

# **PUBLIC EVENT PERMIT APPLICATION** City of Somerville, Commonwealth of Massachusetts

Event name Halloween Trick or Treat in Spring Hill  
 Description Trick or Treating around the block  
and Thriller "Flash Mob" ~~back~~ Community dance ~~at the~~  
 Location (attach a route if applicable) Brastaw Ave from Porter to Lowell;  
Block also Porter St from Summer St to Crown  
 Date(s) 10/31/12 Rain date(s) —  
 Start time (include setup) 4pm or 5pm End time (include breakdown) 9:00pm  
 Estimated maximum attendance at any one time 25-50 people? (Trick or Treating)  
 Attendee fees or suggested donations —  
 Will food be served? Y N If yes, describe —  
 Will alcohol be served? Y X If yes, describe —  
 Will a grill/open-flame device be used? Y X If yes, describe —  
 Will streets or sidewalks be blocked? Y N If yes, describe community dance  
on Brastaw Ave at Porter St.  
 Organization name Spring Hill Halloween?  
 Mailing address (to mail the license) 50 Brastaw Ave Somerville MA 02143  
or Randi Soltysiak  
 Contact person Randi SOLTYSIAK  
 Telephone 857-253-8110 Email randismith16@yahoo.com

Have you made arrangements for: please let me know what is needed and what I need to do  
 Auxiliary Police? ? Yes — No — If yes, describe —  
 Police Detail? — Yes X No — If yes, describe —  
 Parking (for Attendees)? — Yes X No — If yes, describe —  
 Restrooms? — Yes X No — If yes, describe —  
 Liability Insurance? — Yes X No — If yes, describe —

See if  
Auxiliary  
are available  
MSC

## 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 [Signature] Date 10/5/12  
Print name RANDI SOUTHERLAND Phone 857-253-8110 Email randismitu16@yahoo.com  
Event name (taken from page 1) Halloween Trick or Treat in Spring Hill

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>10/11/12</u> Signed: <u>[Signature]</u> Police Chief or Designee Added Conditions: <u>Only closing</u> <u>Brastow is Authorized without detrk</u> <u>Do not close Porter St.</u>	<input type="checkbox"/> Approved <input type="checkbox"/> Denied Date _____ 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: _____
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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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 Event name (taken from page 1) Halloween Trick or Treat in Spring Hill

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Approved <input type="checkbox"/> Denied <input type="checkbox"/> Date _____ Signed: _____ Police Chief or Designee Added Conditions: _____ _____ _____	X Approved <input checked="" type="checkbox"/> Denied <input type="checkbox"/> Date <u>10-9-12</u> Signed: <u>[Signature]</u> Chief Fire Engineer or Designee Added Conditions: <u>NO WALK</u> <u>BARRIERS ONLY!!</u> _____ _____
Approved <input type="checkbox"/> Denied <input type="checkbox"/> Date _____ Signed: _____ Traffic and Parking Director or Designee Added Conditions: _____ _____ _____	Approved <input type="checkbox"/> Denied <input type="checkbox"/> Date _____ Signed: _____ DPW Commissioner or Designee Added Conditions: _____ _____ _____

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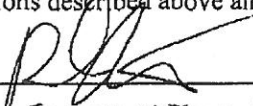
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 Print name RANDI SOLTYSIK Phone 857-253-8110 Email randismith16@yahoo.com  
 Event name (taken from page 1) Halloween Trick or Treat in Spring Hill

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**Thomas Pasquarello**  
Chief of Police

**City of Somerville  
Police Department**

220 Washington Street  
Somerville, MA 02143-1307  
(617) 625-1600  
[www.somervillema.gov/spd](http://www.somervillema.gov/spd)



# Memo

**To:** Chief Thomas Pasquarello  
**From:** Sgt. Sean Sheehan   
**Date:** 10/11/2012  
**Re:** Halloween Trick or Treat in Spring Hill(10/31/12)

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I have reviewed the Public Event Application for the Halloween Trick or Treat in Spring Hill scheduled for October 31, 2012. I spoke with the event organizer and she explained this is the first year this event has taken place. Ms. Soltysiak is requesting the closing of Brastow Ave from Porter Street to Lowell Street and Porter Street from Summer Street to Crown Street. This section of Porter Street is one of the more heavily traveled streets in the city and details would be required at each end of the street. Taking into consideration the date and time of the event and the need for police details, I would recommend approval of this permit with the stipulation that only Brastow Ave from Porter Street to Lowell Street be closed and no section of Porter Street be closed.

