

OUTDOOR COMMUNITY EVENT LICENSE APPLICATION

1001 EAST 9TH STREET, BUILDING A

P.O. BOX 11130

RENO, NEVADA 89520-0027

(775) 328-3733

www.washoecounty.us

Outdoor Birthday Party

Date/time: Saturday September 20.2025

Location: 13985 Red Rock Road Reno NV 89508

~~200~~ ¹⁵⁰ 200 guest

Site Map & Parking inside folder.

\$527.⁰⁰ Fee

10/10/25

OUTDOOR COMMUNITY EVENT APPLICATION

(Requires a non-refundable \$50 application fee)

Application date:

7/11/2025

Applicant Information

Applicant's name: Maria M Diaz Flores

Mailing address: 10375 Plata Mesa Dr Reno NV 89508
Street or PO Box City State Zip code

Phone: 775-221-0949 (Business) _____ (Home) _____ (Cell) _____

All applicants, to include corporate officers or partners must complete a personal history form

Is the applicant a(n): ☐ Corporation ☐ Partnership ☐ Individual

If a corporation or a partnership, list corporate officers or partners:

Name	Address	Title

Event Information

Name of Event: Outdoor birthday party

Date(s) of Event: September 20, 2025 Hours of operation: 9:00am to 10:00pm

Location of Event: 13985 N Red Rock Road Reno NV 89506

Assessor Parcel Number(s): _____

Description of Event: Birthday party for my niece w/ live music

Name of the designated event representative who will be on-site during the event and who has authority to bind the applicant: Maria M Diaz Flores

Will an admission fee be charged for your event? ☐ Yes ☒ No

If yes, amount and type of fee(s): _____

When will fee be collected? ☐ Pre-sales ☐ At entrance

Approximate number of participants and other persons: 200 including people serving the food

Approximate number of customers and spectators: _____

Approximate maximum number of persons on any one day of the event: _____

Will food and/or beverages be served? ☒ Yes ☐ No

(all food and beverage vendors must have the appropriate Washoe County Health District permits)

Will alcoholic beverages be served? ☒ Yes ☐ No

(all intoxicating liquor vendors must be individually licensed with Washoe County Business License)

Will there be live music? ☒ Yes ☐ No

OUTDOOR COMMUNITY EVENT LICENSE

Insurer Information

(see Insurance, Hold Harmless & Indemnification Requirements)

Name of Insurer: _____ Policy number: _____

Attach copy of insurance policy specific to event (must be furnished prior to the issuance of the license)

Address of Insurer: _____

Street

City

State

Zip code

Limits of liability: _____

HISTORY OF SIMILAR EVENTS

(attach additional sheets if needed)

Describe the history of all similar events conducted, operated or promoted by the applicant. Include, at a minimum, event names, types, dates, locations, permits or licenses issued.

I had a Gunner's birthday party for my daughter on May-10-2025 at 13845 N Red Rock Reno NV 89501. Please note that is a party for family and friends. This is a private event is not for the community.

Vendor List

(attach additional sheets if needed)

Name of Vendor

N/A

Type of service or product

N/A

**OUTDOOR COMMUNITY EVENT
AFFIDAVIT OF PROPERTY OWNERSHIP
and/or PERMISSION TO CONDUCT EVENT**

STATE OF NEVADA)
) ss:
COUNTY OF WASHOE)

I, Maria M Diaz Flores being duly sworn, depose, and say that
I am an owner* of property involved in this outdoor community event and I do hereby:

(check appropriate box)

☐ Affirm that I am an applicant for the below named proposed outdoor community event and also own the property or properties on which the event will be conducted

OR

☐ Affirm that I give permission to the applicants for the below named proposed outdoor community event to conduct the event on the following property or properties which I own:

Assessor Parcel Number(s): 0793A102

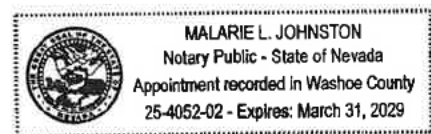
Proposed Outdoor Community Event: birthday Party

Signed MDf

Subscribed and sworn to before me this 20th day of June, 2025

Malarie Johnston Washoe, NV
Notary Public in and for said county and state

My commission expires: March 31, 2029



*Owner refers to the following. Please mark the appropriate box.

