

Special Event Safety Plan COVID-19 Mitigation Acknowledgement

Name of the Event: _____ Event Date: _____ Anticipated # of Guests: _____

Under the Governor’s Order, as it may be amended or superseded (“Order”), any non-exempt event where more than ten (10) people *may* attend, requires the Mayor’s approval. The Order requires such approval to be based on whether the organizers have in place reasonable measures to mitigate the transmission of COVID-19. For approval to be considered, the City requires the following three measures to be complied with at each event to limit the spread of COVID-19:

1. Require and ensure all attendees wear a mask, even if the event is outdoors.
2. Require and ensure there is always hand sanitizer available for attendees.
3. Limit the number of attendees in one place at a time by establishing attendance timeframes for a set number of people and providing a means of registration for each timeframe. Measures should also be taken to ensure social distancing between attendees not of the same family group.

In addition, please answer the following questions to describe how these requirements will be met.

1. Will face masks be provided for all event attendees? If not, communication must be put out ahead of time that all attendees will be required to bring their own in order to attend. Please explain how this will be advertised/communicated (event flyer, social media post, etc.).

2. Will hand sanitizer stations be provided or access to sanitizer otherwise be made available to event attendees? If not, communication must be put out ahead of time that all attendees will be required to bring their own in order to attend. Please explain how this will be advertised/communicated (event flyer, social media post, etc.).

3. What measures will be put in place to limit the number of attendees present at any one time and also to ensure six feet of separation between family groups during the event? Examples include place markings on the ground, utilizing temporary fencing, caution tape, or other barriers.

Please indicate the following:

- Applicant agrees to follow all Governor’s Orders regarding COVID-19: Agree
- Applicant agrees to follow all City ordinances and direction of code enforcement staff: Agree

Staff Recommendation: <input type="checkbox"/> Approve <input type="checkbox"/> Reject		
Mayoral Approval:	Date:	CITY OF CARROLLTON, TEXAS
_____	_____	_____ Kevin W. Falconer, Mayor