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Draft Temporary Event Application Packet

Temporary Event Ordinance Update
Board of Supervisor Hearing – September 23, 2025

COUNTY OF NAPA
PLANNING, BUILDING, AND ENVIRONMENTAL SERVICES

TEMPORARY EVENTS LICENSE APPLICATION PACKET

1. Application Checklist
2. Application
3. Defense and Indemnification Statement
4. Request for Fee Waiver Memo, Fee Waiver Request Forms, and Community Feedback
5. Certificate of Insurance Sample (To Be Forthcoming)
6. Temporary Event Categories That Do Not Require a License (To Be Forthcoming)
7. Temporary Event Categories Which Require a License (To Be Forthcoming)
8. Temporary Events Manual
9. Frequently Asked Questions (To Be Forthcoming)
10. Late Application Justification Form

TEMPORARY EVENTS LICENSE APPLICATION CHECKLIST

____ 1. The application shall be signed by both the applicant or authorized representative and the owner or lessee or authorized representative of the property on which the event is to be held. If the applicant is other than an individual, see the table below for the authorized representative to sign an application and the required information to be attached:

____ 2. A Defense and Indemnification Statement signed by the applicant or authorized representative and property owner or authorized representative (see No. 1 above).

____ 3. A copy of the current Certificate of Insurance (COI) showing general public liability, minimum $2,000,000 individual and $4,000,000 in aggregate, coverage in the amount specified in the Temporary Events Manual and, if applicable, an endorsement for alcohol. If alcohol will not be served, please include a note detailing so on the COI. (*NOTE: Insurance subject to final review by Risk Manager and could result in delay or cancelation of event).*

____ 5. A check payable to the County of Napa for the appropriate fee (please call for current fees) as adopted by the Board of Supervisors and set forth in Section III of the Napa County Policy Manual. A late fee, as adopted by the Board and set forth in Section III of the Napa County Policy Manual, will be assessed if the application is submitted after the required submittal timeframe of 90 and 120 days prior to the event. Please refer to the Late Application Justification Form.

____ 6. A list of the names, mailing address, and telephone numbers of the event food or goods suppliers. Please include operating permits in submittal. If pumper trucks are being used, please include operating permit for them.

_____ 7. Location maps and floor plans showing where on the property the event will take place. Please include location of all bathrooms (identify which are ADA) and all paths of ingress and egress. Please identify parking and note all ADA compliant parking spaces.

____ 8. Location maps and sample (including dimensions) of any promotional signs.

____ 9. Fee waiver request, if applicable.

—— 10. Late Application Justification, if applicable

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FILE # _____

NAPA COUNTY
PLANNING, BUILDING, AND ENVIRONMENTAL SERVICES
1195 Third Street, Suite 210, Napa, California, 94559 (707) 253-4417

APPLICATION FOR A TEMPORARY EVENTS LICENSE

To be completed by Applicant
(Please type or print legibly)

Name of Event: _____ Subsequent Event: ☐ Yes ☐ No

Date(s) of Event: _____ Previous Temporary Event Date(s): _____

Time(s) of Event: _____ Previous License #: _____

Name of Venue: _____ Assessor's Parcel #(s): _____

Event Site Address: _____

Total Persons on Site (include staff): _____

Applicant's or Organization's Name: _____ Contact Person: _____

Business/Residence Address: _____
No. Street City State Zip

Mailing Address: _____
No. Street City State Zip

Telephone #: _____ Fax #: _____ Email Address: _____

Applicant or Authorized Representative: _____

Name (please print): _____

Signature: _____

Title: _____ Date: _____

Applicant's Legal Nature: ☐ Individual ☐ Partnership ☐ LLC ☐ Association
☐ Corporation ☐ Non-Profit, I.D. # _____ ☐ Other _____

Name(s) of Property Owner(s) (or Authorized Representative): _____

Address(es) of Property Owner(s): _____
No. Street City State Zip

Telephone #: _____ Fax #: _____ Email Address: _____

Mailing Address: _____
No. Street City State Zip

I hereby give my unconditional consent for all owners or current lessees for the use of my property for the above event and the right of access to the property involved, as are deemed necessary by the Napa County Planning Division for preparation of reports related to this application.

Signature of Property Owner (authorized representative) _____ Date: _____

TO BE COMPLETED BY PLANNING, BUILDING, AND ENVIRONMENTAL SERVICES

Zoning District: _____ Category of Event: _____ Existing Use Permit(s) #: _____

Fees: $_____ Receipt: #_____ Received by: _____ Date: _____

NAME OF EVENT SUPERVISOR:

Will the event have any of the following? ☐ Displays, ☐ Demonstrations, ☐ Food tastings, ☐ Beverages sold (offered for sale or given away), ☐ Known person or celebrity appearance, ☐ Sales, book or other signings, ☐ Musical or creative arts presentations.

