



# County of San Diego

5500 Overland Avenue, Suite 170 San Diego, CA 92123  
TELEPHONE: (858) 694-3614 FAX: (858) 999-8920



## COMMUNITY EVENT PERMIT (CEP) APPLICATION INSTRUCTIONS

**Per SDCC Sec. 21.203** - An application must be submitted at **least 30 days before** the first day of the proposed event to allow for adequate processing time and review. Failure to provide a complete application package on time will not allow for a Community Event Permit to be issued.

### THE FOLLOWING ITEMS ARE REQUIRED WITH YOUR CEP APPLICATION:

1. California Non-Profit Entity Number. You can verify it [here](#) or at <https://bizfileonline.sos.ca.gov/search/business>
2. Event Site Map with the following clearly depicted (hand drawn maps are acceptable):
  - a. Indicate the **North (N)** direction using an arrow.
  - b. Identify ALL streets surrounding the event.
  - c. Location of main safety/security headquarters.
  - d. ALL amplified speakers, generators, and stage/s. Direction of sound using arrows.
  - e. ALL ADA and Regular restrooms available for the event.
  - f. Designated spaces for event parking.
  - g. ALL food booth vendors.
  - h. ALL other activities occurring at event (Carnival, Petting Zoo, Beer Garden, Craft Vendors, etc.).
3. Copy of Certificate of Liability Insurance with proof of general liability (no alcohol served) and/or liquor liability (alcohol served). **NOTE: If liquor is being served/consumed, you must obtain Liquor Liability.**
4. Copy of a separate Additional Insurance Endorsement. Form **CG 20 12**, Form **CG 20 26** or equivalent is acceptable.
5. Copy of any contracts or agreements signed for the event.

### HOW TO OBTAIN A COMMUNITY EVENT PERMIT:

#### **NEW EVENTS**

1. Complete Sections I – XIV of CEP Application with as much detail as possible.
2. Email or Fax completed CEP Application to the CEP Coordinator.
3. **The CEP Coordinator will contact you via phone or email to schedule a time to discuss your application.**
4. If Supplemental Forms (A-E) are required, you will be informed during the scheduled interview.
5. A complete CEP Application contains Sections I - XIV, Supplemental Forms (A-E), Insurance Documents, Event Site Map and any contracts or agreements signed for the event.

#### **RENEWAL EVENTS**

1. Contact the CEP Coordinator to obtain your last CEP Application and any Supplemental Forms to update.
2. Once updated, Email or Fax documents to the CEP Coordinator.
3. **The CEP Coordinator will contact you via phone or email to schedule a time to discuss your application.**
4. If Supplemental Forms (A-E) are required, you will be informed during the scheduled interview.
5. A complete CEP Application contains Sections I - XIV, Supplemental Forms (A-E), Insurance Documents, Event Site Map and any contracts or agreements signed for the event.

Email [DEHCommunityEvents@sdcounty.ca.gov](mailto:DEHCommunityEvents@sdcounty.ca.gov) or Fax (858) 999-8920 completed application to CEP Coordinator. Coordinator will contact you for a Phone or In-Person meeting to discuss Supplementary Forms required. Failure to provide a complete application package at least 30 days prior to first day of proposed event may not allow for a Community Event Permit to be issued. Changes to your application after submittal may lead to delay or denial of your Permit.

**CANCELLATION OR REVISION NOTICE:** If the information on this application changes or is cancelled, **notice must be given to the CEP Coordinator** at (858) 694-3614. Otherwise, personnel and equipment may be needlessly dispatched.





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## INSURANCE REQUIREMENTS FOR COMMUNITY EVENTS PERMIT

The **Sponsoring Organization** and any other **Event Principals** must provide proof of insurance, INCLUDING a separate Additional Insured Endorsement Form (from a generally recognized domestic insurance carrier) for the duration of the event. Insurance requirements depend upon the **risk level of the event** and are subject to approval by County Risk Management. **Vendor or service providers** may be required to provide a certificate of insurance and an additional insured endorsement naming the County of San Diego as an additional insured.