- ☒ OWNER/JOINT OWNER
- ☐ CORPORATE OFFICER/PARTNER
- ☐ POWER OF ATTORNEY (Provide copy of Power of Attorney)
- ☐ AGENT (Notarized letter from property owner giving legal authority to agent)
- ☐ LETTER FROM GOVERNMENT AGENCY WITH STEWARDSHIP

**OUTDOOR COMMUNITY EVENT
STATEMENT OF ASSETS**

As of _____, 20____

(Describe fully and indicate assets pledged)

(If additional space is required, attached supporting pages or documents)

Current Assets

Cash on hand _____ \$ 0.00

Cash in safe deposit box _____ \$ 0.00

Cash in _____ Location of Box _____ \$ 0.00

Cash in _____ Name, Bank and Branch _____ \$ _____

Cash in _____ Name, Bank and Branch _____ \$ _____

Accounts and notes receivable (describe nature of receivable and when due)

_____ \$ _____

_____ \$ _____

Other current assets _____ \$ _____

_____ \$ _____

Investments

Stocks, Bonds, etc (Market value) (If close held corporation, furnish current balance sheet)

_____ \$ 0.00

_____ \$ _____

_____ \$ _____

Investments, other than stocks and bonds _____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Fixed assets

Real estate (Give location, description and fair value of each parcel)

_____ \$ 0.00

_____ \$ _____

_____ \$ _____

Other assets

Automobiles and other personal property _____ \$ 0.00

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total Assets \$ _____

MaramDeag Flann
Print Name

MDeag
Signature

Date

**OUTDOOR COMMUNITY EVENT
STATEMENT OF LIABILITIES**

As of _____, 20____

(Describe fully, indicate secured liabilities)

(If additional space is required, attached supporting pages or documents)

Current liabilities

Notes payable _____ \$ _____

Name, Bank and Branch

Due _____ How secured _____

Notes payable _____ \$ _____

Name, Bank and Branch

Due _____ How secured _____

Notes payable _____ \$ _____

Name, Bank and Branch

Due _____ How secured _____

Notes payable _____ \$ _____

Name, Bank and Branch

Due _____ How secured _____

Other notes payable (indicate name, address and how secured)

_____ \$ _____

_____ \$ _____

Accounts payable \$ _____

Liability for Federal Income Tax (delinquent) \$ _____

Provision for current year's Federal Income Tax \$ _____

Provisions for other current taxes \$ _____

Liability for other delinquent taxes \$ _____

Mortgages payable (List each mortgage separately, how secured, and monthly payments due thereon)

_____ \$ _____

_____ \$ _____

Other liabilities

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total Liabilities \$ _____

Contingent liabilities (describe)

Print Name _____

Signature _____

Date _____

**OUTDOOR COMMUNITY EVENT
PERSONAL HISTORY**

(complete a separate form for each applicant, to include corporate officers and partners)

Name in full: Maria Magdalena Diaz Florn
First Middle Last

List ALL other names you have been known by: na

Residence address: [REDACTED]
City State Zip Code

Residence phone: [REDACTED] Business phone: _____

Name of your present business or employer: _____

Business address: _____
Street City State Zip Code

Type of business: _____ Position: _____

How long engaged in this business: _____

Date of birth: _____ Age: _____ Place of birth: _____

List cities in which you have lived during the last ten years:

[REDACTED]
[REDACTED]

I, the undersigned, have answered all questions in this application and to the best of my knowledge all answers are true and correct. I further understand that disclosure of any false, misleading or incorrect answers could result in the denial of the license. The filing of the application does not authorize the conducting of any event for which a license is required, and any carrying on of such event before a license is issued may also be grounds for denial of a license.

Mariam Diaz Florn
Printed name of applicant

MD
Signature of applicant

Date

(List the names and addresses of any person contributing, investing or having an expected financial interest greater than \$500 in producing the event)
(attach additional sheets if needed)

Address

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper has a slightly textured appearance and some very faint, scattered dark spots, possibly dust or minor imperfections in the paper itself. The edges of the paper are slightly irregular, suggesting it might be a scan of a physical document.

(List the names and addresses of any person expected to provide, for consideration, services or activities ancillary to or in conjunction with the event)
(attach additional sheets if needed)

Address

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

OUTDOOR COMMUNITY EVENT RELEASE OF CLAIMS

(complete a separate form for each applicant, to include corporate officers and partners)

The undersigned has filed with Washoe County Business License an application for outdoor community event license. In consideration of the assurance by the Board of County Commissioners that no vote on said application will be taken except after a deliberate, intensive and thorough investigation of the undersigned, including but not limited to criminal history background, associates and finances, the undersigned does for himself, his heirs, executors, administrators, successors and assigns, hereby release, remise and forever discharge the County of Washoe, Washoe County Sheriff's Office, Washoe County Commission, and Washoe County Business License from any and all manner of actions, causes of action, suits, debts, judgments, executions, claims, and demands whatsoever, known or unknown, in law or equity, which the undersigned ever had, now has or may have, or claim to have against any or all of said entities or individuals arising out of or by reason of the processing or investigation of or other action relating to the undersigned application.

