

Culliver
✓
4/30/13

PUBLIC EVENT PERMIT APPLICATION
City of Somerville, Commonwealth of Massachusetts

Date 2 April 2013

To the Honorable, the Board of Aldermen of the City of Somerville:

The undersigned requests permission to conduct the following event. This permission will only be effective for the listed location and time, and will be subject to all of the terms, conditions, and limitations set forth in the Somerville Code of Ordinances, any applicable State and Federal laws, and any conditions prescribed by the Board of Aldermen and/or City Departments. Any charges incurred will be the sole responsibility of the applicant and must be paid in full prior to the event.

Event name A2+B95T

Description Multi-media Street festival

Location Davis Square

Date and time Fri July 19 6pm - 11pm ; Sat July 20 8a - 8pm

Rain date and time (if applicable) Sat July 20 6 - 11p ; Sun July 21 8a - 8p.

Estimated maximum attendance at any one time 10K

Attendee fees or suggested donations Free ; suggested donations

Organization name Somerville Arts Council

Mailing address City Hall Annex, 50 Essex Green Ave

Telephone X 2985

Have you made any arrangements for:

Auxiliary Police?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, describe	<u>Call in to Joe Carvalho</u>
Security?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, describe	<u>over-night</u>
Parking?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, describe	<u>via T&P ; Highways</u>
Food?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, describe	<u>via Health</u>
Restrooms?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, describe	<u>Port A John</u>
Liability Insurance?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	If yes, describe	

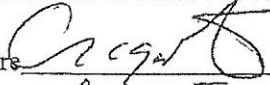
Note the following Conditions:

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. Any 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, shall be movable at all times. Vehicles will not be used as traffic controls. If the applicant requires the use of signage loaned by the Traffic and Parking Department, a security deposit will be required to ensure that the signage is returned.

Handwritten signature: Contact Somerville Parking Needs

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 is a canning drive, the applicant will provide adult monitors at each location, and will maintain a copy of the approved permit at each location.
5. 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, nor within 300 feet of any building from which an occupant asks that the performance desist.

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 4/2/13
 Applicant name (print) GREGORY JENKINS Applicant phone X 2985
 Event name (taken from page 1) ACT B&T

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

<p><input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Date <u>5/17/13</u></p> <p>Police Chief or Designee Conditions: _____ _____ _____</p>	<p><input type="checkbox"/> Approved <input type="checkbox"/> Denied Date _____</p> <p>Chief Fire Engineer or Designee Conditions: _____ _____ _____</p>
<p><input type="checkbox"/> Approved <input type="checkbox"/> Denied Date _____</p> <p>Traffic and Parking Director or Designee Conditions: _____ _____ _____</p>	<p><input type="checkbox"/> Approved <input type="checkbox"/> Denied Date _____</p> <p>DPW Commissioner or Designee Conditions: _____ _____ _____</p>

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

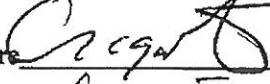
<p><input type="checkbox"/> Approved <input type="checkbox"/> Denied Date _____</p> <p>Health Inspector or Designee Conditions: _____ _____ _____</p>

Once signed, the Department should:

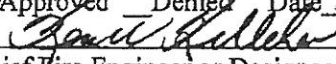
- ☐ Contact the applicant at the phone number above to arrange for pick-up.
- ☐ Fax the application (no cover page) to the following fax number: _____.
- ☐ Fax the application to the City Clerk at 617 625-4239.

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Applicant signature  Date 4/2/13
 Applicant name (print) GREGORY JENKINS Applicant phone X 2985
 Event name (taken from page 1) ART B&AT

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

Approved <input type="checkbox"/> Denied <input type="checkbox"/> Date _____ Police Chief or Designee Conditions: _____ _____ _____	X Approved <input checked="" type="checkbox"/> Denied <input type="checkbox"/> Date <u>4-30-13</u> <u></u> Chief Fire Engineer or Designee Conditions: <u>Detest Required</u> <u>Marquette Barricade only</u> _____ _____
Approved <input type="checkbox"/> Denied <input type="checkbox"/> Date _____ Traffic and Parking Director or Designee Conditions: _____ _____ _____	Approved <input type="checkbox"/> Denied <input type="checkbox"/> Date _____ DPW Commissioner or Designee Conditions: _____ _____ _____

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

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

Once signed, the Department should:

- ☐ Contact the applicant at the phone number above to arrange for pick-up.
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