

# CITY OF SANTA BARBARA



## PERMIT APPLICATION PROCESS CIRCUSES and CARNIVALS

City of Santa Barbara Municipal Code, Chapter 5.72

Name of Applicant: \_\_\_\_\_

### TO BE COMPLETED BY APPLICANT:

| AT CITY HALL, COMPLETE AND SUBMIT THE FOLLOWING FOR BUSINESS PERMIT:               | DATE COMPLETED | CITY AGENT SIGN OFF ON COMPLETION |
|--|----------------|-----------------------------------|
| Application for City Permit form.  |                |                                   |
| Authorization to Release Information form.   |                |                                   |
| Certificate of Insurance.<br>Board of Industrial Relations Inspection Certificate. |                |                                   |
| Payment of fee \$150.00.   |                |                                   |

| AT FIRE PREVENTION, 925 DE LA VINA STREET<br>BRING SITE PLAN FOR FIRE PERMIT: | DATE COMPLETED | CITY AGENT SIGN OFF ON COMPLETION |
|---|----------------|-----------------------------------|
| Pursuant to Fire Code CFC 105.6.4   |                |                                   |
| Payment of fee for Mechanical Permit for Rides                                |                |                                   |

### TO BE COMPLETED BY POLICE PERMIT INVESTIGATOR:

#### Police Department Use Only

To be completed by Police Permit Investigator:

- Investigate information provided. Verify compliance with CAL OSHA, if appropriate.
- Coordinate recommendation with Special Events Officer.
- If tents are to be used, advise Fire Prevention Officer.

DATE COMPLETED

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Police permit investigator's recommendations on the issuance of the permit to the applicant:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### CHIEF OF POLICE

Approval of permit application: \_\_\_\_\_ Date: \_\_\_\_\_

Disapproval of permit application: \_\_\_\_\_ Date: \_\_\_\_\_



**TYPE: CIRCUSES AND CARNIVALS**

|   |                 |                               |         |
|---|-----------------|-------------------------------|---------|
| Applicant's Name:   |                 | Date of Application:          |         |
| Residence Address (include street, city, and zip code):             |                 |                               |         |
|   |                 |                               |         |
| Mailing Address, if different (include street, city, and zip code): |                 |                               |         |
|   |                 |                               |         |
| Applicant's Phone Number:   |                 | Social Security No:           |         |
| California Driver's License No.<br>(submit photocopy)               |                 | Are you a U.S. citizen?       |         |
| Date of Birth:  | Place of Birth: |                               |         |
| Color of Hair:  | Color of Eyes:  | Height:                       | Weight: |
| Length of time in Santa Barbara:                                    |                 | Length of time in California: |         |
| Name of Business:   |                 |                               |         |
| Name of Business Owner:   |                 | Business Phone Number:        |         |
| Business Address (include street, city, and zip code):              |                 |                               |         |
| Date and Location proposed circus or carnival is to be held:        |                 |                               |         |

**List of Attractions to be Operated:**

**List the full address for your places of residence over the past five years, starting with the most recent. After the address, show the dates (month and year) at each residence.**

|    |       |            |          |
|----|-------|------------|----------|
| 1. | _____ | from _____ | to _____ |
| 2. | _____ | from _____ | to _____ |
| 3. | _____ | from _____ | to _____ |
| 4. | _____ | from _____ | to _____ |
| 5. | _____ | from _____ | to _____ |

**List your last five places of employment. Start with your current or most recent employer. List by business name, address, business phone number, and dates (month and year) of employment.**

|    |       |            |          |
|----|-------|------------|----------|
| 1. | _____ | from _____ | to _____ |
| 2. | _____ | from _____ | to _____ |
| 3. | _____ | from _____ | to _____ |
| 4. | _____ | from _____ | to _____ |
| 5. | _____ | from _____ | to _____ |

**Arrest History: If you have had any arrests, list all of them. Use an additional sheet if necessary. Give the date (approximate), place (city and state), and the reason for the arrest.**

| Date: | Place (city and state): | Reason: |
|-------|-------------------------|---------|
| _____ | _____                   | _____   |
| _____ | _____                   | _____   |
| _____ | _____                   | _____   |
| _____ | _____                   | _____   |
| _____ | _____                   | _____   |

**Signature below indicates the applicant understands that if any information requested on this form is misrepresented, it may be grounds for denial of this permit application.**

|                             |            |
|-----------------------------|------------|
| Applicant's Signature _____ | Date _____ |
|-----------------------------|------------|



# CITY OF SANTA BARBARA

## ARREST HISTORY

(Pursuant to Santa Barbara Municipal Code, Chapter 5.29)

*If you have had any arrests, list all of them. Give the date (approximate), place (City and State), and the reason for the arrest.*

***Failure to list all arrests may result in a denial of your application.***

| Date | Place (City and State) | Reason (Violation) |
|------|------------------------|--------------------|
|      |                        |                    |
|      |                        |                    |
|      |                        |                    |
|      |                        |                    |
|      |                        |                    |
|      |                        |                    |
|      |                        |                    |
|      |                        |                    |
|      |                        |                    |
|      |                        |                    |
|      |                        |                    |

Are you currently on probation? \_\_\_\_\_ Charges: \_\_\_\_\_

Are you currently on parole? \_\_\_\_\_ Charges: \_\_\_\_\_

Are you currently required to register pursuant to Section 290 of the Penal Code? \_\_\_\_\_

**Signature below indicates the applicant understands that if any information requested on this form is misrepresented, it may be grounds for denial of this permit application.**

\_\_\_\_\_  
**Printed** (*Permit Applicant's Name*)

\_\_\_\_\_  
**Signature** (*Permit Applicant*)

\_\_\_\_\_  
**Date**



# CITY OF SANTA BARBARA

**AUTHORIZATION TO RELEASE INFORMATION  
TO THE  
CITY OF SANTA BARBARA, POLICE DEPARTMENT**

**(Pursuant to Santa Barbara Municipal Code, Chapter 5.29)**

As an applicant for a City permit within the City of Santa Barbara, I hereby authorize the release of any and all information that you may have concerning my work records education records, medical records, and information of a confidential or privileged nature to the City of Santa Barbara Police Department and its agents.