### COUNTY INSURANCE REQUIREMENTS FOR EVENTS (NO ALCOHOL SERVED/CONSUMED)

- I. A **Certificate of Insurance for Commercial General Liability** with a \$1,000,000 per occurrence limits of liability and \$2,000,000 general aggregate..:

**Certificate Holder should be addressed to:**

County of San Diego, Risk Management Division  
c/o Insurance Coordinator MS O-76  
5530 Overland Avenue, Suite 210 San Diego, CA 92123

- II. A separate **Additional Insurance Endorsement** – Form CG 2012, Form CG 2026, or equivalent naming **“The County of San Diego, its agents, officers, and employees as Additional Insured.”**

**NOTE:**

Insurance **policy number** must be indicated on both the **Certificate of Insurance for Commercial General Liability** and **Additional Insurance Endorsement**.

“Claims Made” policies are generally not acceptable.

### COUNTY INSURANCE REQUIREMENTS FOR EVENTS WITH ALCOHOLIC BEVERAGES (SERVED/CONSUMED)

- I. A **Certificate of Insurance for Commercial General Liability** with a \$1,000,000 per occurrence limits of liability and \$2,000,000 general aggregate..:

**Certificate Holder should be addressed to:**

County of San Diego, Risk Management Division  
c/o Insurance Coordinator MS O-76  
5530 Overland Avenue, Suite 210 San Diego, CA 92123

- II. **Evidence of Liquor Liability Insurance** with a \$1,000,000 per occurrence limit of liability is required from the Non-Profit Organization applying for the Alcoholic Beverage Control Event Permit.

**Host Liquor Liability is not adequate when an Alcoholic Beverage Control Event Permit is purchased.**

- III. A separate **Additional Insurance Endorsement** – Form CG 2012, Form CG 2026, or equivalent – naming **“The County of San Diego, its agents, officers, and employees as Additional Insured.”**

**NOTE:**

Insurance **policy number** must be indicated on both the **Certificate of Insurance for Commercial General Liability** and **Additional Insurance Endorsement**.

“Claims Made” policies are generally not acceptable.

### FOR CEP COORDINATOR USE ONLY

In-Person Interview	Date Scheduled: _____	Time: _____	AM	PM
Phone Interview	Name of Interviewed Representative/s: _____			
Virtual Meeting	_____			
E-mail Review	_____			





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## COMMUNITY EVENT PERMIT (CEP) APPLICATION

NEW EVENT

RENEWAL

Event Site Map attached

Insurance attached

Date Submitted:

### I. APPLICANT

EVENT INFORMATION	Event Name: _____	
	Event Address: _____	Assessor's Parcel Number (APN): _____
	Name of County Park: _____	Reserved : YES NO
SPONSORING NON-PROFIT ORGANIZATION	Name: _____	Website: _____
	Organization Address: _____	CA Non-profit Entity #: _____ Federal Tax ID #: _____
ORGANIZATION REPRESENTATIVES	Primary Contact: _____	Phone #: _____
	E-mail address: _____	Cellphone #: _____
	Alternate Contact: _____	Phone #: _____
	E-mail address: _____	Cellphone #: _____

We are committed to enhancing communication and services to our customers. In support of this effort, we are seeking information on the primary languages spoken by you and your staff. This information will allow the County of San Diego to continue to translate various applications and informational materials.

