

SUP CHECKLIST

- Application App Fee
- Facility Supervisor Review
- Security Review
- General Manager Review
- Commission Approval
- Usage Fee
- Insurance Certificate
- SUP Issued

**SPECIAL USE PERMIT APPLICATION**

Submit to: Administrative Assistant  
 Port of Newport  
 600 SE Bay Blvd.  
 Newport, Oregon 97365  
 khewitt@portofnewport.com

This application must be completed, signed, and submitted with a nonrefundable \$100.00 application fee, to be paid in cash, by check or by credit card. Any usage fees required of the applicant must be submitted in full prior to the special use permit being issued by the Port of Newport. Any request for a full or partial waiver of the usage fees must be submitted with this application. The criteria used to evaluate a waiver request are listed below. Applications should be submitted far enough in advance of the event to allow the Port to determine the impact of the event on Port property and other Port guests and / or moorage holders. At least 45 days' notice is recommended.

Event Name: \_\_\_\_\_

Event Date: \_\_\_\_\_ Time(s): \_\_\_\_\_

Total Days: \_\_\_\_\_

Location: \_\_\_\_\_

Facilities to Be Used:  
 \_\_\_\_\_

Set-up Dates and Start Times: \_\_\_\_\_

Take-down Dates and End Times: \_\_\_\_\_

Estimated Number of Participants: \_\_\_\_\_ Contestants: \_\_\_\_\_

Vendors / Volunteers: \_\_\_\_\_

Attendees: \_\_\_\_\_

Applicant / Signer: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ E-mail \_\_\_\_\_

Contact Person (if different than applicant): \_\_\_\_\_

Contact Person's address, phone number and e-mail: \_\_\_\_\_

Please provide a detailed description of the event, and attach a map of the location(s) if applicable:

Please indicate if you are requesting a full or partial waiver of the usage fee, and explain the reasons for the request based upon the criteria described below:

How will the Port of Newport be featured in your marketing/sponsorship promotions?

The following criteria may be used by the Port management to fully or partially waive the usage fee:

1. Is the applicant a non-profit or a for-profit entity? \_\_\_\_\_
2. Will proceeds from the event be donated to charitable causes? If so, what percentage of the proceeds will be donated and to which charitable causes?  
\_\_\_\_\_
3. What is the Port's cost to provide services for the event?  
\_\_\_\_\_
4. Does the event provide any direct benefit to the Port?  
\_\_\_\_\_

Save as YourName.SUPApp and Submit Application: [khewitt@portofnewport.com](mailto:khewitt@portofnewport.com)

**USAGE FEE SCHEDULE**

PARTICIPANTS	NUMBER (reasonable estimate)	FEE
Attendees, Contestants, Volunteers at Event	1-200	\$400.00
	201-500	\$650.00
	501-1000	\$900.00
	1,001- 5000	\$1400.00
	5,001-10,000	\$1,900.00
	More than 10,000	\$2,400.00
Vendors	N/A	\$40/ per vendor
Port of Newport Fees (e.g. moorage)		

Permittee will also need to carry comprehensive general liability insurance with limits of \$2,000,000.00 per occurrence and \$2,000,000.00 in aggregate, and will provide the Port of Newport with a Certificate of Insurance naming the Port as an additional insured, subject to confirmation..