Please give a detailed description of event: _____

Is the event open to the general public and not limited to private invites? Yes ☐ No ☐	Are three (3) event inspection parking sites shown on plans? Yes ☐ No ☐ Fire inspections may be required for Category 5 and 6.	Is the parcel located within the floodplain? Yes ☐ No ☐ If yes, contact the Engineering division prior to 30 days before the event.

Supportive Retail Sales: ☐ Yes Type: _____ ☐ No	Is amplified outdoor music proposed? Yes ☐ No ☐ If yes, the music must end by 10:00pm.
Will the event utilize caves at any time during the event? Yes ☐ No ☐ Are there any pending Building Permits? Yes ☐ No ☐ If Yes, # _____ Will this event require the use of any public roads? Yes ☐ No ☐ If yes, contact the Public Works department 30 days prior to the event.	Will tents, canopies, pavilions or food booths be used at this event? Yes ☐ No ☐ If yes, contact Napa County Fire Marshal 30 days prior to event for permit requirements. Will stages (over 400sqft.), generators, or tents (over 7500sqft.) be used at this event? Yes ☐ No ☐ If yes, contact the Building division 30 days prior to the event.

TEMPORARY EVENT SUPPLEMENTAL INFORMATION

1. Location and number of vehicle parking spaces, method of traffic control.

a) Location(s): ☐ On Site ☐ Off Site

b) Number of Vehicle Parking Spaces: Paved _____ Unpaved _____

c) Number of ADA compliant parking spaces:_____ (Please show on site plan)

d) Method of Traffic Control: ☐ Valet Parking ☐ Staff Volunteers

e) Parking Attendants for traffic control: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ Specify # _____

f) A plot plan and verbal description of how off-site parking will be arranged (A full traffic control plan may be required for events of category 5 and 6.):

_____

g) A letter of permission from the Property Owner to use the property where the off-site parking will be located has been submitted: ☐ Yes ☐ No ☐ N/A

2. If the event is to be held at a winery or other business, will the site open to the public during the event?
Yes ☐ No ☐

3. Number of attendees will be controlled by use of: ☐ Number of tickets being sold ☐ Other Talley
If other, please explain: _____

4. Drinking Water Supply and Facilities:

☐ Drinking water provided by: _____
☐ Approved on-site system: _____
☐ Public Water System (name): _____
☐ Bottled Water: _____

5. Will food be served at the event? ☐ Yes ☐ No If YES, complete the following questions:

a) Is food vendor a non-profit entity or a for-profit entity that receives no monetary benefit beyond recognition for participation in the event?
☐ Yes ☐ No

b) Is event a maximum of one day? ☐ Yes ☐ No

If you answered YES to a) AND b) above, a permit for the temporary food facility IS NOT required from Environmental Health. Facility must operate consistent with "Non-Profit, One-Day Temporary Food Facility Guidelines".

If you answered NO to a) OR b) an application for the temporary food facility must be approved and a permit issued by Environmental Health. Contact Environmental Health at (707) 253-4471 or visit www.countyofnapa.org for an application.

6. Sanitation Facilities:

a) The number of permanent toilet facilities _____

b) The number of portable/chemical toilets provided for guest use during this event:_____

_____

7. Name of pumping company, permitted under County Code section 5.2.020, providing chemical toilets/pumper truck: ___Provisions for cleanup of trash and recyclables, the premises and removal of recyclables and non- recyclables (If to go containers are provided, they must comply with Compostable Packaging Ordinance.):

a) Number of receptacles to be provided for trash _____

b) Describe the location where these receptacles will be placed _____

c) Number of clearly labeled receptacles to be provided for recyclables _____
(Recycling receptacles should always be placed next to a trash receptacle and near beverage areas.)

8. Medical Facilities and Services (if Emergency Action & Medical Plan is not needed):

First Aid kit available	☐ Yes	☐ No
Staff trained in First Aid available	☐ Yes	☐ No
Capabilities of contacting 911 in an emergency	☐ Yes	☐ No

9. Fire Protection Facilities and Procedures:

Fire Extinguishers available	☐ Yes	☐ No
Staff trained in Fire Procedures	☐ Yes	☐ No

10. Building Safety:
Will any part of the event take place in a building(s) that are under construction and/or within a cave(s)?
Yes ☐ No ☐
If yes, please include a floor plan showing the areas of the building(s) and/or cave(s) where the event will take place.

