



# City of BELL GARDENS

7100 Garfield Avenue • Bell Gardens, California 90201 • 562.806.7700 • Fax 562.806.7720 • www.bellgardens.org

## SPECIAL EVENT PERMIT APPLICATION – TYPE I

RUMMAGE SALES, CAR WASHES, BAKE SALES, GRAND OPENINGS, GOING OUT OF BUSINESS SALES, PARKING LOT SALES, HOLIDAY SALES, ETC.

**Permit Fee:**

For Profit \$136 B.G. Non –Profit (501c3) \$100

This application must be **submitted at least seven (7) working days prior** to the beginning of the event. A letter from the property owner and plot plan of the site must accompany every Special Event Permit Application.

Events held at City-owned facilities require approval from the Recreation/Community Services Department. Permit application must be submitted to the Community Development Department **(14) fourteen working days prior** to the beginning of the event.

\_\_\_\_\_  
**ADDRESS OR GENERAL LOCATION OF EVENT**  
*Dirección del evento*

\_\_\_\_\_  
**APP #**

\_\_\_\_\_  
**APPLICANT/REPRESENTATIVE**  
*Nombre del solicitante o representante*

\_\_\_\_\_  
**DATE REC'D**

\_\_\_\_\_  
**SPONSORING ORGANIZATION**  
*Nombre de la organización*

\_\_\_\_\_  
**REC'D BY**

\_\_\_\_\_  
**MAILING ADDRESS** *Dirección*

\_\_\_\_\_  
**CITY/STATE/ZIP CODE** *Ciudad/Estado/Zona Postal*

\_\_\_\_\_  
**TELEPHONE** *Teléfono*

\_\_\_\_\_  
**DATE/TIME OF SPECIAL ACTIVITY** *Día/hora de la actividad*

\_\_\_\_\_  
**DESCRIBE THE PROPOSED EVENT** *Descripción del evento*

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

Office Use Only	
<input type="checkbox"/>	PAID (\$136) _____
<input type="checkbox"/>	PAID (\$100) _____
<input type="checkbox"/>	Fee Waived _____

\_\_\_\_\_  
**APPLICANT'S SIGNATURE** *Firma del aplicante*

\_\_\_\_\_  
**DATE** *Fecha*

If you plan to use sound amplifying equipment, please complete the following:

1. Sound amplifying equipment:

a. Owner Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

b. User Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

2. Sound producing power of the sound amplifying equipment:

a. Wattage to be used: \_\_\_\_\_

b. Volume in decibels of sound to be produced:  
\_\_\_\_\_

c. Approximate distance that sound will be audible from equipment:  
\_\_\_\_\_

3. General description of the sound amplifying equipment:

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

4. License & motor number of the sound track to be used:

\_\_\_\_\_

5. Is the sound equipment to be used for commercial or noncommercial purposes?

\_\_\_\_\_

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**FOR OFFICE USE ONLY**

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Permit Approved: \_\_\_\_\_ Yes \_\_\_\_\_ No

Conditions of Approval:

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Reasons for Denial:

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**Reviewed By:**

\_\_\_\_\_  
City Planner

\_\_\_\_\_  
Date

**Approved By:**

\_\_\_\_\_  
Director of Community Development

\_\_\_\_\_  
Chief of Police

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date