

Alverno Villa - Event Monitor Checklist

<p><i>The below portion to be completed by the Event Monitor</i></p> <p>Event Information:</p> <p>Event Date: <u>09/27/2025</u></p> <p>Time Music Started: <u>18:00 hrs</u></p> <p>Time Music Stopped: <u>21:30 hrs</u></p> <p>Time Last Guest & Vendor Left: <u>2200 hrs</u></p> <p>Time Gate Closed: <u>2200 hrs</u></p> <p>Time Parking Lights Turned Off: <u>2200 hrs</u></p> <p>Number of Security Guard(s): <u>2</u></p> <p>Security Guard Name: <u>SUBAPUTRA, P (AD)</u></p> <p>Security Guard Name: <u>WILSON-(SECURITY)</u></p> <p>Event Monitor Information:</p> <p>Event Monitor Name: <u>SUBAPUTRA, P</u></p> <p>Event Monitor Phone: <u>310-755-1212</u></p> <p>Event Monitor Arrival Time: <u>1500 hrs</u></p> <p>Event Monitor Departure Time: <u>2200 hrs</u></p> <p>WILSON GATE CLOSED @ 16:30</p> <p>HIGHLAND GATE CLOSED @ 17:30</p> <p>BRIEFING STARTED @ 1530</p> <p>MUSIC LOUDEST @ 2011</p> <p>DJ LEFT @ 2200 hrs</p>	<p><i>This portion to be completed by AHA personnel</i></p> <p>AHA Personnel Name: <u>Andrea Bektollin</u></p> <p>Event Type: <u>Wedding</u></p> <p>Event scheduled start time: <u>4pm</u></p> <p>Event scheduled end time: <u>10 pm</u></p> <p>Gate Name: <u>Highland</u></p> <p>Gate open time: <u>11 AM</u></p> <p>Gate Name: <u>Wilson</u></p> <p>Gate open time: <u>8 AM</u></p> <p>Gate Name: <u>Muchallinda</u></p> <p>Gate open time: <u>1pm</u> #20</p> <p>No. of rented events between these dates: <u>January 1, 2025</u> and <u>September 27, 2024</u> 2025</p> <p>No. of rented events this month: <u>4</u></p> <p>Number of guests: <u>Approx 110.</u></p>
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EVENT STARTED @ 1600 hrs



Any interaction with Alverno staff, security, or SMPD?

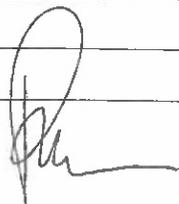
Alverno staff?	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Name: Ms. Andrea Bertollini		
Nature of Interaction: Briefing - Supervising		
Noise Reading (dB) & Time:		
Remedy, if any:		

Sierra Madre Police Department?	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Name:		
Nature of Interaction:		
Noise Reading (dB) & Time:		
Remedy, if any:		

Any interaction with the Public (In person or telephonic)?	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Name:		
Nature of Interaction:		
Noise Reading (dB) & Time:		
Remedy, if any:		

Any interaction with the Public (In person or telephonic)?	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Name:		
Nature of Interaction:		
Noise Reading (dB) & Time:		
Remedy, if any:		

Any interaction with the Public (In person or telephonic)?	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Name:		
Nature of Interaction:		
Noise Reading (dB) & Time:		
Remedy, if any:		



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Were the Conditional Use Permit #22-03 Conditions Satisfied?

Section 1 – Frequency of Use / Level of Use	<input checked="" type="radio"/> Yes	<input type="radio"/> No
If no, please provide details		

Section 2 – Time of Use	<input checked="" type="radio"/> Yes	<input type="radio"/> No
If no, please provide details		

Section 3 – Noise	<input checked="" type="radio"/> Yes	<input type="radio"/> No
If no, please provide details		

Section 4 – Alcohol	<input checked="" type="radio"/> Yes	<input type="radio"/> No
If no, please provide details		

Section 5 – Traffic / Parking	<input checked="" type="radio"/> Yes	<input type="radio"/> No
If no, please provide details		

Section 6 – Vehicle Access	<input checked="" type="radio"/> Yes	<input type="radio"/> No
If no, please provide details		

Section 7 – Nighttime Lights	<input checked="" type="radio"/> Yes	<input type="radio"/> No
If no, please provide details		

Section 8 – Litter and Garbage	<input checked="" type="radio"/> Yes	<input type="radio"/> No
If not please provide details		