



# OUTDOOR MASS GATHERING PERMIT APPLICATION

Application must be submitted at least 45 days prior to event date  
Applications submitted by mail will not be accepted

**Fee: Small Gathering – \$2500**  
**Large Gathering – \$5000**

|   |   |
|---|---|
| NAME OF EVENT:  | DATE(s) AND TIMES OF EVENT:                                     |
| LOCATION OF EVENT:  | NAME OF ORGANIZATION:   |
| ( ) SMALL GATHERING<br>( ) LARGE GATHERING* (requires Conditional Use Permit) | ESTIMATED ATTENDANCE:   |
| NAME OF PERSON IN CHARGE:   | ADDRESS, CITY, STATE, ZIP                                       |
| DAYTIME PHONE NO. OF PERSON IN CHARGE:  | E-MAIL:   |
| EMERGENCY CONTACT NAME & 24 HOUR PHONE NO.:                                   | IF THIS IS A FUND-RAISER, WHO IS THE BENEFICIARY(IES) OF EVENT: |
| PROPERTY OWNER(S) NAME:   | ADDRESS, CITY, STATE, ZIP                                       |

## REQUIRED INFORMATION

**NATURE OF THE EVENT:** Indicate what will happen at your event; be specific on times and activities; attach an additional sheet if necessary.

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**WILL SOUND AMPLIFICATION BE USED AT ALL DURING THE EVENT? ( ) YES ( ) NO**

If yes, please explain:

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**WILL ALCOHOL BE AVAILABLE AT ALL DURING THE EVENT? ( ) YES ( ) NO**

If yes, please explain:

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**WILL FIREWORKS BE USED OR SHOWN AT ALL DURING THE EVENT? ( ) YES ( ) NO**

If yes, please explain:

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**THE APPLICANT(S) SHALL CERTIFY THAT:**

- A. If the application is granted, the applicant(s) will exercise the rights granted in accordance with the terms and subject to all the conditions and limitations of the approval.
- B. I/We will comply with all health and safety rules governing outdoor mass gatherings as adopted by the Oregon Department of Human Services and demonstrating compliance with the Marion County Outdoor Mass Gathering Ordinance.
- C. I/We hereby declare under penalties of false swearing (ORS 162.075 and 162.085) that all the above information and statements and the statements in the site plan, attachments and exhibits transmitted herewith are true; and the applicants so acknowledge that any permit issued on the basis of this application may be revoked if it is found that any such statements are false.
- D. I/We hereby grant permission for and consent to Marion County, its officers, agents, and employees, law enforcement, public health and fire control officers to come upon the above-described property to gather information and inspect the property whenever it is reasonably necessary for the purpose of processing this application and/or monitoring the terms and conditions of the permit issued and any other applicable laws or ordinances.
- E. The applicants have read the entire contents of the application, including the procedures and criteria, and understand the requirements for approving or denying the application.

**SIGNATURE OF EACH OWNER OF THE SUBJECT PROPERTY**

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DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

**THE ORGANIZER(S) SHALL CERTIFY THAT:**

I, the undersigned representative, have read the Outdoor Mass Gathering Application and the Policies and Procedures contained herein, and I am duly authorized by the event organization/business to submit this application on its behalf as an organizer. The information herein is complete and accurate.

ORGANIZER: \_\_\_\_\_

Print Name

Signature

Date

Submit the completed application, along with required attachments to:

Marion County Planning Division  
5155 Silverton Rd. NE, Salem  
(503) 588-5038  
email: [planning@co.marion.or.us](mailto:planning@co.marion.or.us)

**FOR OFFICE USE ONLY:**

Township \_\_\_\_\_ Range \_\_\_\_\_ Section \_\_\_\_\_  
Tax lot number(s) \_\_\_\_\_  
Zone \_\_\_\_\_ /zone map number \_\_\_\_\_

Application accepted by \_\_\_\_\_

Date \_\_\_\_\_

Case Number MG- \_\_\_\_\_

**TPA/header** \_\_\_\_\_

Conditional Use Case No. \_\_\_\_\_ (“Large Gathering”)

