ **Date:** _____

If this is a co-sponsored event, the Director of the City of Bellevue department providing co-sponsorship must also sign this form and accept these terms.

(OFFICE USE ONLY)

Fee Applicable? Yes No Fee Amount: _____ Invoice date: _____

RESET

SUBMIT