*I hereby release you, your organization, or others, from any liability or damage, which may result from furnishing the information requested.*

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**Printed (*Permit Applicant's Name*)**

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**Signature (*Permit Applicant*)**

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**Date**

## NOTICE TO INSURERS AND CIRCUS AND/OR CARNIVAL OPERATORS:

In order to operate any Circus and/or Carnival in the City of Santa Barbara, a completed Certificate of Insurance must be on file with the City of Santa Barbara, Finance Department, Licenses and Permits, P. O. Box 1990, Santa Barbara, CA 93102. Complete the following Certificate of Insurance. If your insurance company uses a different form, that form must contain, as a minimum, the requirements listed below.

### CERTIFICATE OF INSURANCE

This certifies to the City of Santa Barbara that the following described policies have been issued to:

Name of Insured: \_\_\_\_\_

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

Location of operations insured: within the City of Santa Barbara.

Description of operations: CIRCUS AND/OR CARNIVAL.

| POLICIES<br>AND INSURERS   | LIMITS                   |                    | POLICY<br>NUMBER | EXPIRATION<br>DATE |
|--|--------------------------|--------------------|------------------|--------------------|
|  | Bodily Injury            | Property Damage    |                  |                    |
| General Liability<br><br><input type="checkbox"/> Comprehensive <input type="checkbox"/> Commercial<br><br>_____<br>(Insurer)                          | Each<br>Person           | Each<br>Occurrence |                  |                    |
|  | Each<br>Occurrence       |                    |                  |                    |
|  | Combined<br>Single Limit |                    |                  |                    |
|  | \$1,000,000              |                    |                  |                    |
| Automobile Liability<br><br><input type="checkbox"/> Owned <input type="checkbox"/> Hired <input type="checkbox"/> Non Owned<br><br>_____<br>(Insurer) | Each<br>Person           | Each<br>Accident   |                  |                    |
|  | Each<br>Occurrence       |                    |                  |                    |
|  | Combined<br>Single Limit |                    |                  |                    |
|  | \$1,000,000              |                    |                  |                    |

The following coverage or conditions are in effect: General Liability ☐ Automobile Liability ☐

Yes | No

|   |  |
|---|--|
| 1. City of Santa Barbara, its Officers, Employees, and Agents Named as Additional Insured.  |  |
| 2. Policies will not be Canceled, Limited, or Changed without 30 Days Written Notice to the Finance Department, Licenses and Permits, P.O. Box 1990, Santa Barbara, CA 93102-1990   |  |
| 3. Coverage afforded the City shall apply as Primary and not Excess to any insurance issued in the name of the City.  |  |
| 4. Blanket or Scheduled Contractual Liability sufficiently broad to cover liability assumed in the permit. (SBMC 5.29.290: An owner's permit holder shall, and by acceptance of the permit does, agree to hereby indemnify and hold the City of Santa Barbara, its officers, employees and agents from any and all damages, claims, liabilities, costs, suits, or other expense resulting from and arising out of said permit holder's operations.) |  |
| 5. Policy includes a Severability of Interest provision or equivalent wording, stating that coverage applies separately to each named or additional insured as if separate policies had been issued to each.  |  |

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

\_\_\_\_\_  
(Authorized Signature)

\_\_\_\_\_  
(Date)

At: \_\_\_\_\_

\_\_\_\_\_  
(Company and Address)

NOTE: Authorized signature may be the agent if agent has placed insurance through an agency agreement with the insurer. If insurance is brokered, authorized signature must be that of official of insurer.

INSURER MUST BE ADMITTED BY THE STATE OF CALIFORNIA, DEPARTMENT OF INSURANCE, OR HAVE A BEST'S RATING OF B+ OR BETTER. THE CITY RESERVES THE RIGHT TO REJECT AN INSURER.



## FEE SCHEDULE FOR CIRCUSES AND CARNIVALS

(Santa Barbara Municipal Code Chapters 5.04 and 5.72)

***All fees are non-refundable.***

| Ordinance | Classification                                       | Fee  |
|-----------|--|--|
| 3259      | Circuses and Carnivals Permit/Application            | \$150.00   |
| 2930      | Menagerie, Dog or Pony Show Tax                      | \$50.00 per day  |
| 2930      | Circus – 1 Ring Tax                                  | \$300.00 per day   |
| 2930      | Circus – 2 Ring Tax                                  | \$325.00 per day   |
| 2930      | Circus – 3+ Ring Tax                                 | \$350.00 per day   |
| 2930      | Circus – Sideshow/Aftershow Tax                      | \$25.00 per day<br>in addition to base fee per ring                      |
| 2930      | Circus – Concession Tax                              | \$15.00 per day<br>in addition to base fee per ring                      |
| 2930      | Circus – Parade or Procession Tax                    | \$100.00 each<br>(if no other Circus tax paid)                           |
| 2930      | Acrobatic or Theatrical Exhibitions under Canvas Tax | \$75.00 per day  |
| 2930      | Fair or Carnival Tax                                 | \$300 per day plus \$15.00 for each<br>concession over ten (10), per day |