

SPECIAL EVENT APPLICATION & CHECKLIST

\$50.00 Non Refundable Fee

(Fundraisers, Non For Profits, Charities, Festivals, Runs, Walks, etc.)

Incomplete Applications will not be accepted.

5490 Fifth Street
Cottleville, Missouri 63304

Ph: 636-498-6565
Fx: 636-498-6575
amy.lewis @cityofcottleville.com

PLEASE PRINT CLEARLY:

Responsible Party Contact Name

Telephone #

Home Address

Email Address

Group/Organization Name

Approx. # of attendees

Event Date

*Time event to BEGIN

*Time event to END

Event Location / Address: _____

Provide details for your event: _____

Check which best describes your event: Run/Walk Parade Festival Fundraiser BBQ

Other: _____

****Note: Runs/Walks must use a City approved route – Attached is the approved 5K route.***

AFTER YOUR EVENT

Clean up the area –

- Place all trash in appropriate receptacle(s),
- All park picnic tables are back to their original locations, and
- Fires in fire pit and/or bar-b-que stands are completely out.

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CHECK LIST: ATTACH COPIES OF THE FOLLOWING... *write N/A where request does not apply to your event.*

- ☐ Attach a copy of your group, organization, or charity's Certificate of Liability Insurance and add the City of Cottleville as an additional insured to your policy for the event. Also required when 3rd party vendors are at your event (i.e., food trucks, bounce houses, petting zoo, additional portable restrooms, etc.). If the size of your event requires additional portable restrooms, you are responsible to provide additional portable restrooms and a deposit may be required or provide proof of paid delivery/pick up.
**Provide Certificate of Liability Insurance for each vendor party.*
- ☐ If a Pavilion is needed, go to www.cityofcottleville.com and download the Pavilion Registration form found under the Forms and Permits tab. Check pavilion availability at cityofcottleville.com, click on parks & recreation, click on pavilion calendar.
- ☐ If Street Closure is needed, go to www.cityofcottleville.com and download the Street Closure Request Form found under the Forms and Permits.
- ☐ If requesting Live Entertainment, go to www.cityofcottleville.com and download the Special Event Live Entertainment License Application form found under the Forms and Permits tab.
- ☐ If serving alcoholic beverages, the appropriate license(s) are required. Note: Cottleville, State, and St. Charles County Licenses. *Cottleville Liquor License application is on our city website.
- ☐ Attach your event flyer / invitation.
- ☐ Remit all appropriate forms as stated above, along with the \$50.00 application fee. Check(s) payable to "City of Cottleville".
- ☐ Contact City of Cottleville Building Inspector at 636-498-6565 to schedule an inspection for large tents AND contact the Fire Department for inspection(s).
- ☐ If applicable, your organization will be charged a fee (to be determined) for police security, traffic control, trash/litter pick up, and/or street/parking lot clean up. A deposit may be required. Please note, it is your responsibility to acquire the service(s) when needed.

Incomplete Applications will not be accepted.