Application elements submitted:

\_\_\_ Title transfer instrument

\_\_\_ Site plan

\_\_\_ Fire protection plan

\_\_\_ Public safety plan

\_\_\_ Health and medical plan

\_\_\_ Parking/traffic control plan

\_\_\_ Copy of OLCC permit (if applicable)

\_\_\_ Filing fee

# **OUTDOOR MASS GATHERING APPLICATIONS**

## **Required Information**

**APPLICATION FORM:** A blank application form is attached. **Do not** submit the application by mail. The property owner and event organizer must both sign the application. **Incomplete applications will not be accepted.** If an application is accepted and later determined to be incomplete, the applicant will be notified. If the applicant does not respond or refuses to provide required information, the application will be deemed incomplete, denied, and the application fee, less County costs, returned to the applicant.

**FEE:** Make check payable to Marion County.

Small Gathering – \$2500. Estimated attendance: 751–3000 for 6 to 120 hours within any continuous 3-month period. Includes any time in excess of 48 hours necessary to set up event or clean up afterward.

Large Gathering\* – \$5000. Estimated attendance: 3001+ or more than 750 persons at any time on each of 3 calendar days that continues or is expected to continue for more than 120 hours. Includes any time in excess of 48 hours necessary to set up event or clean up afterward.

\*Requires approval of a Conditional Use permit

**TITLE TRANSFER INSTRUMENT:** Include a copy of the officially recorded title transfer instrument (deed, warranty deed, or contract) that shows the legal description for the subject property. Available at the Clerk's Office, 1115 Commercial St. NE, Salem, for a minimal charge.

**SITE PLAN:** Drawn to scale, on a separate sheet of 8 ½ x 11 paper, showing:

- location of the proposed use;
- type, number and location of all toilets and washing facilities;
- water supply;
- food preparation and food service facilities;
- solid waste collection sites.

**FIRE PROTECTION APPROVAL:** Copy of proposed fire protection plan approved by the applicable fire district or, if outside a fire district, provide approval from the Office of the State Fire Marshall or fire prevention district that would respond in the event of an emergency.

**HEALTH AND MEDICAL PLAN:** Copy of the health and medical plan approved by the County Environmental Health Division relating to water supply, sewerage facilities, refuse storage and disposal, food and sanitary service, and emergency medical facilities. Each outdoor mass gathering shall have no less than one first aid station staffed by two adult individuals trained in first aid techniques. Contact the County Health Dept., Environmental Health Division, at (503) 588-5387 for more information.

**PUBLIC SAFETY PLAN:** Copy of the public safety plan approved by the County Sheriff's Office addressing adequate parking and crowd control provided by the Organizer. Contact the Marion County Sheriff's Office at (503) 588-5094.

**PARKING AND TRAFFIC CONTROL PLAN:** Copy of the parking and traffic control plan and, if necessary, a dust control plan approved by the County Public Works Director. Contact Public Works Land Development Engineering & Permits, at (503) 584-7714.

**INSURANCE CERTIFICATE:** Contact the Marion County Risk Manager at (503) 373-4426 to obtain information about the requirements for a commercial general liability policy and compliance with other standards established by the Marion County Risk Manager.

**OREGON LIQUOR CONTROL COMMISSION PERMIT:** Copy of the Oregon Liquor Control Commission permit, if applicable.

## **Policies and Procedures**

1. Once a complete application is received the Planning Division will schedule the mandatory public hearing before the Marion County Board of Commissioners. Due to scheduling priorities it may be over 21 days before the public hearing can be held.
2. Planning staff will request comments from other County departments and affected agencies. The event organizer may be required to meet in person with County officials to discuss and clarify the application.
3. Planning staff will then prepare a report that:
  - (a) Describes the application and the request;
  - (b) Summarizes relevant county department, agency and public comments;
  - (c) Describes pertinent facts and if the request complies with Ordinance #1230 and other applicable ordinances and regulations;
  - (d) Makes a recommendation decision to conditionally approve or deny the request.
4. A copy of the report will be sent to the applicant and any representative listed on the application and forwarded to the Board of Commissioners for the public hearing and final action.
5. Notice of the public hearing will be mailed to the applicant and property owners within the 1500 foot notification area. Notice will be mailed not less than 20 days prior to the scheduled hearing.
6. After the public hearing, the Board will consider all documents and evidence and issue an order denying or approving the application based on whether or not the request complies with the criteria.