AUTHORIZATION TO RELEASE INFORMATION

As an applicant for an outdoor community event license with Washoe County Business License, I am required to furnish information for use in determining my qualifications. In this connection, I authorize release of any and all information of a confidential or privileged nature.

I hereby release you, your organization and others from liability or damage, which may result from furnishing the information requested. This release will expire 180 days after the date signed.

I, the undersigned, have read this release and understand all its terms; I execute it voluntarily and with full knowledge of its significance.

IN WITNESS WHEREOF, I have executed this release at _____ on the
_____ day of _____, 20_____.

Printed name of applicant

Signature of applicant

Subscribed and sworn to before me this _____ day of _____, 20_____

Notary Public in and for said county and state

My commission expires: _____

OUTDOOR COMMUNITY EVENT INSURANCE, HOLD HARMLESS AND INDEMNIFICATION REQUIREMENTS

Pursuant to Washoe County Code section 25.303, any applicant for a Washoe County outdoor community event license must ensure the following requirements are met to the satisfaction of the Washoe County Risk Management Division before the outdoor community event license may be issued.

INDEMNIFICATION & HOLD HARMLESS

As respects acts, errors or omissions relating to the event, APPLICANT agrees to indemnify and hold harmless COUNTY, its officers, agents, employees, and volunteers from and against any and all claims, demands, defense costs, liability or consequential damages of any kind or nature arising directly or indirectly out of the event or any activity leading up to, during, or following the event, excepting those which arise out of the sole negligence of the COUNTY.

APPLICANT further agrees to defend COUNTY and assume all costs, expenses and liabilities of any nature to which COUNTY may be subjected as a result of any claim, demand, action or cause of action arising out of the negligent acts, errors or omissions of APPLICANT or its agents concerning the event.

INSURANCE REQUIREMENTS

COUNTY requires that APPLICANT purchase General Liability Insurance as described below against claims for injuries to persons or damages to property which may arise from or in connection with the event by APPLICANT, its agents, representatives, or employees. The cost of all such insurance shall be borne by APPLICANT.

APPLICANT shall maintain coverage and limits no less than \$1,000,000 combined single limit per occurrence for bodily injury, personal injury and property damage. If Commercial General Liability Insurance or other form with a general aggregate limit is used, the general aggregate limit shall be increased to equal twice the required occurrence limit, to apply separately to this event.

Any deductibles or self-insured retentions must be declared to and approved by the COUNTY Risk Management Division prior to the event. COUNTY reserves the right to request additional documentation, financial or otherwise prior to giving its approval of the deductibles and self-insured retention and prior to issuing the license. The COUNTY Risk Manager prior to the change taking effect must approve any changes to the deductibles or self-insured retentions.

APPLICANT shall provide COUNTY with a certificate of insurance that identifies COUNTY, its officers, agents, employees and volunteers as additional insured's.

NOTE: A certificate of insurance complying with the provisions stated above is not required with the outdoor community business license application, but must be furnished prior to the issuance of the license.

I hereby agree to the all of the provisions stated above:

<u>Birthday Party</u> Name of Event	<u>Sep. 20, 2025</u> Date(s) of Event
<u>Maria M Diaz Flores</u> Applicant's name (printed)	<u>MD</u> Applicant's signature

Date: _____



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13985 N Red Rock Rd



Directions



Save



Nearby



Send to
phone



Share



13985 N Red Rock Rd, Reno, NV 89508



P4GC+5C Reno, Nevada

- ① live music
- ② (5) 20x20 tents
- ③ (8) portable Bathroom
(4) women
(4) men
- ④ lights.



Imagery ©2025 Airbus, Maxar Technologies, Map data ©2025 50 ft



- ① Live music
- ② (5) 20x20 tents
- ③ Portable bathrooms
(4) women
(4) men
- ④ Lights
- ⑤ Parking space

13985 N Red Rock Rd



13985 N Red Rock Rd, Reno, NV 89508

P4GC+5C Reno, Nevada