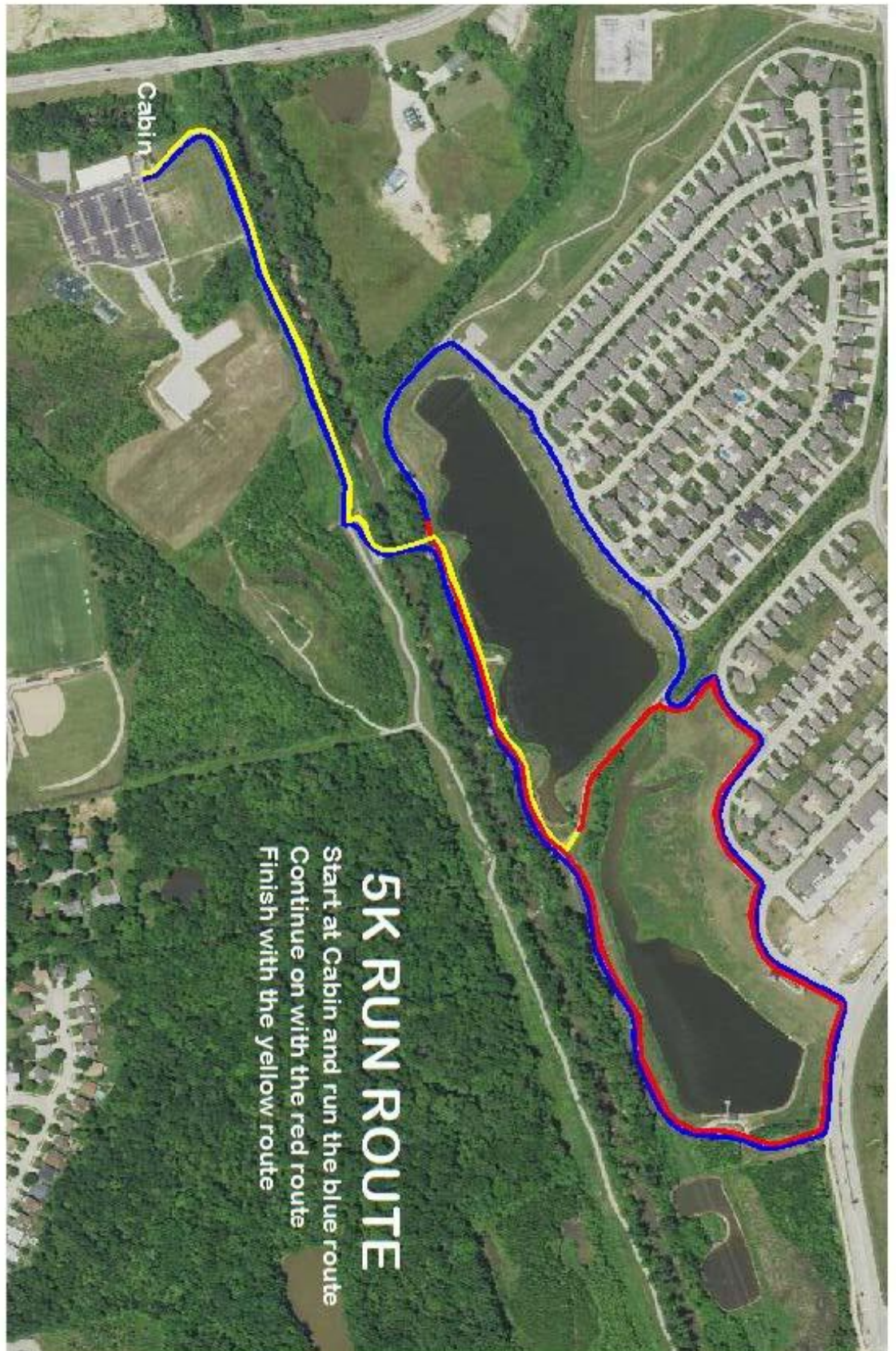
HOLD HARMLESS AGREEMENT

To the fullest extent permitted by law, _____ (Applicant/Organization) agrees to defend, pay on behalf of, indemnify, and hold harmless the City of Cottleville, Missouri, its elected and appointed officials, its agents, employees and volunteers and others working on behalf of the City of Cottleville, Missouri against any and all claims, demands, suits, or loss, including all costs connected therewith, and for any damages which may be asserted, claimed or recovered against or from the City of Cottleville, Missouri, its elected and appointed officials, its agents, employees, volunteers or others working on behalf of the City of Cottleville, Missouri, by reason of personal injury, including bodily injury or death and/or property damage, including loss of use thereof, which arises out of or is in any way connected or associated with renting this pavilion and/or using city property.

Applicant's Signature

Today's Date

CITY OF COTTEVILLE OFFICE USE:	
DATE APPLICATION RECEIVED:	CHECK NUMBER:
FEE RECEIPT NUMBER:	TOTAL AMOUNT PAID:
NOTES:	DATE APPROVED/DENIED:
APPLICATION APPROVED BY CITY CLERK:	APPLICATION APPROVED BY CITY ADMINISTRATOR:



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/5/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME: MUSIC Staff	
	PHONE (A/C, No, Ext): 314-800-2235	FAX (A/C, No): 866-372-7170
	E-MAIL ADDRESS: musicprogram@ajg.com	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Missouri United School Insurance (MUSIC), a self i	NAIC #
	INSURER B: Safety National Casualty Corporation	15105
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES

CERTIFICATE NUMBER: 592124503

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A B	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		MUSIC-2025-00 FCA4064210	12/31/2024 12/31/2024	12/31/2025 12/31/2025	EACH OCCURRENCE \$3,500,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$3,500,000 MED EXP (Any one person) \$ EXCLUDED PERSONAL & ADV INJURY \$3,500,000 GENERAL AGGREGATE \$ UNLIMITED PRODUCTS - COMP/OP AGG \$3,500,000 \$
A 1	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			MUSIC-2025-00 FCA4064210	12/31/2024 12/31/2024	12/31/2025 12/31/2025	COMBINED SINGLE LIMIT (Ea accident) \$3,500,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB EXCESS LIAB DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	AGC4067892	12/31/2024	12/31/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
A B	Auto Physical Damage Excess Workers Comp			MUSIC-2025-00 AGC4067892	12/31/2024 12/31/2024	12/31/2025 12/31/2025	ACV Less ** \$1,000 DedComp/Col See Below

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

** Safety National provides Excess WC to MUSIC above a Specific and Aggregate Retention **

* Fire Legal Liability Limit \$1,000,000

Commercial General Liability Safety National Provides \$2MM xs \$1.5MM

RE: Homecoming Parade

Cottleville City Hall is shown as an additional insured solely with respect to general liability coverage as evidenced herein as required by written contract with respect to use of facility by the named insured.

CERTIFICATE HOLDER

CANCELLATION

Cottleville City Hall
5490 5th St
St Charles, MO 63304

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE