

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

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

PRELIMINARY APPROVAL:

Date: _____

Signatures:

Commissioners: Amy Billings Richard Combra Jr. Antone Lima

OTHER DEPARTMENT SIGNATURES:

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

FINAL APPROVAL:

___ Approved Date: _____

Notes: _____

___ Denied _____

Signatures:

Park Commissioners: Amy Billings Richard Combra Jr. Antone Lima