**Preferred Language:** Arabic Chinese – Cantonese Chinese – Mandarin English Farsi Filipino  
Japanese Karen Korean Somali Spanish Vietnamese Other \_\_\_\_\_

**Preferred Secondary Language:** Arabic Chinese – Cantonese Chinese – Mandarin English Farsi Filipino  
Japanese Karen Korean Somali Spanish Vietnamese Other \_\_\_\_\_

### II. EVENT DETAILS

<b>DAY #1 Date:</b> From: _____ AM _____ PM Until : _____ AM _____ PM	<b>DAY #2 Date:</b> From: _____ AM _____ PM Until : _____ AM _____ PM	<b>DAY #3 Date:</b> From: _____ AM _____ PM Until : _____ AM _____ PM	<b>DAY #4 Date:</b> From: _____ AM _____ PM Until : _____ AM _____ PM	<b>Set-Up</b> <b>Dismantle</b>	<b>Date</b> _____ <b>Time</b> _____ _____ _____ _____ PM
<b>NUMBER OF ATTENDEES PER DAY</b> (Over 2,000 requires Supplemental Form E) # of Staff/Volunteers/Vendors : _____ # of Visitors and Guests: _____ Total Number PER DAY: _____ FORM E attached: YES NO	<b>NUMBER OF RESTROOMS</b> Regular ADA EXISTING: _____ PORTABLE: _____ Total: _____ Secondary Containment: YES NO	<b>FOOD VENDORS</b> Food Vendors: _____ Organizer's food booth: _____ Total: _____ FORM A attached: YES NO	<b>SAFETY &amp; SECURITY</b> Volunteers: _____ Hired Securities: _____ Total: _____ Attire: _____ Color: _____ FORM B attached: YES NO Security Contract attached: YES NO		

ACTIVITIES: Mark "Y" for YES, "N" for NO. \* Types of Activities: Requires ADDITIONAL Sheriff's Permit A, B, C, D Requires Supplemental Forms A, B, C, D Respectively

_____ Alcohol Served	_____ Fireworks*	_____ Parade / Road Closure <sup>D</sup>
_____ Art Show	_____ Food <sup>A</sup>	_____ Photo Booth*
_____ Beer Garden	_____ Fortune Telling*	_____ Petting Zoo
_____ Bike Ride/Bike Race <sup>D</sup>	_____ Gaming Activities*	_____ Rides*
_____ Bleachers Installation	_____ Haircut Services*	_____ Animal _____ Train
_____ Bounce Houses*	_____ Kid's games* (Provide list below)	_____ Mechanical Bull* _____ Hayride
_____ How many _____		
_____ Carnival*	_____ Live Entertainment*	_____ Raffle*
_____ Casino*	_____ Marathon / Run <sup>D</sup>	_____ Rockwall Climbing*
_____ Craft Show	_____ Massage Services*	_____ Rodeo
_____ Dunk Tank*	_____ Other Inflatables*	_____ Shuttle Transportation Service
_____ Face Painting*	_____ Obstacle Course	_____ Silent Auction*
	_____ Slides	_____ OTHERS: _____





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## III. INSURANCE

If **Alcoholic Beverages** will be consumed at your event, proof of **Liquor Liability** is required from the Organization applying for the ABC permit.

**Host Liquor Liability** is not adequate.

A separate **Additional Insurance Endorsement CG 2012 or CG 2026** – naming the County of San Diego, its Agents, Officers, and Employees as Additional Insured is required.

For questions or assistance, please contact **Jose Barrera**, HR Analyst at (858) 505-6450.

Name of Insurance Agency:

Name of Agency Representative:

Address:

Agency Phone:

Agency Fax:

## IV. EVENT ACTIVITIES

List all activities occurring during your event. If there is a private contractor or promoter for any activities, provide their name and contact information. (Example: Electric Groove Band – John Doe – 858.867.5309; Laser Tag – Jane Doe – 619.867.5309)

## V. AVAILABILITY OF ALCOHOLIC BEVERAGES

A	Alcoholic Beverages will be served?	YES	NO
	If YES, <b>Liquor Liability</b> must be obtained by the Organization applying for the ABC License. <b>I understand.</b>		
	NOTE: : Alcohol shall not be served or sold without a valid Alcoholic Beverage Control (ABC) Permit. Approval from the Sheriff's Licensing Division will be provided to ABC once Risk Management receives confirmation of acceptable proof of insurance.		

