PUBLIC EVENT PERMIT APPLICATION

City of Somerville, Commonwealth of Massachusetts

Date	tilelia	

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.

Description Reserves August Mass at 10 Am Then was of 9 Am To State and time MAY 23 Ed 2010 9 Am 12 Am Rain date and time (if applicable) Estimated maximum attendance at any one time 100 Attendee fees or suggested donations Nove Somethius Stores Club Organization name Ilmandads do Devino Estimate Somethius and time felephone 1017 1025 8 Am Contact Maria Silva 6 Have you made any arrangements for: Auxiliary Police? Yes No If yes, describe Somethius Security? Yes No If yes, describe 1 House 1 Auxiliary Police? Yes No If yes, describe 1 House 1 Auxiliary Police? Yes No If yes, describe 1 House 1 Auxiliary Police? Yes No If yes, describe 1 House 1 Auxiliary Police? Yes No If yes, describe 1 House 1 Auxiliary Police? Yes No If yes, describe 1 House 2 Inability Insurance? Yes No If yes, describe 1 House 1 Inability Insurance? Yes No If yes, describe 1 Inabil
Location 203 Somerulus Aus Somerulus MM 02143 Date and time MAY 23 Ed 2010 9 AM 12 AM Rain date and time (if applicable) Estimated maximum attendance at any one time 100 Attendee fees or suggested donations Somerulus Storts Club Organization name IRMANDADS do Devino Espirito SANTO Mailing address 203 Somerulus Ave Somerulus Felephone 617 625 8788 Contact Maria Silva 6 Have you made any arrangements for: Auxiliary Police? Yes No If yes, describe Somerulus Security? Yes No If yes, describe 1 House Parking? Yes No If yes, describe 27 Parking 28 Food? Yes No If yes, describe 37 Parking 28 Food? Yes No If yes, describe 37 Parking 28 Food? Yes No If yes, describe 37 Parking 28 Food? Yes No If yes, describe 37 Parking 38 Food? Yes No If yes, describe 37 Parking 38 Food? Yes No If yes, describe 37 Parking 38 Food? Yes No If yes, describe 37 Parking 38 Food? Yes No If yes, describe 37 Parking 38 Food? Yes No If yes, describe 37 Food 37 Food 37 Food 38 Food 38 Food 38 Food 39 Food 39 Food 30 Food
Location 203 SOMERULUS AUS SOMERULUS MH 02143 Date and time MAY 23 Ed 2010 9 AM 12 AM Rain date and time (if applicable) Estimated maximum attendance at any one time 100 Attendee fees or suggested donations Nove SOMERULUS STORTS CLUS Organization name TRANCASE OF DEVINO ESPITO SANTO Mailing address 203 SOMERULUS AUS Felephone 617 625 8788 CONTACT MARIA SILVA 6 Have you made any arrangements for: Auxiliary Police? Yes No If yes, describe SOMERULUS Security? Yes No If yes, describe 1 HOUSE Parking? Yes No If yes, describe 57 PARKING SECURITY Restrooms SECURITY S
Date and time MAY 23 ed 2010 9 AM 12 AM Rain date and time (if applicable) Estimated maximum attendance at any one time 100 Attendee fees or suggested donations None Sometrille Storts Club Organization name Primardade do Devino Espinto Santo Mailing address 203 Sometrille Ave Sometrille Telephone 17 625 8488 Contact Maria Silva 6 Have you made any arrangements for: Auxiliary Police? Yes No If yes, describe Sometrille Security? Yes No If yes, describe 57 Parking 28 Food? Yes No If yes, describe 57 Parking 28 Restrooms? Yes No If yes, describe 57 Catalogical Process of Sometrile 59 Ca
Pate and time MAY 23 Ed 2010 9 AM 12 AM Rain date and time (if applicable) Estimated maximum attendance at any one time 100 Attendee fees or suggested donations None Sometri WE STORTS CLUS Organization name I Lyandade do Devino Espirito Santo Mailing address 203 Sometri LLE Ave Sometri LLE Telephone 1/17 1/25 8 488 Contact Maria Silva 16 Have you made any arrangements for: Auxiliary Police? Yes No If yes, describe Sometri LLE Security? Yes No If yes, describe 1 House Parking? Yes No If yes, describe 1 House Parking? Yes No If yes, describe 1 House Prood? Yes No If yes, describe 1 House Prood Yes No If yes, describe 1 House
Rain date and time (if applicable) Estimated maximum attendance at any one time 100
Attendee fees or suggested donations Somewhile Storts Club Organization name Deliver Storts Club Deliver
Attendee fees or suggested donations SOMETULUE STORTS CLUS Organization name IRMANCACE CONTROLLE AND SOMETULUE Mailing address 203 SOMETULUE AND SOMETULUE Telephone 617625 8788 CONTROL MARIA SILVA 6 Have you made any arrangements for: Auxiliary Police? Yes No If yes, describe SOMETULUE Security? Yes No If yes, describe IN HOUSE Parking? Yes No If yes, describe 57 PARKING SOMETULUE Restrooms SOMETULUE SOMETULU