# Outdoor Mass Gathering Permit Check List

**These items are required to process your application**

- Application and filing fee. Deadline is at least **45 days before your event.** (see page 1-3; contact Planning Division at (503) 588-5038)
- Copy of title transfer instrument (see page 4; contact Clerk's Office, 1115 Commercial St. NE, Salem; (503) 588-5225)
- Site map (see page 4)
- Fire protection approval or State Fire Marshal permit (see page 4; contact Planning Division for fire district name; State Fire Marshal - (503) 373-1540)
- Health and medical plan (see page 4; contact Environmental Health at (503) 588-5387)
- Public safety plan (see page 5; contact Marion County Sheriff's Office at (503) 588-5094)
- Parking and traffic control plan (see page 5; contact Public Works Engineering at (503) 584-7714)
- Proof of Insurance (see page 5; contact Marion County Risk Manager at (503) 373-4426)
- Oregon Liquor Control Commission permit, if applicable (see page 5; applications available at state liquor stores or call (503) 260-6122 or (503) 260-6114)

**INSTRUCTIONS FOR PREPARATION OF A RESIDENTIAL SITE PLAN**

Site plan must be **current**, drawn to scale, and **show all property lines**. If unable to draw to scale, property lines must still be shown noting actual dimensions or total acreage.

**Failure to include all of the items listed below may delay the review necessary to obtain a permit**

**ITEMS THAT MUST BE SHOWN ON YOUR SITE PLAN:**

- 1. NORTH ARROW.
- 2. SCALE OF DRAWING.
- 3. STREET NAME accessing the parcel.
- 4. LOCATION OF THE PROPOSED USE.
- 5. LOCATION OF ALL TOILETS, WASHING FACILITIES, AND WATER SUPPLY.
- 6. LOCATION OF FOOD PREPARATION AND FOOD SERVICE FACILITIES.
- 7. LOCATION OF SOLID WASTE COLLECTION SITES.
- 8. ALL PROPERTY LINES AND DIMENSIONS.
- 9. DRIVEWAYS AND ROADS.
- 10. EXISTING AND PROPOSED STRUCTURES - label as "Proposed" and "Existing". Include dimensions and distance to all property lines and other structures.
- 11. WELLS – existing and proposed on this parcel and adjacent parcels within 100 feet.
- 12. FENCES, RETAINING WALLS – location of existing and/or proposed.
- 13. SEPTIC SYSTEM and REPLACEMENT AREA – existing and proposed. Show existing septic tank, drain field lines and distance from structure(s).

**USE THE REVERSE SIDE OF THIS FORM TO DRAW YOUR SITE PLAN**

Property Owner(s) Name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Site Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip \_\_\_\_\_  
Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_  
Manufactured Home Park: \_\_\_\_\_ Space: \_\_\_\_\_  
Assessor Map # (T-R-Sec-TL(s)): \_\_\_\_\_ Total Acres: \_\_\_\_\_  
Zoning Designation: \_\_\_\_\_ Planning Map \_\_\_\_\_

**SITE PLAN MUST SHOW ALL PROPERTY LINES AND DIMENSIONS**

- Drawn to Scale: 1 square = \_\_\_\_\_
- Feet Not Drawn to Scale: Total Acres \_\_\_\_\_