Organization Applying for ABC License:

Contact Name:

Phone #:

E-mail:

Address:

City:

State:

Zip:

B	<b>Describe how, where, when, and by whom the alcoholic beverages will be served.</b>
	Example: Only people 21 years and older will be served in the Beer Garden during the event by organization volunteers.

C	<b>Explain how you will ensure only persons 21 years or older will be served/consume alcoholic beverages.</b>
	Example: Security volunteers will check IDs and provide wristbands for those 21 years and older. Beer Garden security will check for wristbands.







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## VI. SECURITY AND SAFETY PROCEDURES

<b>A</b>	Explain set up, operation, internal security, and crowd control. If the event is to occur at night, describe how you are going to light the event area to increase the safety of participants and spectators. If events will be hiring licensed security officers, you will need to complete <b>FORM B – Section II</b> . Do not list local Sheriff's Department as they do not provide internal security for events. Additional hired security may be required at the discretion of the local station.			
<b>B</b>	If your event includes vehicles or animals on parade, describe the minimum and maximum speeds of the event and the minimum and maximum intervals of space to be maintained between units.			
<b>C</b>	Which of the following items will be used at your event? Fire Department permit or letter of authorization attached. YES NO N/A *If you checked Fireworks/Pyrotechnics, you would need to complete <b>Form B – Section III</b> .			
	Air Supported structures Canopies: How Many _____ Dimensions _____ Cooking Facilities	Enclosures Fabric shelters Fireworks/Pyrotechnics*	Open Flame Parade Floats Tents How Many _____ Dimensions _____	Vehicle Fuel
<b>D</b>	Will the events use the State Highways or thoroughfares? YES NO If YES, it may be necessary for you to contact the California Highway Patrol and secure an encroachment permit from the State of California Department of Transportation (Caltrans). Copy of permit attached. YES NO			

## VII. TRAFFIC CONTROL

Will County road closures/usage occur?	YES	NO
If any activities require public road closure (Example: a parade, street fair, block party, festival, fundraising activity or other similar action); includes use of the road for event support, such as parking or equipment staging, even if the event is not conducted within the right-of-way; or the public road is used to conduct an organized athletic event such as a bicycle ride/race, running event, march/procession or a similar event where the activity is conducted within the right of way, you will need to complete <b>Form D</b> . Attached		
	YES	NO N/A

## VIII. MITIGATION OF THE IMPACT ON OTHERS

Fully describe your plans to notify, two weeks in advance, affected businesses and citizens about the event including notices through local publications and other media, direct mail announcements, neighborhood postings or door-to-door notices. Such notices should reflect the type of event and activities, as well as the day(s), dates(s), time(s) and site(s) affected. Detours and alternate routes for transportation system should also be included.

## IX. VENDORS OR CONCESSIONAIRES

The organizer of a community event shall make available to the Sheriffs' Licensing Division a list of all entertainers, vendors, and solicitors participating in the event. Note: Pursuant to Section 6976 of the Zoning Ordinance, no person shall cause or permit the establishment, operation, enlargement, or transfer ownership of a facility of marijuana for medical or non-medical purposes. This includes growing and/or the commercialization of marijuana on private property.

Describe what vendors/concessionaires you will allow in conjunction with the event. What is their purpose? Example: Craft vendors will sell homemade wares. Complete **Form B – Section I**. Attached YES NO N/A





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## X. AVAILABILITY OF FOOD

Will prepackaged or other food and/or non-alcoholic beverages be served? If YES, you will need to **complete Form A.**

YES NO

Catered: Name of Caterer: \_\_\_\_\_ Health Permit Record ID: \_\_\_\_\_ Phone #: \_\_\_\_\_

Served Free of Charge

Sold

Tasting event **Non-Profit Organization Letter:** Attached YES NO **Declarations:** Attached YES NO

