Event Information

Event Name: __________________________________________________

Event Date(s): ____________________

Event Hours: __________ a.m. / p.m. to __________ a.m. / p.m.

Set Up: __________ a.m. / p.m.

Strike: __________ a.m. / p.m.

Event Location:
(Please mark all that apply.)

Kiosko Plaza □  Pico House □  Sanchez Street □  Garnier Courtyard □

South Plaza □  Biscailuz Gallery □  Father Serra Park □  Garnier Annex Room □

North Plaza □  Placita Dolores □  Avila Courtyard □  Gateway to Nature □

Purpose/Description of the Event
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Event Sponsor(s): ____________________________________________________________

Is this event open to the public? Yes □ No □ Maximum Attendance Expected:________

Is a ticket purchase required for the event? Yes □ No □
(If yes, please provide additional information in the ‘Description’ section above.)

What type of publicity will be used to promote the event?
Including press release, media alert, public service announcements, etc.)
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

El Pueblo Historical Monument
Event Application
125 Paseo de la Plaza, Suite 203
Los Angeles, CA 90012
Office: (213) 485-8372 / (213) 485-8225
Will you be sending out invitations?  Yes ☐  No ☐
(If yes, please attach a sample of the invitation.)

Dignitaries to be invited:
(Please indicate if confirmed.)

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Will you have entertainment?  Yes ☐  No ☐
(If yes, please list name and type in the space provided.)

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___________________________________________________________________________
___________________________________________________________________________
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___________________________________________________________________________
___________________________________________________________________________

Will you have food served at this event?   Yes ☐  No ☐
(If yes, please provide caterer’s contact information. In addition, the caterer must have a valid health permit.)

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Will alcohol be served at this event?  Yes ☐  No ☐
(If yes, please provide the vendor’s contact information. In addition, the vendor must have a valid liquor license.)

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Will you have third party vendors at this event?       Yes ☐  No ☐
(If yes, please list vendor’s contact information.)

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Will you be hanging banners?    Yes ☐  No ☐
(If yes, please provide number and dimensions.)

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___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
**Additional Logistics**

Will you have tables, chairs, booths, portable toilets, etc.?  Yes ☐  No ☐
*(If yes, please list equipment below, and provide a draft copy of your site plan.)*

<table>
<thead>
<tr>
<th>Booths:</th>
<th>10x10:</th>
<th>10x20:</th>
<th>20x20:</th>
</tr>
</thead>
<tbody>
<tr>
<td>________</td>
<td>________</td>
<td>________</td>
<td>________</td>
</tr>
</tbody>
</table>

Portable Toilets:

<table>
<thead>
<tr>
<th>Standard:</th>
<th>ADA:</th>
</tr>
</thead>
<tbody>
<tr>
<td>________</td>
<td>________</td>
</tr>
</tbody>
</table>

Chairs: ________  Tables: ________

Will you be renting this equipment?  Yes ☐  No ☐
*(If yes, please provide the rental company’s contact information.)*

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Will you have an audio or visual system?  Yes ☐  No ☐
*(If yes, please provide the company’s contact information.)*

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Will you have inflatable and/or children’s rides?  Yes ☐  No ☐
*(If yes, please provide type and the company’s contact information.)*

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Will you provide your own security?  Yes ☐  No ☐
*(If yes, please provide the company’s contact information.)*

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Will you provide your own custodial service?  Yes ☐  No ☐
*(If yes, please provide the company’s contact information.)*

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Have you made arrangements for parking?  Yes ☐  No ☐

*(The Monument is unable to provide free parking. For parking rates and/or arrangements, please contact Henry Matute, GSD Parking Supervisor at 213-473-5515.)*
Event Coordinator’s Contact Information

Name: ______________________________ Title: _______________________________
Organization: _____________________________________________________________________________
Address: ____________________________________________________________
________________________________________
Phone: ___________________ Cell: ___________________ Fax: ___________________
E-mail: ____________________________

Monument Use Fees and Requirements

1. Monument event usage fees are as follows:

   **Pico House:**
   6 Hours ($1,250.00) / Calendar Day ($4,000.00)

   **Kiosko Plaza, South Plaza, Placita Dolores:**
   6 Hours ($1,000.00) / Calendar Day ($3,500.00) – each area

   **Biscailuz Gallery, North Plaza, Father Serra Park:**
   6 Hours ($1,000.00) / Calendar Day ($2,000.00) – each area

   **Gateway to Nature Center, Sanchez Street, Avila Courtyard:**
   6 Hours ($1,250.00) / Calendar Day ($2,500.00)

   **Garnier Annex Room, Garnier Courtyard:**
   6 Hours ($500.00) / Calendar Day ($1,000.00) – each area

   **Sanchez Street Gravel Lot:**
   Calendar Day ($1,000.00)

2. If an Event exceeds 250 people, Permittee is required to provide and service portable
   toilets.

3. If an Event exceeds 250 people, Permittee shall provide sufficient security guard service
   to ensure public safety.

4. Permittee will reimburse the Monument for any damages and repairs caused by their
   event. Upon approval of the application, a refundable $2,000.00 Security/Maintenance
   Deposit is required for each site usage area. The Security/Maintenance Deposit must
   be in the form of a business check, “cashier’s check” or “money order.”
5. Permittee must return premises in an undamaged, clean, swept condition; otherwise the Security/Maintenance deposit may be forfeited.

6. Permittee shall deliver to the Monument a Certificate of insurance in a form acceptable to the City Attorney, in an amount of not less than $1,000,000.00 Comprehensive General Liability, naming the City of Los Angeles, El Pueblo Monument, and their officers, employees, and agents as additional insured there under. The Certified and Additional Insured binder shall be hand signed in ink by the authorized agent of the Insurance Company.

7. Permittee shall obtain all necessary permits for this event. Permittee accepts the responsibility of enforcing all state, county, and city laws regarding the use of intoxicants.

8. The Monument shall assign an employee to act as a liaison to protect the Monument’s interests throughout the event. The Monument shall recover the cost of maintaining the liaison at the Monument during non-operational hours from Permittee.

9. Pedestrian flow of Traffic in and out of the museums shall not be obstructed during Monument operational hours.

10. A monitor fee will be assessed for all event hours at current Monument cost recovery rates. Additional monitor(s) may be required for museum areas or large-scale events at the discretion of the Monument.

Please send the completed application to:

El Pueblo Historical Monument
Special Events Division
125 Paseo de la Plaza, Suite 203
Los Angeles, CA 90012

Office: (213) 485-8372 / Fax: (213) 485-8238

Revised 9/22/21