

PUBLIC EVENT PERMIT APPLICATION
City of Somerville, Commonwealth of Massachusetts

Event name Belmont Street Block Party

Description Block party for the residents of Belmont Street and Spring Hill Terrace

Location (attach a route if applicable) Belmont Street from Summer Street to Highland Ave

Date(s) Sunday, June 22, 2014 Rain date(s) Sunday, June 29, 2014

Start time (include setup) 2PM End time (include breakdown) 8PM

Estimated maximum attendance at any one time 150

Attendee fees or suggested donations At attendees' discretion

Will food be served? Y N If yes, describe pot luck contributions, burgers/dogs/buns/condiments

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

Will a grill/open-flame device be used? Y N If yes, describe residents' grills

Will streets or sidewalks be blocked? Y N If yes, describe Belmont St. from Summer St. to Highland Ave.

Organization name Belmont Street Block Party Committee

Mailing address (to mail the license) 100 Belmont St., Apt. 3, Somerville, MA 02143

Contact person Leah Bloom

Telephone 781-866-6820 Email Leah@LeahBloom.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 Residents of Belmont from Summer to Highland can park

Restrooms? Yes No If yes, describe in Cambridge Health Alliance parking lot

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 Leah Bloom Date April 30, 2014
 Print name Leah Bloom Phone 781-866-6820 Email Leah@LeahBloom.com
 Event name (taken from page 1) Belmont St. Block Party

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

<u> </u> Approved <u> </u> Denied Date _____ Signed: _____ Police Chief or Designee Added Conditions: _____ _____ _____	<u> </u> Approved <u> </u> Denied Date _____ Signed: _____ Chief Fire Engineer or Designee Added Conditions: _____ _____ _____
<u> </u> Approved <u> </u> Denied Date _____ Signed: _____ Traffic and Parking Director or Designee Added Conditions: _____ _____ _____	<u> </u> Approved <u> </u> 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.

Approved 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.



quick find: File # _____
Address _____

My Tasks > Add > Find > Reports Admin Support Center My Settings > Logoff

Edit Category File # 14-000478 Licenses Reviews Inspections Activities Documents Contacts History

Add

Activity License #: PEL14-000024
 Contact License Type: Public Event License Sub Type: Public Event License
 Document License Type: Public Event License
 Email Description: Belmont St Block Party Committee
 Letter
 Note
 License Status: Online Application Re Application Date: 04/30/2014
 Inspection Licensee: Somerville City Clerk Approval Date:
 Route Issue Date:

View

Alerts Total Amount: \$ 0.00 Last Inspection Date:
Reports Amount Paid: \$ 0.00 Last Inspection Type:
 Balance Due: \$ 0.00 Expiration Date:
Other Non-Billable: Close Date:

Event Location
 If your event is not at a single address describe the location(s) below
 Location Description: Belmont St from Summer St to Highland Ave

Event Information

Organization Name: Belmont St Block party
 Briefly describe the social, cultural, and financial benefits of your event for Somerville:
 Contact Name for follow-up questions: Leah Bloom Address we should mail the permit to: Leah Bloom, 100 Belmont St #3, Somerville, MA 02143
 Phone: 781-866-6820 Email: leah@leahbloom.com
 Event Name: Belmont St Block Party Description: Block Party for Belmont St and Spring Hill Terrace
 Date(s): Sunday, June 22, 2014 Rain Date(s): Sunday, June 29, 2014
 Setup for the event begins at (time): 2 PM The event itself begins at (time): After 2 PM
 The event itself ends at (time): Before 8 PM Cleanup after the event ends at (time): 8 PM
 Estimated maximum attendance at one time: 150 Estimated total number of different people attending:
 Estimated total number of Somerville residents attending: Maximum number of attendees you will accommodate (if applicable):
 Attendee fees or suggested donations: At attendees' discretion
 Will food be served?: Yes If yes, describe:1: Pot luck, hot dogs
 Will alcohol be served?: No If yes, describe:2:
 Will a grill/open-flame device be used?: If yes, describe:3:

	<input type="text" value="Yes"/>		<input type="text" value="Resident grills"/>
Will any streets be blocked?:	<input type="text" value="Yes"/>	If yes, describe:4:	<input type="text" value="Belmont St from Summer St to Highland Ave."/>
Will any sidewalks be blocked?:	<input type="text" value="No"/>	If yes, describe:5:	<input type="text"/>
Will any public parks be used?:	<input type="text" value="No"/>	If yes, name of park(s):	<input type="text"/>
Has this event occurred in the last two years?:	<input type="text" value="No"/>	If yes, prior dates:	<input type="text"/>
Will you make arrangements for Auxiliary Police:	<input type="text" value="No"/>	If yes, describe:6:	<input type="text"/>
Police Detail:	<input type="text" value="No"/>	If yes, describe:7:	<input type="text"/>
Parking for Attendees:	<input type="text" value="Yes"/>	If yes, describe:8:	<input type="text" value="Cambridge Health Alliance parking lot will be available"/>
Restrooms:	<input type="text" value="No"/>	If yes, describe:9:	<input type="text"/>
Liability Insurance:	<input type="text" value="No"/>	If yes, describe:10:	<input type="text"/>
Alcohol License:	<input type="text"/>	If yes, describe:11:	<input type="text"/>

Attach any brochures, posters, maps, or other explanatory material. You must attach a detailed street route or map if you are planning a road race, walk, or any other event that travels along a path.

While an attachment is not required, detailed information will expedite the review of this application.

Event Attachments:

You must read and accept the [public event conditions](#)

I have read and accept the public event conditions:

Fees

Quantity	Description	Custom Description	Amount	Total
0.0			0.0000	
			Application Fees:\$	0.00
			Other Fees:\$	0.00
			Total Fees:\$	0.00

Payments

Date	Type	Reference	Note	Receipt #	Received From	Amount	
						0.00	
						Amount Paid:\$	0.00
						Balance Due:\$	0.00