Food contest

## XI. BUILDING AND NOISE ABATEMENT

<b>A</b>	<b>Temporary Structures: Will a temporary structure be installed?</b>	YES	NO	
<b>a.</b>	<b>Will any temporary stage, bridge or other platform exceed 30" in height above adjacent grade?</b>	YES	NO	Existing
	STAGE: Height _____ Dimension _____ Material _____ Use _____			(performers, public, both)
<b>b.</b>	<b>Will any temporary single bleacher, grandstand or reviewing stand support 50 or more people?</b>	YES	NO	Existing
	BLEACHERS: Number of Rows _____ Height in feet _____			
<b>c.</b>	<b>Will there be any modifications (painting, mural et.al) on the property?</b>	YES	NO	
	If yes, provide details _____			
	Who will be responsible for cleaning up and returning the property back to its original state? _____			
<b>B</b>	<b>Electricity: Will this event require the use of electricity?</b>	YES	NO	Existing
	Will fixed wiring methods be installed? If YES, contact County PDS Building Division	YES	NO	
	Will plug connected flexible cords, extensions, and portable electric panels will be used?	YES	NO	
<b>C</b>	<b>Will there be music and/or noise generating components?</b>	YES	NO	
	If YES, attach Event Site Map showing location of the stage/s, speakers, generators, or any other major sound production including sound direction of the speakers. <b>Event Site Map attached.</b>	YES	NO	
	Will there be off-site or on-site noise related to the setting up or installation of equipment?	YES	NO	
	Sound System Set Up Date _____ Start Time _____ End Time _____			
	Rehearsal Sound Check Date _____ Start Time _____ End Time _____			
	Sound System Pack Up Date _____ Start Time _____ End Time _____			
<b>D</b>	<b>Will there be temporary measures to reduce sound impact to adjacent properties?</b>	YES	NO	

## XII. WASTE MANAGEMENT PLAN

Will your event have over 2,000 attendees PER DAY?	YES	NO
If any events have over 2,000 attendees per day (including those attending your event, working the event and volunteers), you will need to submit completed supplemental <b>Form E.</b>		
Waste Management Report shall be submitted within 30 days after event completion to <a href="mailto:Recycle@sdcounty.ca.gov">Recycle@sdcounty.ca.gov</a> INITIAL : _____		
Name of Waste Disposal Company contracted for cleanup effort . _____		
Person responsible for cleaning up after animals during and after the event. _____		

## XIII. WATERSHED PROTECTION PROGRAM STATEMENT

"I have read the Guidance Document and will implement the County of San Diego Watershed Protection Program's Best Management Practices for Special Events to help prevent pollution. I am aware that failure to contain and dispose of the trash and materials generated from the event, could subject the event organizer to corrective actions and fines." INITIAL : \_\_\_\_\_





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### XIV. DEPARTMENT OF ANIMAL SERVICES STATEMENT

"All animals are to be treated in a humane manner and be provided with proper care, and attention at all times. Animal Control Officers are, at all reasonable times, to be permitted full access to examine any/all animals to be used in and/or kept on the premises of the event. Failure to provide access and/or immediate correction of any violations may result in immediate suspension of the CEP." INITIAL : \_\_\_\_\_

ANIMAL ADOPTION

ANIMAL RIDE

PETTING ZOO

RODEO : Mark rodeo events (Requires Veterinarian)

Bareback Riding

Steer Wrestling

Tie-Down Roping

Saddle Bronc Riding

Team Roping

Barrel Racing

Bull Riding

Steer Roping

Name of Veterinarian: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

I, the undersigned hereby apply for a Community Event Permit under the provisions of the SAN DIEGO COUNTY CODE OF REGULATORY ORDINANCES relating to COMMUNITY EVENTS, SECTION 1, Chapter 2.9, Division 1 of Title 2, and applicable state laws.

I hereby state that I am aware it is my responsibility to attempt to maintain order at said event and will provide such personnel as may be required and approved by the Sheriff.

I certify under penalty of perjury that the information I have given is true and correct and to the best of my knowledge and belief. I understand and agree to having all required notices unless otherwise specified, sent by US Mail to the address given on this application. I have read and/or understand the sections of the San Diego County Code of Regulatory Ordinances pertaining to the CEP.

