



# SPECIAL EVENTS PERMIT APPLICATION

Community Development Department

VILLAGE OF LOS LUNAS  
660 Main Street NW  
Los Lunas, NM 87031  
(505) 839-3842

For Special Events held on Village owned parks or facilities, please contact the Parks & Recreation Department at (505)352-7661.

**Applications must be submitted at least two (2) weeks prior to the event date.**

**INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED**

Applications can be submitted to [planning@loslunasnm.gov](mailto:planning@loslunasnm.gov) or in person at Village Hall.

## 1. EVENT INFORMATION

Event Name \_\_\_\_\_

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

Event Dates \_\_\_\_\_ Event Hours \_\_\_\_\_

Organization \_\_\_\_\_ Person in Charge \_\_\_\_\_

Organization Mailing Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Estimated Attendance \_\_\_\_\_

Is event a fundraiser?  Yes  No

If yes, who is the beneficiary? \_\_\_\_\_

## 2. SUPPORTING DOCUMENT CHECKLIST

See Page 4 for more detailed information on the following items.

- Included (Required)** **FACT SHEET**
- Included (Required)** **PROPERTY OWNER WRITTEN PERMISSION**
- Included (Required)** **SITE MAP**
- Included (Required)** **POLICE DEPARTMENT SPECIAL EVENT FORM**
- Included (Required)** **CERTIFICATE OF INSURANCE**
- Included (Required)** **TRAFFIC PLAN**
- Included**     **Not Applicable**    **SIGN PLACEMENT MAP AND DETAILS**
- Included**     **Not Applicable**    **LIST OF VENDORS**
- Included**     **Not Applicable**    **SOLID WASTE SERVICES**
- Included**     **Not Applicable**    **STATE OF NEW MEXICO ENVIRONMENTAL DEPARTMENT FOOD PERMIT**
- Included**     **Not Applicable**    **LIQUOR LICENSE**
- Included**     **Not Applicable**    **NMDOT HIGHWAY PERMIT**
- Included**     **Not Applicable**    **CARNIVAL PERMIT DOCUMENTATION**

**Note: A \$50 refundable deposit is required if event is held outside of an existing building.**

## POLICIES AND PROCEDURES

1. Applicant must inform the Village of Los Lunas Community Development Department as to the status of obtaining other required permits, approvals, etc.
2. All debris and trash are the responsibility of the event organizer. It must be removed from the event site during the event and the site must be cleaned within twelve (12) hours after the end of the event.
3. The Village of Los Lunas may require on-site police, first aid and/or medical services to be provided at the expense of the applicant.
4. Bonfires and outdoor barbecues are not allowed without a permit from the Fire Department.
5. Amplified sound shall not exceed a level of amplification permitted under the Village of Los Lunas municipal codes and/or parks.

***Approval, denial, or inclusion of restrictions or special conditions of a special event permit is at the discretion of staff.  
All applications must be reviewed and approved before a permit can be issued.***

### 3. SIGNATURE OF AUTHORIZED APPLICANT(S)

*I, the undersigned representative, have read the Special Events 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.*

Printed Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

\*\*OFFICE USE ONLY\*\*

Permit #: \_\_\_\_\_ Received Date: \_\_\_\_\_ Zone: \_\_\_\_\_

APPROVED  DENIED Reviewed By: \_\_\_\_\_ Date: \_\_\_\_\_

Notes

*For Cashier's Use Only*

#### FEE CALCULATION

|                   |             |         |
|-------------------|-------------|---------|
| DEPOSIT           | _____       | \$50.00 |
| EVENT FEE         | \$25 X days | \$      |
| <b>TOTAL FEES</b> | _____       | \$      |

## SPECIAL EVENT VENDOR LIST

|                                                                                                               |                              |                             |
|---------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|
|  Vendor (Organization Name): |                              |                             |
| Vending Item:                                                                                                 |                              |                             |
| Contact Name:                                                                                                 |                              |                             |
| Phone:                                                                                                        |                              |                             |
| Email:                                                                                                        |                              |                             |
| Registered with the Village                                                                                   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

|                                                                                                               |                              |                             |
|---------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|
|  Vendor (Organization Name): |                              |                             |
| Vending Item:                                                                                                 |                              |                             |
| Contact Name:                                                                                                 |                              |                             |
| Phone:                                                                                                        |                              |                             |
| Email:                                                                                                        |                              |                             |
| Registered with the Village                                                                                   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

|                                                                                                               |                              |                             |
|---------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|
|  Vendor (Organization Name): |                              |                             |
| Vending Item:                                                                                                 |                              |                             |
| Contact Name:                                                                                                 |                              |                             |
| Phone:                                                                                                        |                              |                             |
| Email:                                                                                                        |                              |                             |
| Registered with the Village                                                                                   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

