



CITY OF TOLEDO  
Consume Alcoholic Beverages in a Public Place  
Permit Application

**INSTRUCTIONS**

1. Please read the attached **Exhibit A**: Toledo Municipal Code (TMC); Chapter 8.12, Outdoor Public Events, Entertainments and Assemblies section, which relates to events within the City.
2. Complete the attached application form, including a site map which illustrates the location of the proposed event, and the primary activities.
3. A \$25.00 fee for temporary use is required.
4. You may be required to submit a copy of proof of Liability Insurance for your event. If you do not currently have event insurance, please see the attached Tenant User Liability Insurance Program (TULIP) flier.
5. Outdoor Event Permit applications require the review of multiple departments within the City. **Please submit your application at least forty (40) days prior to the intended event per TMC Chapter 8.12.020.**
6. Return your application to:

Attention: City Recorder  
Toledo City Call  
206 N. Main Street  
Po Box 220  
Toledo, OR 97391



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Event Information

Date(s) of Event: \_\_\_\_\_ Time of Event: \_\_\_\_\_

Event Location: \_\_\_\_\_

Type of Alcohol to be consumed at the event: \_\_\_\_\_

**Applicant must provide the following information:**

1. Identify the event area (e.g., entire premises, area within a park, provide a site map if necessary):

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

2. List primary activities within the area (dinner, auction, beer garden, food fair):

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

3. Will minors and alcohol be allowed in the same area together?  Yes  No

4. What is the expected attendance in the event area per day? \_\_\_\_\_

*\*If 50 or more people are expected, than you will be required to submit an Application for Outdoor Event Permit*

5. Describe your plan to prevent problems or violations.

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

6. Describe your plan to prevent minors from gaining access to alcoholic beverages.

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

7. Describe your plan to manage alcohol consumption by adults.

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

Applicant/Organization Information

Organization Name: \_\_\_\_\_

Applicant/Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Mailing address: \_\_\_\_\_

\_\_\_\_\_  
City State Zip Code

Name/Number of Alternate Contact: \_\_\_\_\_



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Certification of Application

Please read carefully and check all boxes for the terms of the permit.

- I agree to comply with all Toledo City Ordinances and Oregon State laws pertaining to this event.
- I agree to comply with all requirements and additional conditions of approval placed on this permit.
- I agree that the applicant and/or the alternate contact person listed in this permit will attend the event and be made available for contact throughout the duration of the event.
- I further agree to defend, indemnify, and hold harmless the City of Toledo, its officers, agents, and employees from any and all liability, actions, claims, losses, damages, or other costs, including attorney fees, for injuries to persons and damage to property arising out of the activities pursuant to this permit.
- I understand the City reserves the right to suspend or revoke this permit at any time without cause.
- I understand this is a one-time permit and valid only for the specific event identified in this document.
- I certify that information contained in this application is true and correct. I understand that false information may be grounds for denial or revocation of this permit.
- Proof of Liability Insurance included
- Initials: *I understand that the application may be held for approval until I provide all necessary information*
- I certify all information submitted is complete and correct to the best of my knowledge. I understand a false answer may be reason to deny this application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

<b>OFFICE USE ONLY:</b>	
DATE RECEIVED: _____	EVENT NUMBER: _____