## OAK BLUFFS PARKS AND RECREATION DEPT.

# Special Event Permit Application

**P.O. Box 1327 Oak Bluffs, MA 02557 Telephone: (508) 693-0072 Fax: (508) 696-6472**

## APPLICANT AND SPONSORING ORGANIZATION INFORMATION

*Please complete all data as required.*

Name of Organization(s): _____

Applicant Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Daytime phone: (_____)_____ Eve. Phone: (_____)_____ FAX#: (____)_____

E-mail: _____ Web page: _____

Manager **ON SITE** Day of Event: _____ Cell/ Pager: (_____)_____

**Any Change in the above information, please notify the Parks Department/Highway Department immediately.*

## SPECIAL EVENT INFORMATION

*Complete all data as required for the event of any size*

**Type of Event:**

_____ Run/Walk _____ Planned Picnic/Party _____Market/Fair

_____ Concert _____Wedding Ceremony/Photos _____ Other (specify) _____

**Event Title:** _____**Event Date(s):** _____Rain date: ____

Requested Park: _____

Area of Park (describe physical boundaries) _____

Actual Hours of Event: _____AM/PM to _____ AM/PM

Set up times: ____AM/PM to _____AM/PM Take down times: ____AM/PM to ____AM/PM

Description of Event set up: _____

_____

_____

Number of people expected: _____

(Please attach additional sheets as necessary, including plans, drawings, maps, etc.)

Is applicant a Town of Oak Bluffs taxpayer? _____ Yes _____ No

**Please indicate whether the following items pertain to your event:**

| YES | NO | |
|---|---|---|
| ___ | ___ | Food Concession and/or Food Preparation Area(s) |
| | | If you intend to Cook Food in the Event Area Please specify method: |
| | | ____ Gas ____ Electric ____ Charcoal ____ Other: _____ |
| ___ | ___ | First Aid Facility(ies) and Ambulance(s) |
| ___ | ___ | Will you set up tables(s) and or Chairs? How many?: _____ |
| ___ | ___ | Fencing, Barrier(s), and/or Barricade (s) |
| ___ | ___ | Does your event require Electricity source?: _____ |
| | | *Note: No power source at East Chop Lighthouse* |
| ___ | ___ | Booth(s), exhibit(s), display(s) and or enclosure(s) |
| ___ | ___ | Canopy (ies), and/or tent(s) **Please include dimensions:** _____ |
| ___ | ___ | Scaffolding, bleacher(s), platform (s), grandstand(s), stage(s) **include number and dimensions:** _____ |
| ___ | ___ | Vehicle(s) and/or trailer(s). How many? _____ |
| ___ | ___ | Trash Containers and/or Dumpster(s). Number? _____ |
| | | **If yes, indicate Company providing units.** _____ |
| ___ | ___ | Portable Toilet(s). Number _____**If yes, indicate Company providing units.** _____ |
| ___ | ___ | Entertainment. Please describe: _____ |
| ___ | ___ | Inflatable Device (s), Amusements. Describe _____ |
| ___ | ___ | Banner(s) |
| ___ | ___ | Will the event be advertised? How? _____ |
| | | ***Please note you cannot post or advertise your event prior to approval*** |
| ___ | ___ | Sponsorship/Vending or Promotional Activity? Please Describe _____ |
| ___ | ___ | Amplified Sound If yes, please indicate Start Time: _____ and End Time: _____ |

## Fee Schedule

Private Small Events (weddings, clambakes, etc) - $250
Large Events (non-profit) – Maximum of $500 per day
Large Events (profit) – Minimum of $1,000 per day
Town events – Varies

*Note: The Park Commission retains the right to waive any and all fees*

## Deposit

**$100 deposit**; **which will be nonrefundable once application is approved by Commissioners**. Balance will be due no later than 30 days prior to the event. If unable to use park area due to rain, the Park & Recreation Department will refund money except deposit.

## Voluntary Donations

*Donations are accepted for the use of Oak Bluffs Parks & Recreation Department and town property. Contributions support a broad array of recreational activities for residents and visitors of all backgrounds and help to maintain the parkland. Would you like to make a Voluntary Donation to the Fund for OB Parks & Recreation _____yes _____no*
*Details. Amount: _____ Specifications: _____*

## Other Permits

Please note that all components of the event are subject to Parks Dept. approval and may require approval by and/or permits from other town agencies. Parks Dept. approval does not constitute permission from other departments. Events that impact other town depts. will be referred to Police, and Fire, and Emergency dept. as necessary. It is the responsibility of the applicant to secure all necessary town of Oak Bluffs permits (see page 3).

**Insurance Requirements**
Evidence of Insurance will be required before final permit approval for larger events. Please provide a certificate of Insurance which shows a minimum of $1 million in commercial general liability insurance and a policy endorsement which indemnifies and holds harmless the town of Oak Bluffs, the Oak Bluffs Parks and Rec. Dept. and the Oak Bluffs Park Commission. Some events may require a higher limit of insurance. Additionally, permittee must list the aforementioned parties as additional insureds on their certificate of insurance. Each event is evaluated on its risk exposure. The town of Oak Bluffs is not responsible for any accidents or damages to persons or property resulting from the issuance of this permit.

**Affidavit of Application**
Everything that I have stated on this application is correct to the best of my knowledge. I have read, understand, and agree to abide by the policies and rules and regulations listed on this form as they pertain to the requested usage. By signing this application, the applicant agrees to follow all rules and regulations. The permit, if granted, is not transferable and is revocable at any time at the absolute discretion of the Parks Dept. and/or Parks and Recreation Commission. The Parks and Rec. Dept./Park Commissioners may require a CORI form completion for all public events. All programs and facilities of the Oak Bluffs Parks and Recreation Dept. are open to all citizens regardless of race, sex, age, color, religion, national origin or handicap.

Name of Applicant(s) _____
(print)

Signature(s): _____date:_____

***Official Use Only***

OTHER DEPARTMENT SIGNATURES:

| YES | NO | | | | |
|---|---|---|---|---|---|
| ___ | ___ | POLICE DEPARTMENT | _____ | | |
| | | | Police Chief Only | Date | Cost |
| ___ | ___ | FIRE DEPARTMENT | _____ | | |
| | | | Fire Chief Only | Date | Cost |
| ___ | ___ | BOARD OF HEALTH | _____ | | |
| | | | Health Agent Only | Date | Cost |
| ___ | ___ | BUILDING INSPECTOR | _____ | | |
| | | | Building Inspector Only | Date | Cost |

_____Approved

_____Denied

Notes:_____
_____
_____
_____

Signatures:_____
Park Commissioners: Amy Billings Richard Combra Jr. Allan Buddy deBettencourt