11. Security Protection Company hired: ☐ Yes ☐ No
If yes, name of company: _____

12. Dust Control: ☐ Yes ☐ No

13. Premises Illuminated: ☐ Yes ☐ No

14. Will Event take place over night: ☐ Yes ☐ No
a) Arrangements for illuminating the premises have been made: ☐ Yes ☐ No
b) If yes, explain: _____
c) What arrangements for camping or similar facilities are being made:
_____

15. Insurance attached ☐ Yes ☐ No
(NOTE: Insurance subject to final review by Risk Manager and could result in delay or cancelation of event).

16. Defense and Indemnification Statement has been read, signed and attached: ☐ Yes ☐ No

17. The post event report needs to be submitted one week after the event. Failure to do so could result in suspension of the event or denial of future applications.
a) Submit confirmation of donation with post event report.

DEFENSE AND INDEMNIFICATION STATEMENT

I HEREBY AFFIRM THAT I HAVE READ THE TEMPORARY EVENTS MANUAL AND STATE THAT THE INFORMATION PROVIDED WITH THE APPLICATION IS CORRECT. I AGREE TO COMPLY WITH ALL CONDITIONS ATTACHED TO THIS LICENSE, COUNTY ORDINANCES, AND STATE LAWS RELATED TO CONDUCTING THE ACTIVITIES DESCRIBED IN THE APPLICATION. I AGREE TO DEFEND, INDEMNIFY AND HOLD THE COUNTY OF NAPA AND EACH AND ALL OF ITS OFFICERS, AGENTS AND EMPLOYEES HARMLESS FROM ANY AND ALL CLAIMS, ACTIONS, DAMAGES, COSTS AND EXPENSES, INCLUDING ATTORNEY'S FEES, TO THE EXTENT SUCH ARE CAUSED BY THE NEGLIGENT ACTS OR OMISSIONS BY ME OR AUTHORIZED PARTICIPANTS OR ATTENDEES AT THE TEMPORARY EVENT.

_____ _____

SIGNATURE OF APPLICANT (or authorized representative) (Required) DATE

_____ _____

SIGNATURE OF PROPERTY OWNER (or authorized representative) (Required) DATE

PLEASE ATTACH YOUR CERTIFICATE OF INSURANCE TO THIS DOCUMENT

FOR OFFICE USE ONLY

DATE SUBMITTED: _____ FILE NUMBER: _____

ADJOINING PROPERTY OWNER LIST REQUIREMENTS

All applications shall include a list of the current owners of all the properties whose outer perimeters are within **1000** feet of the property boundary of the project site. The list shall include the property owner's names, their addresses and the assessor's parcel numbers of the property owned.

Preparation, verification and submission of this list of property owners is the responsibility of the applicant. Lists of the property owners appearing on County tax rolls in the form required are available from all local title insurance companies. Each such list must be certified by a title insurance company as reflecting the most recent County tax roll information.

INSTRUCTIONS TO TITLE COMPANY

Please prepare the property owners' list as follows:

1. Type the property owners' names, parcel numbers and mailing addresses on an 8½"x11" sheet of Avery #5160 Laser Labels so that this information can be readily used in mailing by Planning, Building, and Environmental Services.

2. Submit a full page copy of the assessors' parcel book page(s) and a copy of the latest equalized assessment roll used to compile the property owners' list. Please indicate the location of all parcels listed, by check mark or colored parcel number circled on the pages.

If you should have any questions, please contact Planning, Building, and Environmental Services at (707)253-4417.

Planning, Building & Environmental Services

1195 Third Street, Suite 210
Napa, CA 94559
www.countyofnapa.org

Brian D. Bordona
Director

A Tradition of Stewardship
A Commitment to Service

TO: Temporary Event Applicant

FROM: Riley Hebb, Planner I

DATE: September 9, 2025

RE: Temporary Event Application – Request for Fee Waiver Information

Napa County Policy Manual, Part 3, Section 10.020(a) provides that the County officer or employee responsible for collecting any fee (or on appeal to the County Executive Officer) may waive the fee if certain findings are made.

The four required findings under Section 10.020(a) are as follows (must meet all our findings):

- The applicant is a non-profit organization;
- The waiver of the fee will advance a public policy;
- The waiver of the fee is in the public interest and will promote a public benefit; and,
- A non-profit organization approved for a Fee Waiver shall provide written assurance that a designated percentage of at least 25 of the proceeds of said event will be donated for the public benefit of the citizens of Napa County.

A non-profit organization approved for a Fee Waiver for any Category event, that does or does not require Zoning Administrator approval, shall still pay a minimum processing fee. The fee waiver is for planning fees only and cannot be applied for other divisions' review fees, as set forth by the Napa County Policy Manual. Fee waiver does not waive fees to any additional permits needed (i.e., tent, generator, etc.).