|                                                                                                                 |                              |                             |
|-----------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|
|  Vendor (Organization Name): |                              |                             |
| Vending Item:                                                                                                   |                              |                             |
| Contact Name:                                                                                                   |                              |                             |
| Phone:                                                                                                          |                              |                             |
| Email:                                                                                                          |                              |                             |
| Registered with the Village                                                                                     | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

|                                                                                                                 |                              |                             |
|-----------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|
|  Vendor (Organization Name): |                              |                             |
| Vending Item:                                                                                                   |                              |                             |
| Contact Name:                                                                                                   |                              |                             |
| Phone:                                                                                                          |                              |                             |
| Email:                                                                                                          |                              |                             |
| Registered with the Village                                                                                     | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

## CHECKLIST ADDITIONAL INFORMATION

**FACT SHEET:** Fact sheet must include a typed fact sheet describing your event. Information should include items such as event start and end times, activities, expected attendance, etc.

**PROPERTY OWNER WRITTEN PERMISSION:** Provide a formal letter that gives permission from the property owner to host event on their property and includes the dates for which permission is given and contact information for the property owner.

**SITE MAP:** Site map must identify items such as streets, sidewalks, and proposed parking; restrictions and closures; location of stages, fences, vendor/exhibit booths, alcohol sales, portable toilets, and trash/recycle containers.

**FOOD PERMIT:** If the event host is providing food, a copy of the approved New Mexico Environment Department food permit must be included in the packet. Vendors will submit on their own with their permit applications.

**LIST OF VENDORS:** List must include name and nature of business for all vendors that are part of your event. Vendors are required to obtain a vendor permit or a business registration from the Village of Los Lunas.

**FIRE DEPARTMENT PERMITS:** Permits for fireworks or pyrotechnics; camp fires, bon fires and open flames; carnivals, fairs or events that are fenced in or enclosed; and for events that have tents must be obtained from the Village of Los Lunas Fire Department. For the purposes of the Special Event Application, the Los Lunas Fire Department must acknowledge the application.

**POLICE DEPARTMENT PERMITS:** Applicable permits must be obtained from the Village of Los Lunas Police Department. For the purposes of the Special Event Application, the Los Lunas Police Department must acknowledge the application.

**SOLID WASTE SERVICES:** Per Village Ordinance, trash canisters must be obtained from the Village Solid Waste Department. Requests for trash canisters and/or dumpsters must be coordinated with the Solid Waste Department. The approval must be included in this packet.

**LIQUOR LICENSE:** The applicant must receive approval from the Village of Los Lunas and a permit issued by the State of New Mexico Regulation and Licensing Department, Alcohol and Gaming Division. The event insurance requirements must be met. The liquor liability insurance is required to list the Village of Los Lunas as an additional insured entity.

**NM STATE HIGHWAY PERMIT:** A permit is required if the special or civic event requires or calls for the temporary closing of a state highway or re-routing the state traffic by means of shutting off, blocking, re-routing, or other restriction of the normal use of highway.

**CARNIVAL PERMIT:** Applicant must provide

- (A) A Certificate of registration from New Mexico Regulation and Licensing Department,
- (B) A list from the insurance company containing a schedule by name and serial number of each carnival ride insured under the policy, and
- (C) A complete and notarized "Certification for Operation" application filed with the New Mexico Regulation and Licensing Department.

**SIGN PLACEMENT MAP AND DETAILS:** Provide a map for the placement of all signs. Include details regarding sign size and content. Signs may be placed in accordance with the Village of Los Lunas Municipal Code.

### INSURANCE:

- a. Event organizers must provide the Village of Los Lunas with proof of General Liability Insurance in the amount of at least one million dollars (\$1,000,000) per occurrence, which covers activities and facility as described in the application. Carnivals are required an amount no less than three million dollars (\$3,000,000) per occurrence. In case of insurance cancellation, the Village of Los Lunas must be notified. The Village of Los Lunas shall be named as additional insured as determined by this agreement.
- b. Liquor liability or fireworks insurance are required for events involving the serving of alcohol beverages or the use/demonstration of fireworks. Liquor liability coverage shall be per occurrence limit of \$1 million. Higher limits may be required dependent upon the event type or as determined by the Community Services Director.

**DEPOSIT:** Per Village ordinance, a \$50 deposit check made to the Village of Los Lunas is required to cover the Village's cost of clearing the area of debris. If applicant leaves the area in good standing, the check will be returned uncashed to the applicant.