



## CITY OF SOMERVILLE, MASSACHUSETTS

### CITY CLERK'S OFFICE

JOSEPH A. CURTATONE

MAYOR

JOHN J. LONG

City Clerk

May 2, 2013

To Whom It May Concern:

Digiscout Productions/Chris Churchill Photography/Hill Holliday have requested permission to conduct a Still Photo Shoot for Partners Healthcare on Fairlee Street and on Aberdeen Road, from 3 PM to 7 PM, on Friday, May 3, 2013 (raindate Monday, May 6, 2013, same hours).

The Police, Fire, Traffic and Parking, and Public Works Departments have all signed off on the appropriate documents, which are now at City Hall awaiting the next meeting of the Board of Aldermen.

The Signatures below will indicate interim approval by the Board of Aldermen.

Sincerely,

John J. Long  
City Clerk

Approved by President:

  
President William A. White, Jr.

Approved by Committee on Licenses and Permits:

  
Chairman Dennis M. Sullivan

Approved by Ward Aldermen:

  
Alderman Rebekah L. Gewirtz  
Alderman Courtney O'Keefe

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

Event name Partners HealthCare Still Photo Shoot

Description A still photo shoot of three street hockey players with neighborhood in background.

Location (attach a route if applicable) Fairlee St. Aberdeen Road

Date(s) Friday 5/3/13 Rain date(s) Monday 5/6/13

Start time (include setup) 3 pm End time (include breakdown) 7 pm

Estimated maximum attendance at any one time \_\_\_\_\_

Attendee fees or suggested donations none

Will food be served? Y ☒ N If yes, describe \_\_\_\_\_

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 Though we will be in street sometimes.

Organization name Digiscout Productions / Chris Churchill Photography/ Hill Holliday

Mailing address (to mail the license) 42 No. Main St., Ipswich, MA 01938

Contact person Chris Sammartano

Telephone 617-839-2079 Email csammartano@gmail.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 \_\_\_\_\_

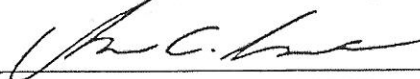
Liability Insurance? ☒ Yes ☐ No If yes, describe We can provide if requested.

Note the following Conditions:

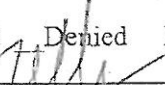
1. The event must not obstruct or inhibit the flow of vehicles or pedestrians except for road closures or detours permitted herein, or as directed by Police Officers or Auxiliary Police Officers.
2. All road closures or detours must be approved in advance by the Traffic and Parking Director, and must 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 4/29/13  
 Print name Chris Sammartano Phone 617 839 2079 Email csammartano@gmail.com  
 Event name (taken from page 1) \_\_\_\_\_

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>4/29/13</u></p> <p>Signed: <u></u></p> <p>Police Chief or Designee</p> <p>Added Conditions: <u>MUST ALLOW EMERGENCY ACCESS.</u></p>	<p><input type="checkbox"/> Approved <input type="checkbox"/> Denied Date _____</p> <p>Signed: _____</p> <p>Chief Fire Engineer or Designee</p> <p>Added Conditions: _____</p>
<p><input type="checkbox"/> Approved <input type="checkbox"/> Denied Date _____</p> <p>Signed: _____</p> <p>Traffic and Parking Director or Designee</p> <p>Added Conditions: _____</p>	<p><input type="checkbox"/> Approved <input type="checkbox"/> Denied Date _____</p> <p>Signed: _____</p> <p>DPW Commissioner or Designee</p> <p>Added Conditions: _____</p>

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

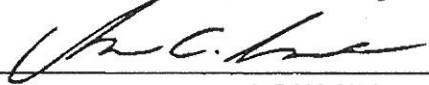
<p><input type="checkbox"/> Approved <input type="checkbox"/> Denied Date _____</p> <p>Signed: _____</p> <p>Health Inspector or Designee</p> <p>Added Conditions: _____</p>
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Once signed, the Department should:

- ☐ 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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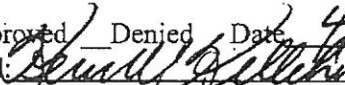
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Approved <input type="checkbox"/> Denied <input type="checkbox"/> Date _____ Signed: _____ Traffic and Parking Director or Designee Added Conditions: _____ _____ _____	Approved <input type="checkbox"/> Denied <input type="checkbox"/> Date _____ Signed: _____ DPW Commissioner or Designee Added Conditions: _____ _____ _____

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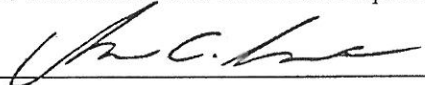
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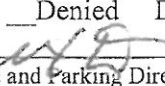
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<p><input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Date <u>4/30/13</u></p> <p>Signed: <u></u></p> <p>Traffic and Parking Director or Designee</p> <p>Added Conditions: <u>See Below</u></p> <p>_____</p>	<p><input type="checkbox"/> Approved <input type="checkbox"/> Denied Date _____</p> <p>Signed: _____</p> <p>DPW Commissioner or Designee</p> <p>Added Conditions: _____</p> <p>_____</p>

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*No parking signs must be requested to reserve parking.*

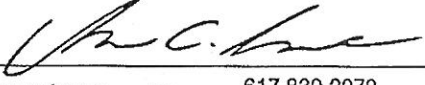
*Blocking a street will require SPD Detail.*

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__ Approved __ Denied Date _____ Signed: _____ Traffic and Parking Director or Designee Added Conditions: _____ _____ _____	__ Approved __ Denied Date <u>5-1-13</u> Signed: <u></u> DPW Commissioner or Designee Added Conditions: _____ _____ _____

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