**I certify that the above information is accurate to the best of my knowledge. I AM THE  Owner  Authorized Agent**

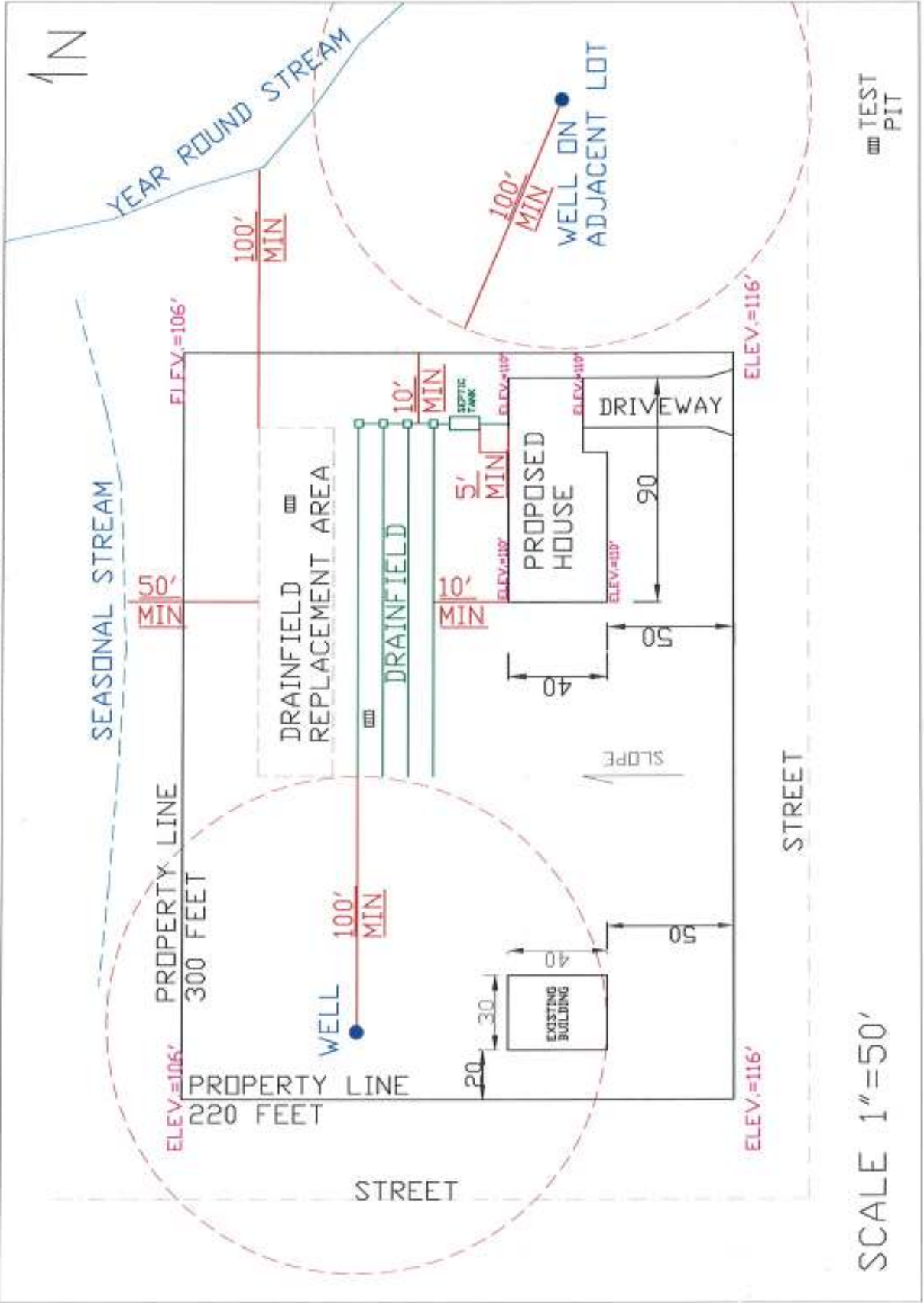
NAME (please print): \_\_\_\_\_  
My telephone number is: \_\_\_\_\_  
Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Applicant's Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

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FOR OFFICE USE ONLY

PLANNING: \_\_\_\_\_ Date: \_\_\_\_\_  
PUBLIC WORKS: \_\_\_\_\_ Date: \_\_\_\_\_  
BUILDING INSPECTION: (Acceptable for Planning requirements only) \_\_\_\_\_ Date: \_\_\_\_\_

# RESIDENTIAL SAMPLE PLOT PLAN



SCALE 1"=50'