Fees entitled to the fee waiver will be issued in the form of a refund check after the event is over and the county has received the post event report. Please include proof of donation in the post event report, as fee waiver will not be issued without proof of waiver criteria being met.

A fee waiver for a Temporary Event is approved through Napa County Planning, Building, and Environmental Services. Should the application be late, a late fee will be applied. This fee cannot be waived.

Attached is the Fee Waiver Request Form. Please submit it for approval with your Temporary Event Application.

If you have any questions, please feel free to contact me at (707) 299-1334.

FILE # _____

NAPA COUNTY
PLANNING, BUILDING, AND ENVIRONMENTAL SERVICES

1195 Third Street, Suite 210, Napa, California, 94559 (707) 253-4417

A Tradition of Stewardship
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FEE WAIVER REQUEST FORM

To be completed by Applicant
(Please type or print legibly)

Applicant Name: _____

Date of Fee Waiver Application: _____

Date(s) of Event: _____

Location of Event: _____

Contact Person: _____ Phone #: _____

Please complete the following questions:

1. Our organization is a qualified non-profit corporation, incorporated pursuant to the Non-Profit Corporation Law.
   - ☐ Yes Tax ID #: _____
   - ☐ No
2. Our organization will advance one or more of the following public policies: (please check at least one box)
   - ☐ Public Education
   - ☐ Public Safety
   - ☐ Social Welfare
   - ☐ Public Health Care
   - ☐ Human Resource Development
   - ☐ Environmental Policy
   - ☐ Other: Public _____
3. Approval of the fee waiver is in the public interest and creates a public benefit for the citizens of Napa County because: (Include to whom 25% of the proceeds will be donated to.)

   _____
   _____
   _____
   _____

   Example: Approval of the fee waiver is in the public interest and creates a public benefit because this event and the dollars raised will allow our chartered school, which is operating under the Napa Valley Unified School District, to continue offering after school programs, music, art and other core subject support and enrichment programs.

TO BE COMPLETED BY PLANNING, BUILDING, AND ENVIRONMENTAL SERVICES

Fee Waiver Approved By: _____ Date of Fee Waiver Approval: _____

Applicant Notified of Approval on: _____ T.E. Application Submitted on: _____

Temporary Event Post Event Report

Napa County Planning, Building, & Environmental Services
1195 3rd St, Napa, CA 94559
707-253-4417

Applicant:	Date:		
Authorized Representative:	APN #:		
Phone:	Cell:		
Email:	Website:		
Address:	City:	State:	Zip:
Event name:	Location:		
Event date(s):	Event time(s):		
Total number of participants:	Free event: ☐ Yes ☐ No		
% of profit donated:	Estimated amount of donation:		
Non-profit name(s):	Non-profit ID #(s):		
From the Applicant's perspective, what was your overall opinion of the event?			
How did the community benefit from the event?			
How did other organizations or local businesses benefit from the event?			
Please describe the work the non-profit (s) do for the public benefit of the citizens of Napa County:			

Signature of applicant

Date

Temporary Event Community Feedback Form

Napa County Planning, Building, and Environmental Services
1195 3rd St, Napa, CA 94559
707-253-4417

Event name & APN:	Event date:
Please let us know any issues or concerns you experienced with this event:	
Please let us know any considerations you would recommend for this event in the future:	
Please share any positive experiences you had at the event:	
Other general comments:	
Name (optional):	
Email (optional):	Phone (optional):

Late Application Justification Form

Napa County Planning, Building, and Environmental Services
1195 3rd St, Napa, CA 94559
707-253-4417

Any application received after the deadlines pursuant to NCC Section 5.36.030 is considered a late application. Therefore, please provide a complete justification to one or more of the following questions to determine whether or not this late application may be accepted for processing by the PBES Director:

Event name & APN:	Event date:
Please let us know how the proposed event is in response to an occurrence whose timing did not reasonably allow you to file a timely application:	
Please let us know how the imposition of the time limitations would place an unreasonable restriction on your expressive activity:	
Please describe how the nature of the proposed event is one that may reasonably be accommodated without undue or adverse impacts to County staffs' ability to process such an application:	
Applicant Name:	
Email:	Phone:

Signature: _____ Date: _____

When the Director finds one or more of the above conditions to exist, the Director may accept the application and process in accordance with this chapter, unless the application does not meet the criteria set forth in the Temporary Events Manual. Late applications may be subject to a late application fee in addition to any regular fees established by resolution of the Board. ***Applications for Category 4, 5, and 6 events received less than 100 days prior to the event shall not be accepted under any circumstance.***

TO BE COMPLETED BY PLANNING, BUILDING, AND ENVIRONMENTAL SERVICES

Accepted by _____ *on* _____. *Signature:* _____