Attendee fees or suggested donations SOMETULUE STORTS CLUS Organization name IRMANCACE CONTROLLE AND SOMETULUE Mailing address 203 SOMETULUE AND SOMETULUE Telephone 617625 8788 CONTROL MARIA SILVA 6 Have you made any arrangements for: Auxiliary Police? Yes No If yes, describe SOMETULUE Security? Yes No If yes, describe IN HOUSE Parking? Yes No If yes, describe 57 PARKING SOMETULUE Restrooms SOMETULUE SOMETULU
Organization name TRYANDAGE CONTACT MARIA SANTO Mailing address 203 SOMETUILE AVE SOMETUILE Telephone 617 625 8388 Contact MARIA SILVA 6 Have you made any arrangements for: Auxiliary Police? Yes No If yes, describe SOMETUILE Security? Yes No If yes, describe IN HOUSE Parking? Yes No If yes, describe IN HOUSE Prood? Yes No If yes, describe IN HOUSE Restrooms?
Organization name Dening And Dening CSPINTO SANTA Mailing address 203 Sonerville Ave Somerville Telephone 617 625 8588 Contact Maria Silva 6 Have you made any arrangements for: Auxiliary Police? Yes No If yes, describe Sonerville Security? Yes No If yes, describe 1 House Parking? Yes No If yes, describe 57 Parking 2 8 Tood? Yes No If yes, describe 2 Restrooms? Yes No If yes, describe 3 Liability Insurance? Yes No If yes, describe 3 Total Contact Maria Silva 6 Auxiliary Police? Yes No If yes, describe 3 Eliability Insurance? Yes No If yes, describe 3 Total Contact Maria Silva 6 Auxiliary Police? Yes No If yes, describe 3 Total Contact Maria Silva 6 Auxiliary Police? Yes No If yes, describe 3 Total Contact Maria Silva 6 Auxiliary Police? Yes No If yes, describe 3 Total Contact Maria Silva 6 Auxiliary Police? Yes No If yes, describe 3 Total Contact Maria Silva 6 Auxiliary Police? Yes No If yes, describe 3 Total Contact Maria Silva 6 Auxiliary Police? Yes No If yes, describe 3 Total Contact Maria Silva 6 Auxiliary Police? Yes No If yes, describe 3 Total Contact Maria Silva 6 Auxiliary Police? Yes No If yes, describe 3 Total Contact Maria Silva 6 Auxiliary Police? Yes No If yes, describe 3 Total Contact Maria Silva 6 Auxiliary Police? Yes No If yes, describe 3 Total Contact Maria Silva 6 Auxiliary Police? Yes No If yes, describe 3 Total Contact Maria Silva 6 Total Contact Maria Silva 6 Auxiliary Police? Yes No If yes, describe 3 Total Contact Maria Silva 6 Auxiliary Police? Yes No If yes, describe 3 Total Contact Maria Silva 6 Auxiliary Police? Yes No If yes, describe 3 Total Contact Maria Silva 6 Auxiliary Police? Yes No If yes, describe 3 Total Contact Maria Silva 6 Auxiliary Police? Yes No If yes, describe 3 Total Contact Maria Silva 6 Auxiliary Police? Yes No If yes, describe 3 Total Contact Maria Silva 6 Auxiliary Police? Yes No If yes, describe 3 Total Contact Maria Silva 6 Auxiliary Police? Yes No If yes, describe 3 Total Contact Maria Silva 6 Auxiliary Pol
Mailing address 203 SOMETUILE AVE SOMETUILE Telephone 1/17 1/25 8788 Contact MARIA SILVA 1/6 Have you made any arrangements for: Auxiliary Police? Yes No If yes, describe Someruille Security? Yes No If yes, describe 1/1 House Parking? Yes No If yes, describe 57 PARKING 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Have you made any arrangements for: Auxiliary Police? Yes No If yes, describe Somework Learning? Yes No If yes, describe Tarking?
Have you made any arrangements for: Auxiliary Police?
Auxiliary Police?
Auxiliary Police?
Security? Yes No If yes, describe HOUSE Parking? Yes No If yes, describe TPARKING S Food? Yes No If yes, describe Restrooms? Yes No If yes, describe S Liability Insurance? Yes No If yes, describe S To The security? In the security? Yes No If yes, describe S To The security? Yes No I
Parking? Yes No If yes, describe 57 PARKING 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Food? Yes No If yes, describe 2 Restrooms? Yes No If yes, describe 2 Liability Insurance? Yes No If yes, describe 3 To a second of the seco
Restrooms? Yes No If yes, describe 2 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
Liability Insurance? Yes No If yes, describe
Note the following Conditions:
Total and Total Wing Conditions.
. 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.
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.