I understand that it is my responsibility to obtain any additional permits/licenses that may pertain to my event activities.

I am aware that if my application is not received complete within 30 days prior to my proposed event date, a Community Event Permit may not have enough time to be thoroughly processed, and therefore may not be issued.

I understand and hereby consent to any information I provide on this permit application to be considered a public record subject to disclosure under the California Public Records Act.

\_\_\_\_\_  
Applicant's Name (Print):

Signature: \_\_\_\_\_

Date: \_\_\_\_\_





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San Diego, CA 92123

Phone: (858) 694-3614 Fax: (858) 999-8920

Email: [DEHCommunityEvents@sdcounty.ca.gov](mailto:DEHCommunityEvents@sdcounty.ca.gov)



## DEPARTMENT COMMUNITY EVENT PERMIT (CEP) REPRESENTATIVES

### **DEPT. OF ENVIRONMENTAL HEALTH & QUALITY (DEHQ)/CEP COORDINATOR - FOOD AND HOUSING DIVISION - (MAIN POINT OF CONTACT)**

Jescel Esteban - (858) 694-3614 - Fax (858) 999-8920 - MS O560

[DEHCommunityEvents@sdcounty.ca.gov](mailto:DEHCommunityEvents@sdcounty.ca.gov)

### **DEHQ - FOOD AND HOUSING DIVISION (FHD) - (WILL YOU HAVE FOOD?)**

Temporary Event Specialist - (858) 505-6809 - Fax (858) 999-8920 - MS O560

[FHDtempevents@sdcounty.ca.gov](mailto:FHDtempevents@sdcounty.ca.gov)

### **DEPT. OF PLANNING AND DEVELOPMENT SERVICES - ZONING - (IS THE TEMPORARY EVENT ALLOWED?)**

Dag Bunnemeyer - (619) 876-1314 - No Fax - MS O650

[Dag.Bunnemeyer@sdcounty.ca.gov](mailto:Dag.Bunnemeyer@sdcounty.ca.gov)

### **DEPT. OF PLANNING AND DEVELOPMENT SERVICES - NOISE ABATEMENT - (SPEAKER/SOUND SET UP)**

Vicky Doan - (619) 455-9460 - No Fax - MS O650

[Vicky.Doan@sdcounty.ca.gov](mailto:Vicky.Doan@sdcounty.ca.gov)

### **DEPT. OF HUMAN RESOURCES - RISK MANAGEMENT DIVISION - (MEET INSURANCE REQUIREMENTS?)**

Jose Barrera - (858) 505-6450 - Fax (858) 694-3834 - MS O76

[Jose.Barrera@sdcounty.ca.gov](mailto:Jose.Barrera@sdcounty.ca.gov)

### **SHERIFF'S LICENSING DIVISION - (ALCOHOL [ABC] APPROVER, SAFETY/SECURITY, ENTERTAINMENT, CARNIVAL)**

Kacey Russell - (858) 974-2108 - Fax (858) 974-2093 - MS O41

[Kacey.Russell@sdsheriff.org](mailto:Kacey.Russell@sdsheriff.org)

### **DEPT. OF PARKS AND RECREATION - (IS THE EVENT IN A COUNTY PARK?)**

Jessie Vazquez-Ortiz - (858) 966-1308 - Fax (858) 495-5841 - MS O29

[JessieA.VasquezOrtiz@sdcounty.ca.gov](mailto:JessieA.VasquezOrtiz@sdcounty.ca.gov)

### **DEPT. OF PUBLIC WORKS - TRAFFIC CONTROL - (ANY IMPACTS TO COUNTY ROADS?)**

Danilo Mappala - (858) 694-3866 - Fax (858) 694-3928 - MS O334

[DPWSpecialEvent.Permit@sdcounty.ca.gov](mailto:DPWSpecialEvent.Permit@sdcounty.ca.gov)

