



CENTRAL RESERVATIONS

666 Bellevue Avenue
Oakland, CA 94610
510-238-3420

Please submit rental application via email to:
cru@oaklandca.gov

Date of Application: _____

RESIDENCY IS DETERMINED ACCORDING TO ADDRESS INDICATED ON DRIVER'S LICENSE OR STATE IDENTIFICATION CARD. PHOTO ID IS REQUIRED.

Name of Business/Organization: _____

Business/Organization Address: _____

Street Address City Zip Code

Applicant Name: _____

Applicant Mailing Address: _____

Street Address City Zip Code

Mobile or Home Number: _____ Work Number: _____ Email Address: _____

Facility/Park Name: _____

Room(s)/Site(s) _____

Event Information: *Note: Charging admission, selling tickets or merchandise, or solicitation of money in any manner must be approved by the Parks and Recreation Advisory Commission (PRAC) 60 days or more in advance of event date.*

Date(s) of Event: _____

Time In/Prep _____ Actual Event Time _____ to _____ Cleanup/Time Out _____
(Last hour of event is designated for cleanup)

Type of Event/Purpose: *(be specific, i.e., Wedding Reception, Meeting, Birthday Party, Banquet, Picnic, BBQ, Walk, Run, Festival, Rally, Quinceanera, BarMitsvah/BatMitzvah, etc.)*

General Public Allowed: Yes No Sound Amplification: Yes No Non-Amplified Sound: Yes No

Type of Sound Equipment to be used: *(i.e., musical instruments, live band, cd player, amplifiers, microphones, etc.)*

Serving Alcohol (21 & Over Events ONLY):

Champagne, Beer, Wine Yes No | Distilled Spirits PLUS Champagne, Beer & Wine Yes No

Number of Participants: (Total) _____ Approximate # of Adults _____ # of Teens _____ # of Children/Infants _____

Please provide below special accommodations/requests for your event. If no special accommodations required, please write NONE.

Will you require a caterer for your event? Yes No

If yes, Name of Caterer: _____

OFFICE USE ONLY

(1) _____ x _____ = _____ (Hourly Rate) (# of hours)	(7) Alcohol Beverage Fee = _____
(2) _____ x _____ = _____ (Hourly Rate) (# of hours)	(8) Administrative Service Fee = _____
(3) Permit Processing Fee = _____	(9) Sound Fee = _____
(4) Deposit = _____	(10) Sanitation Fee = _____
(5) Setup/Teardown = _____	(11) Special Event Fee = _____
(6) Kitchen = _____	(12) Other Fee(s) = _____
TOTAL: \$ _____ Less Advance Minimum Payment of \$ _____;	BALANCE DUE 30 DAYS BEFORE EVENT: \$ _____

CANCELLATION FEE: 61 days or more notice: Forfeit ½ Deposit 30 days to 11 days notice: Forfeit Deposit Plus ½ Rental Fee
31 to 60 days notice: Forfeit Deposit 10 days or less notice: Forfeit All Fees

APPLICANT SIGNATURE _____ **DATE** _____
A representative will respond via email within 48 hours with availability, cost and additional documents required

Approved by: _____

Date: _____



**City of Oakland
Fire Prevention Bureau
Special Events Application
Fire Prevention Bureau**



(510) 238-3462
TTY 510) 238-6884

EVENT INFORMATION	
Person(s) Requesting Event:	Phone #:
Mailing Address:	
Company:	
Email Address:	Type of Event:
Phone #:	Is business non-profit? <input type="checkbox"/> Yes – Provide a copy of 501 (c) (3) letter <input type="checkbox"/> No
Name of Event:	
Event Street Address Location:	
Event Date: (An additional form is required for each day)	Event Time (Begins & Ends):
Setup Site Completion: Date & Time: _____ AM/PM (Setup is required to be completed 1-hr before Inspector(s) arrive at event site).	On-Site Contact: _____ Phone #: _____
No. of Vendors: ____ If applicable, complete food vendor form (food truck, caterer, etc.) & indicate those “selling/cooking” & type of cooking equipment	
Expected amount of people:	Amount (#) of tents & sizes(s):
Brief description of event:	
FOOD	CATERER (If caterer is being used, provide caterer information)
WILL FOOD BE SERVED? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, will food be <input type="checkbox"/> HOT or <input type="checkbox"/> COLD (If serving HOT food describe cooking / heating source) Explain: _____ _____	Address: _____ Email: _____
Will there be any Open flame, Sterno, Liquid Propane Gas (LPG), etc.?	Contact Name: _____ Phone #: _____
PYRO/FIREWORK DISPLAY ONLY (See Section B for Fees)	
Pyro Demo/Pre-Inspection Date:	Time: _____ AM/PM
Pyro Company and Local Technician:	Phone: _____

SECTION A: Type of Event Activity – Select from the following if applicable to either applicant or vendor	Yes	No	Fees	Measurement
Open Flame (Ceremonial/Assembly Area, Restaurant Candles, Sterno, Charcoal BBQ/Fireplace, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	\$ 534.00	Per Event
Christmas Tree Lots	<input type="checkbox"/>	<input type="checkbox"/>	\$ 381.00	Each
PUBLIC ASSEMBLY: Carnival / Street Fair / Festival / Circus / Block Party/ and/or 50+ individuals (If more than 5,000, an EMT is required on site for emergency services)	<input type="checkbox"/>	<input type="checkbox"/>	\$ 381.00	Per Event
Exhibits & Trade Show	<input type="checkbox"/>	<input type="checkbox"/>	\$ 381.00	Per Event
Liquid Propane Gas (LPG)	<input type="checkbox"/>	<input type="checkbox"/>	\$1,051.00	Per Event
Tents & Canopies (Excess of 400 sq. ft.) and/or Temporary Membrane Structures (no charge for 10x10 with no more than 4 attached)	<input type="checkbox"/>	<input type="checkbox"/>	\$ 381.00	Per Structure
SECTION B				
Food Truck	<input type="checkbox"/>	<input type="checkbox"/>	\$ 381.00	Per Truck
Pyrotechnic Special Effects Material (Public Display Concerts/Games)	<input type="checkbox"/>	<input type="checkbox"/>	\$ 991.00	Per Event
NON-PROFIT (EXEMPT FROM “SECTION A” FEES) (INSPECTION FEES MAY APPLY)				
Non-Profit Business – Provide a copy of 501 (c) (3) etc. letter	<input type="checkbox"/>	<input type="checkbox"/>	\$ 381.00	Per Event
INSPECTIONS				
Regular Inspection (during reg. workday, Mon. - Fri., 8:00 AM- 3:30 PM is the latest)	<input type="checkbox"/>	<input type="checkbox"/>	\$ 381.00	Per Hour
After Hours Inspection (Weekdays Before 8:00 AM and After 4:30 PM, including Weekends and Holidays)	<input type="checkbox"/>	<input type="checkbox"/>	\$ 839.00	FLAT FEE

Note: FIRE EXTINGUISHERS: (2A 10BC) required for each booth; K-Type Fire Extinguishers for VENDORS USING DEEP FAT FRYING/ COOKING WITH OIL including outdoor cooking.

- Please email your application, vendor list, floor plan, & site map (Include any Street Closures) to refertoFPBevents@oaklandca.gov