

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

Event name Fall Fitness Day  
 Description activities including biking, skating, running, relay races, etc.  
 Location (attach a route if applicable) Brown School, Josephine Ave. side  
 Date(s) Oct. 17, 2012 Rain date(s) —  
 Start time (include setup) 12:30 p.m. End time (include breakdown) 3:00 p.m.  
 Estimated maximum attendance at any one time 100  
 Attendee fees or suggested donations —  
 Will food be served? ☒ Y ☐ N If yes, describe fall snack items  
 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 —  
 Organization name Brown School PTA  
 Mailing address (to mail the license) 201 Willow Ave., 02144  
 Contact person Marylou Carey - Sturniolo  
 Telephone 617-413-0292 Email mics@aol.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 In school  
 Liability Insurance? ☐ Yes ☒ No If yes, describe —

Note the following Conditions: We would like to close Josephine Ave from the Kidder Ave side to half way down to Morrison Ave.

- 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.
- 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.
- 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 Mary Ann Carey - Sturtevant Date 9/25/12  
 Print name Mary Ann Carey - Sturtevant Phone 617-413-0292 Email mmcs@aol.com  
 Event name (taken from page 1) Fall Fitness Day

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>10/10/12</u> Signed: <u>[Signature]</u> Police Chief or Designee Added Conditions: _____	<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: _____
--

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.
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 Mary Ann Carey - Stuchlik Date 9/25/12  
 Print name Mary Ann Carey - Stuchlik Phone 617-413-0292 Email mmcs@aol.com  
 Event name (taken from page 1) Fall Fitness Day

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 _____ Signed: _____ Police Chief or Designee Added Conditions: _____	X Approved <input checked="" type="checkbox"/> Denied <input type="checkbox"/> Date <u>9/25/12</u> Signed: <u>[Signature]</u> Chief Fire Engineer or Designee Added Conditions: <u>Movable</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: _____

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

Approved <input type="checkbox"/> Denied <input type="checkbox"/> 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.
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 Marylou Carey-Arnold Date 9/25/12  
 Print name Marylou Carey - Sturrollo Phone 617-413-0292 Email mmcs@aol.com  
 Event name (taken from page 1) Fall Fitness Day

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 _____ Signed: _____ Police Chief or Designee Added Conditions: _____ _____ _____	Approved <input type="checkbox"/> Denied <input type="checkbox"/> Date _____ Signed: _____ Chief Fire Engineer or Designee Added Conditions: _____ _____ _____
Approved <input checked="" type="checkbox"/> Denied <input type="checkbox"/> Date <u>10/10/12</u> Signed: _____ Traffic and Parking Director or Designee Added Conditions: _____ <u>WAT</u> _____ _____	Approved <input type="checkbox"/> Denied <input type="checkbox"/> 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 <input type="checkbox"/> Denied <input type="checkbox"/> Date _____ Signed: _____ Health Inspector or Designee Added Conditions: _____ _____ _____
--

Any "no parking restrictions" need to be requested + posted 48 hours in advance.

\* Assume you will have SPD officers present at all times.

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.
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 Mary McCarry-Sullivan Date 9/25/12  
 Print name Mary McCarry-Sullivan Phone 617-413-0292 Email mmcs@aol.com  
 Event name (taken from page 1) Fall Fitness Day

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 _____ Signed: _____ Police Chief or Designee Added Conditions: _____ _____ _____	Approved <input type="checkbox"/> Denied <input type="checkbox"/> Date _____ Signed: _____ Chief Fire Engineer or Designee Added Conditions: _____ _____ _____
Approved <input type="checkbox"/> Denied <input type="checkbox"/> Date _____ Signed: _____ Traffic and Parking Director or Designee Added Conditions: _____ _____ _____	Approved <input checked="" type="checkbox"/> Denied <input type="checkbox"/> Date <u>9-24-12</u> 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 <input type="checkbox"/> Denied <input type="checkbox"/> 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.




**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:** 10/10/2012  
**Re:** Brown School Fall Fitness Day(10/17/12)

---

I have reviewed the Public Event Application for the Brown School Fall Fitness Day scheduled for October 17, 2012. Currently we have 11 patrol officers and 2 neighborhood patrol officers(NPO) assigned to work the day shift on October 17. NPO Collins, who is assigned to the Brown School during the week will be in attendance. I have asked Captain Trant, if current minimum staffing levels are met, to assign an additional NPO to help coordinate the closing of Josephine Avenue. Taking into consideration the presence of at least 1 NPO, it is my opinion there will be minimal public safety concerns and I recommend that the permit be approved as requested.