### **DEPT. OF PLANNING AND DEVELOPMENT SERVICES - BUILDING DIVISION - (BUILDING STRUCTURES?)**

Michael Casady - (858) 694-3063 - No Fax - MS O650

[Michael.Casady@sdcounty.ca.gov](mailto:Michael.Casady@sdcounty.ca.gov)

### **DEPT. OF ANIMAL SERVICES - (ANY PETTING ZOO, ANIMAL RIDES, SELLING ANIMALS?)**

Rachael Borrelli - (760) 683-4972 - MS N147 Borrelli, Rachael

[Rachael.Borrelli@sdcounty.ca.gov](mailto:Rachael.Borrelli@sdcounty.ca.gov)

### **DEPT. OF PUBLIC WORKS - RECYCLING - (OVER 2,000 ATTENDEES PER DAY REQUIRES WASTE DIVERSION REPORT)**

Kaitlin Lowe - (858) 694 2456 - No Fax - MS O350 DPW, Recycle

[Recycle@sdcounty.ca.gov](mailto:Recycle@sdcounty.ca.gov)





COUNTY OF  
SAN DIEGO

WATERSHED PROTECTION PROGRAM



## Special Events

The *County of San Diego Watershed Protection Program* supports businesses and Event Organizers in their efforts to prevent pollution by offering these important Stormwater Best Management Practices (BMPs).

- ❗ Water that is released into the streets, gutters, and storm drains in San Diego County IS NOT TREATED before it reaches our local creeks, rivers, and the ocean. All sources of pollution are prohibited from leaving your property and entering streets or storm drains. Only rainwater is allowed in the streets and storm drains.

*Event Organizers and Permit Applicants can help keep our waterways clean by implementing the following stormwater BMPs to prevent pollution.* As an Event Organizer or Permit Applicant, the first step is to identify potential sources of pollutant discharges to implement BMPs.

### Before The Event

- ❑ Protect and cover all storm drain inlets in the event area.
- ❑ Locate Portable Sanitary Toilet areas away from storm drains or water bodies.
- ❑ Place trash cans and recycle bins in convenient locations and keep lids closed to reduce “fly away” litter.
- ❑ Maintain spill response materials and equipment (e.g., spill pads, rags) and keep them readily accessible.
- ❑ Train event staff to properly use spill cleanup supplies and procedures.

*more tips >>>*

we can  
**protect our  
waterways**

with just  
a few steps.



For more information, call the Stormwater Hotline at (888) 846-0800 or visit [www.sandiegocounty.gov/stormwater](http://www.sandiegocounty.gov/stormwater) for the Watershed Protection Ordinance (WPO).



## Special Events

### During The Event

- ❑ Use dry cleanup methods such as sweeping, wiping, vacuuming, or raking.
- ❑ Sweep up and remove dirt, leaves, litter, and debris from paved areas.
- ❑ Remove litter, debris, and organic waste from landscaped areas.
- ❑ Empty trash and recycling containers regularly to prevent overflowing.
- ❑ Promptly clean up spills as they occur.
- ❑ Post signs to encourage reporting when cleaning or repair of portable sanitary toilets is needed.
- ❑ Contain all spills on-site. Immediately report any spills or leaks that reach the storm drain system by calling the Stormwater Hotline at (888) 846-0800.

### After The Event

- ❑ Uncover any storm drain inlets covered during the event.
- ❑ Conduct a final facility walk-through.



Portable toilets located away from storm drains



Sweep, rake, and collect litter/trash



Covered storm drain

- ❗ The County of San Diego Watershed Protection Program will conduct random stormwater inspections to evaluate if the site was properly maintained. **Failure to contain and dispose of the trash and materials generated from the event, could subject the Event Coordinator to corrective actions, fines, and denial of future event permits.**



**thank you** for doing your part to protect our waterways.



For more information, call the Stormwater Hotline at (888) 846-0800 or visit [www.sandiegocounty.gov/stormwater](http://www.sandiegocounty.gov/stormwater) for the Watershed Protection Ordinance (WPO).