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PUBLIC EVENT PERMIT APPLICATION
City of Somerville, Commonwealth of Massachusetts

Event name Somerville Dog Festival
Description Dog Sports demonstrations, sponsor/vendor booths, contests for people and their dogs
Location (attach a route if applicable) Trum Field

Date(s) Sunday September 14, 2014 Rain date(s) n/a

Start time (include setup) 6 am End time (include breakdown) 5 pm

Estimated maximum attendance at any one time 1,250

Attendee fees or suggested donations Free but any donations accepted

Will food be served? Y N If yes, describe To be determined and w/ LSD approval

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 Franny Road for staff parking

Organization name Somerville Foundation for Animals

Mailing address (to mail the license) Peter Square Veterinarian, 360 Somer St., Somerville 02144

Contact person Adam Parker

Telephone 617-628-5528 Email adam@somdogfest.org

Have you made arrangements for:

Auxiliary Police? Yes No If yes, describe To be organized w/ Chief Carvalho

Police Detail? Yes No If yes, describe _____

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

Restrooms? Yes No If yes, describe @ Trum Field

Liability Insurance? Yes No If yes, describe To be obtained through Northeast Insurance

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 2/18/14
 Print name [Name] Phone [Number] Email [Address]
 Event name (taken from page 1) [Name]

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>2-18-14</u> Signed: <u>Charles J. Ferraro</u> Police Chief or Designee Added Conditions: <u>Will need</u> <u>Auxiliary Police @ 3 IF</u> <u>NOT Available, Police officer</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.

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.

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.
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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 *Adam C. Parker* Date 7/12/14
 Print name Adam C. Parker Phone 617-667-5528 Email adam@Sundayfest.org
 Event name (taken from page 1) Somerville Day Festival

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

<input type="checkbox"/> Approved <input type="checkbox"/> Denied Date _____ Signed: _____ Police Chief or Designee Added Conditions: _____ _____	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Date <u>2-18-14</u> Signed: <u><i>[Signature]</i></u> 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: _____ _____

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Applicant signature [Signature] Date 1/1/14
 Print name [Name] Phone [Number] Email [Address]
 Event name taken from page 1: Somerville Day Festival

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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 *Adam C. Parker* Date 2/12/14
 Print name Adam C. Parker Phone 617-628-5588 Email adam@sondayfest.org
 Event name (taken from page 1) Somerville Dog Festival

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