

PUBLIC EVENT PERMIT APPLICATION
City of Somerville, Commonwealth of Massachusetts

2013 JUL -2 P 12: 35

CITY CLERK'S OFFICE
SOMERVILLE, MA

Event name BOSTON GOSPEL FEST
Description YOUTH SUMMER PROGRAM, WORKSHOP ON DRUGS ABUSE, VIOLENCE, BULLYING, SPORT ETC.
Location (attach a route if applicable) TRUM FIELD
54 BROADWAY SOMERVILLE
Date(s) 7/13/14 SUNDAY Rain date(s) _____
Start time (include setup) 12 NOON End time (include breakdown) 9 PM (CONCERT 3PM-8PM)
Estimated maximum attendance at any one time 500
Attendee fees or suggested donations \$15
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 _____
Organization name MISSIONARY CHURCH OF THE HAITIAN COMMUNITY
Mailing address (to mail the license) 100 Temple St SOMERVILLE
Contact person LUKSON LAMY
Telephone (857) 236-1587 Email LamyLukson@yahoo.com

Have you made arrangements for:

Auxiliary Police? Yes No If yes, describe will contact police DEPT
Police Detail? Yes No If yes, describe will contact police DEPT
Parking (for Attendees)? Yes No If yes, describe will contact the City
Restrooms? Yes No If yes, describe will contact the City
Liability Insurance? Yes No If yes, describe will contact INS. AGENCY

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 7/2/13
 Print name WIKSON LAMY Phone (857) 236-1587 Email LAMY.WIKSON@YAHOO.COM
 Event name (taken from page 1) BOSTON GOSPEL FEST

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>3/26/14</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.

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 [Signature] Date 7/2/13
 Print name LUKSON, AMY Phone (857) 236-1587 Email AMYLUKSON@YAHOO.COM
 Event name (taken from page 1) BOSTON GOSPEL FEST

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

<u> </u> Approved <u> </u> Denied <u> </u> Date <u> </u> Signed: _____ <small>Police Chief or Designee</small> Added Conditions: _____ _____ _____	<input checked="" type="checkbox"/> Approved <u> </u> Denied <u> </u> Date <u>7/2/13</u> Signed: <u>[Signature]</u> <small>Chief Fire Engineer or Designee</small> Added Conditions: _____ _____ _____
<u> </u> Approved <u> </u> Denied <u> </u> Date <u> </u> Signed: _____ <small>Traffic and Parking Director or Designee</small> Added Conditions: _____ _____ _____	<u> </u> Approved <u> </u> Denied <u> </u> Date <u> </u> Signed: _____ <small>DPW Commissioner or Designee</small> Added Conditions: _____ _____ _____

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Applicant signature [Signature] Date 7/2/13
 Print name WIKSON AMY Phone (857) 236-1587 Email AMY.WIKSON@YAHOO.COM
 Event name (taken from page 1) BOSTON GOSPEL FEST

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<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Date <u>7/10/13</u> Signed: _____ Traffic and Parking Director or Designee Added Conditions: <u>SA</u> _____	<input type="checkbox"/> Approved <input type="checkbox"/> Denied Date _____ Signed: _____ DPW Commissioner or Designee Added Conditions: _____ _____

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

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Applicant signature [Signature] Date 7/2/13
 Print name WIKSON LAMY Phone (857) 236-1587 Email LAMY@WIKSON.COM
 Event name (taken from page 1) BOSTON GOSPEL FEST

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<u>Approved</u> <u>Denied</u> <u>Date</u> Signed: _____ Traffic and Parking Director or Designee Added Conditions: _____ _____	<u>Approved</u> <u>Denied</u> <u>Date</u> <u>7-8-13</u> Signed: <u>[Signature]</u> EPW Commissioner or Designee Added Conditions: _____ _____

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<u>Approved</u> <u>Denied</u> <u>Date</u> Signed: _____ Health Inspector or Designee Added Conditions: _____ _____
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United Site Services Northeast, Inc.

239 Neck Road
Haverhill, MA 01835
Toll Free: 800-442-1286
Local: 978-372-0427
Fax: 978-372-2190



Salesperson Contact

Theresa B. Sylvester
Mobile:
Office: 1-800-864-5387 x72709
Fax: 508-594-2621
Teri.Sylvester@unitedsiteservices.com

Site Service Quotation

Quote No.: 414-204075

Quote Date: 02/28/14

Quote Expires: 03/30/14

Sell To: LUKE LAMY
LUKE LAMY

Ship To: LUKE LAMY
SOMERVILLE, MA 02145

Cust. #: USS-130570
Phone: 857-236-1587

Attn: LUKE LAMY
Phone: 857-236-1587
Terms: Due Upon Receipt

Item	Unit	Quantity	From	Thru	Unit Price	Total Price
Deluxe Restroom	EA	2	03/01/14	Indef	10.00	20.00 per billing cycle
Weekly Service	EA	2	03/01/14	Indef	95.00	190.00 per billing cycle
Damage Waiver	EA	2	03/01/14	Indef	7.95	15.90 per billing cycle
Environment/Energy/Compliance						27.09 per billing cycle
Per Billing Cycle Subtotal						252.99
Delivery, Setup, Removal	EA	1	03/01/14	03/01/14	20.00	20.00 one time
Environment/Energy/Compliance						2.58 one time
One Time Subtotal						22.58
Deluxe Restroom Subtotal:						275.57

Accepted: _____ Date: _____

Remit To: United Site Services, PO Box 5502, Binghamton, NY 13902-5502

NOTE: Total prices have been calculated for 1 billing period only. Damage Waiver is optional. Please read the terms and conditions on the last page of this document for more information.

Subtotal: 275.57
Tax: 3.10
Total: 278.67