



## Special Event Application

Application must be filed at least thirty (30) days before the Special Event.  
Application must be approved by the Sheriff and Commissioner's Court.

Application Fee \$75.00 ☐  
(Non-Refundable)

Late Application (Less Than 30 days) Fee \$150.00 ☐  
(Non-Refundable)

If you are uncertain whether your event is considered a Special Event, please contact the Sheriff's Office at (915) 538-2210 for further information and clarification.

Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Address \_\_\_\_\_ Phone: \_\_\_\_\_

Organization: \_\_\_\_\_ Auth. Rep. \_\_\_\_\_

Please check one:

☐ Individual ☐ D/B/A ☐ Organization ☐ Corporation ☐ Profit ☐ Nonprofit

Address \_\_\_\_\_ Phone \_\_\_\_\_

Event title \_\_\_\_\_

Event location \_\_\_\_\_

Event Coordinator \_\_\_\_\_ Phone \_\_\_\_\_

On-Site Contact on Event Day \_\_\_\_\_ Phone \_\_\_\_\_

Event Start Date \_\_\_\_\_ Event End Date \_\_\_\_\_

Event Set-up time \_\_\_\_\_ Event teardown time \_\_\_\_\_  
(Not earlier than 7am) (Not later than 10pm)

*For each day of the week on which the event will be held, indicate the start and stop times below:*

| Event day  | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|------------|--------|--------|---------|-----------|----------|--------|----------|
| Start time |        |        |         |           |          |        |          |
| Stop time  |        |        |         |           |          |        |          |

Estimated numbers of Participants: \_\_\_\_\_ Vehicles \_\_\_\_\_ Floats \_\_\_\_\_ Animals \_\_\_\_\_

Type of animal(s) used (if applicable): \_\_\_\_\_

\_\_\_\_\_

**Note:** Any and all Applicant(s) are responsible for hiring and monitoring clean-up personnel and to provide the necessary equipment for the purpose of cleaning up all excretory waste left behind on the event route and to-and-from any mobile transportation vehicle that is used to haul the animal(s) used during the course of the event.

Sound Amplification Device: ☐ Yes ☐ No Spectators: \_\_\_\_\_

Estimated numbers based on: \_\_\_\_\_

\_\_\_\_\_

Route of Event to include Streets/Roadways requesting to be closed, etc. (please Specify):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### Security, Crowd Control and Traffic Control

The applicant shall be required to provide Deputy Sheriff's for security, crowd control and traffic control at the Special Event. The total number of officers working at the Special Event is determined by the El Paso County Sheriff's Office, and in some cases may use planning variables, including: (1) the estimated number of participants and spectators; (2) the availability of alcoholic beverages; (3) size of the event and location; weather conditions; (5) the time of day which the Special Event is scheduled; (6) the need for street closures or rerouting of vehicular or pedestrian traffic and (7) the history of the particular Special Event.

#### Application Review and Approval

The Sheriff requires that the application be turned in at least thirty (30) days before the date of the Special Event but not more than one year in advance of the event. Once reviewed and approved by the Sheriff, the application will be placed on the County Commissioner's Court Agenda for consideration. The Sheriff may recommend to the Commissioner's Court that a fee be paid to the Sheriff's Office (see Guidelines and Procedures) for the use of Deputies, Vehicles, and equipment. If approved by Commissioner's court, the applicant will be contacted by a member of the Sheriff's office to assist with the Special Event.

**Note:** Notice to the applicant that if he will be due a refund from the Sheriff's Office in an amount over twenty-five dollars, the refund will be automatically processed and sent to the applicant, but if the amount is twenty-five dollars or less, the applicant must submit a request to receive such refund within ninety days after the conclusion of the event before the refund will be processed and paid.

Indemnity Agreement

- 1) As a condition of a Special Event approval, the applicant acknowledges that he/she has voluntarily applied for a Special Event approval that in consideration of the privileges associated therewith, Applicant agrees to PROTECT, INDEMNIFY and HOLD HARMLESS, the County Sheriff's Office, County of El Paso, its officers, agents and employees, from and against suits, actions, claims, losses, liability or damage of any character, and from and against cost and expenses including attorney fees incidental to the defense of such suits, actions, claims, losses, damage or liability on account of injury, death or otherwise, to any person or damage to any property, arising from any negligent act, error or omission of the undersigned, its officers, employees or agents, arising out of, resulting from, or caused by any act occurring as a result of the exercise of the privileges granted by this approval.
- 2) Applicant agrees that this indemnity agreement is intended to be as broad and inclusive as is permitted by the laws of the State of Texas, and that if any portion is held invalid, then it is agreed that the balance shall notwithstanding, continue in full legal force and effect.

I do solemnly swear (or affirm) that all the answers given and statements made on this Application are full, true and correct to the best of my knowledge and beliefs. I have been given a copy of the Guidelines and Procedures and have read the provisions contained therein and agree to abide by them.

Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

\*\*\*\*\*OFFICE USE ONLY\*\*\*\*\*

Payment can be made with cash or an Organization check payable to the County of El Paso, Texas. **No personal checks will be accepted.**

Application # \_\_\_\_\_ Check # \_\_\_\_\_ Cash \_\_\_\_\_

Receipt # \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ADDITIONAL EQUIPMENT OR PERSONNEL:

Equipment: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Law Enforcement Personnel

Deputy Lieutenants:    Number of Lieutenants: \_\_\_\_\_    Pay Rate: \$ \_\_\_\_\_  
   Number of Hours: \_\_\_\_\_    Total: \$ \_\_\_\_\_

Deputy Sergeants:    Number of Sergeants: \_\_\_\_\_    Pay Rate: \$ \_\_\_\_\_  
   Number of Hours: \_\_\_\_\_    Total: \$ \_\_\_\_\_

Deputies:    Number of Deputies: \_\_\_\_\_    Pay Rate: \$ \_\_\_\_\_  
   Number of Hours: \_\_\_\_\_    Total: \$ \_\_\_\_\_

Vehicles:    Number of Vehicles: \_\_\_\_\_    (\$12.00 per hour, Per Vehicle)  
   Number of Hours: \_\_\_\_\_    Pay Rate: \_\_\_\_\_

TOTAL FEE DUE:    \$ \_\_\_\_\_

Event Coordinator \_\_\_\_\_    Date \_\_\_\_\_

Contact Number \_\_\_\_\_

APPLICATION REVIEWED AND APPROVED BY:

Sheriff's Event Coordinator \_\_\_\_\_ DATE \_\_\_\_\_

County Chief Administrator \_\_\_\_\_ DATE \_\_\_\_\_