



MUNICIPALITY OF LAMBTON SHORES
ADMINISTRATIVE POLICY
DESIGNATING EVENTS OF MUNICIPAL SIGNIFICANCE

POLICY NO.:
AD-CS-POL-019

Appendix A

**APPLICATION FOR AN EVENT TO BE
DESIGNATED OF MUNICIPAL SIGNIFICANCE**

Organization Name: _____

Contact Person: _____

Email/Phone #: _____

Mailing Address: _____

Objectives of the Organization:

Date of the event: _____

Location of the Event: _____

Description of Event:

Reason(s) the organization believes their event should be deemed 'municipally significant:

Details of how, when and where the event will be promoted to the public:

Can the event be defined as:

(Check all that apply to your event and explain in detail your reasoning)

☐ Has local, regional, national, or international historical or cultural significance; or

☐ Builds awareness of diverse cultures; or

☐ Benefits the community at large

Does your organization believe that the event will host 100 plus members of the general public?

☐ Yes ☐ No

The applicant agrees to:

- 1) Obtain a minimum of TWO MILLION (\$2,000,000) DOLLARS liability insurance, naming the Municipality of Lambton Shores, 9577 Port Franks Rd, Thedford, ON as an additional insured, at least 10 business days prior to the event and must provide a certificate of Insurance to the Clerk. The permit holder shall be required to indemnify and save the Municipality of Lambton Shores harmless from all claims arising from the permit or event;
- 2) Serve the public interest by upholding the by-laws and policies of The Municipality of Lambton Shores, and any other applicable legislation;
- 3) Assume all responsibility for compliance with regulations regarding SOPs and with other applicable legislation, including but not limited to the rules with respect to the Fire and Building Codes, Noise By-Laws, Street Closures, etc.; and
- 4) Provide any additional details as may be requested by the circulated stakeholders of the Municipality.

By signing, you agree that you have read and agree with the conditions of the Lambton Shores Designation of Municipally Significant Events Policy.

Applicant

Date

OFFICE USE ONLY:

☐ Approved

Date Approved: _____

☐ Not Approved

Reasons why:

Signature of the Director of Corporate Services (or designate)