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PUBLIC EVENT PERMIT APPLICATION
City of Somerville, Commonwealth of Massachusetts

Event name Hall Avenue Block Party
Description Block party for residents of Hall Avenue

Location (attach a route if applicable) center of Hall Avenue

Date(s) 10/6/13 Rain date(s) n/a

Start time (include setup) 2:30 End time (include breakdown) 7:30

Estimated maximum attendance at any one time ~35

Attendee fees or suggested donations n/a

Will food be served? ☒ Y ☐ N If yes, describe potluck

Will alcohol be served? ☐ Y ☒ N If yes, describe _____

Will a grill/open-flame device be used? ☐ Y ☒ N If yes, describe _____

Will streets or sidewalks be blocked? ☒ Y ☐ N If yes, describe Please block at Liberty + Hall

Organization name Hall Avenue Block Party Committee

Mailing address (to mail the license) 21 Hall Avenue

Contact person Jimmy Del Ponte

Telephone 617 594 3539 Email jimmydel@rcn.com

Have you made arrangements for:

Auxiliary Police? ☐ Yes ☒ No If yes, describe _____

Police Detail? ☐ Yes ☒ No If yes, describe _____

Parking (for Attendees)? ☐ Yes ☒ No If yes, describe _____

Restrooms? ☐ Yes ☒ No If yes, describe _____

Liability Insurance? ☐ Yes ☒ No If yes, describe _____

Note the following Conditions:

1. The event must not obstruct or inhibit the flow of vehicles or pedestrians except for road closures or detours permitted herein, or as directed by Police Officers or Auxiliary Police Officers.
2. All road closures or detours must be approved in advance by the Traffic and Parking Director, and must be implemented with traffic controls specified by the Traffic and Parking Department. Such controls, and any displays or items placed on any street, must be movable at all times. Vehicles must not be used as traffic controls. If the applicant requires the use of signage loaned by the Traffic and Parking Department, a security deposit must be paid to ensure that the signage is returned.
3. If the event is a road race, the applicant will provide race monitors where required by the Police. The applicant will not make permanent marks on the roadway or sidewalk using paint or other indelible materials. Use of chalk will be acceptable. The applicant will pay the cost of removing any indelible marks placed on the roadway or sidewalk.

4. If the event includes a musical performance, the performance will not occur before 9:00 AM or after 10:00 PM, nor at any time on Sunday, except as permitted, nor within 300 feet of any building from which an occupant asks that the performance desist.
5. Any fees charged by the city are the sole responsibility of the applicant and must be paid in full prior to the event.
6. This permit is valid only for the listed location and time, and is subject to all of the terms, conditions, and limitations set forth in the Somerville Code of Ordinances, any applicable State and Federal laws, these conditions, and any other conditions prescribed by the Board of Aldermen and/or stated in the Departmental approvals below.

The applicant hereby states that this is a true description of the event and acknowledges and agrees to adhere to the conditions described above and in the Departmental approvals below.

Applicant signature _____ Date _____
 Print name Jimmy Del Ponte Phone 617 594 3539 Email jimmydel@rcn.com
 Event name (taken from page 1) Hall Avenue Block Party

Obtain the signatures below before submitting this form to the City Clerk for consideration by the Board of Aldermen.

<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Date <u>9/16/13</u> Signed: _____ Police Chief or Designee Added Conditions: _____ _____	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Date <u>9/24/13</u> Signed: _____ Chief Fire Engineer or Designee Added Conditions: _____ _____
<input type="checkbox"/> Approved <input type="checkbox"/> Denied Date _____ Signed: _____ Traffic and Parking Director or Designee Added Conditions: _____ _____	<input type="checkbox"/> Approved <input type="checkbox"/> Denied Date _____ Signed: _____ DPW Commissioner or Designee Added Conditions: _____ _____

Obtain the signature below if the applicant will be providing food to attendees. Not needed for block parties.

<input type="checkbox"/> Approved <input type="checkbox"/> Denied Date _____ Signed: _____ Health Inspector or Designee Added Conditions: _____ _____

Once signed, the Department should:

- ☐ Contact the applicant at the phone number/email address above to arrange for pick-up.
- ☐ Fax the application (no cover page) to the following fax number: _____
- ☒ Fax the application to the City Clerk at 617 625-4239.

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