- 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 Maria Silva	Date 4/15/10 Applicant phone 781-395-8507
Applicant name (print) March Silva	Applicant phone 781-395-8507
Event name (taken from page 1) Broweette	
Event maine (taken from page 1) DV Orrection	be of the fluid service
Obtain the signatures below before submitting this form to	o the City Clerk for consideration by the Board of Aldermen.
ApprovedDenied Date	Approved Denied Date 4/15/10
Police Chief or Designee	Chief Fire Engineer or Designee
Conditions:	Conditions:
	N. med Ilher
	Zww. Harton
Approved Denied Date 4-15/1	_Approved _Denied Date
Traffic and Parking Director or Designee	DPW Commissioner or Designee
Conditions:	Conditions:
Obtain the signatures below if the applicant will be providing food to attendees. Not needed for block parties.	7
ApprovedDenied Date	
Health Inspector or Designee	
Conditions:	
Once signed, the Department should:	
Contact the applicant at the phone number a	bove to arrange for pick-up.
Fax the application (no cover page) to the fo	
Fax the application to the City Clerk at 617	-
~ and application to the City Cloth at 017	V#5 12271

APR-16-2010 FRI 09:48 AM SOMERVILLE POLICE DETECTIVE

P. 002

- 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.

A CM	
Applicant signature Maria Silva	Date 4/15/10
Applicant name (print) Maria 5: 1 v 4.	Applicant phone 781-391-8107
Event name (taken from page 1) Bankus Hoz	ed OFTHE HOLLY SPINIT
Obtain the signatures below before submitting this form to	the City Clerk for consideration by the Board of Aldermen.
VApproved Denied Date 4/16/2010	_Approved _Denied Date
Police Chief of Designee	Chief Fire Engineer or Designee
Conditions: Devites Police	Conditions:
	1
	A Briller
	18 IL HALL CONTO TO
_Approved _Denied Date	Approved Deter Deter
Traffic and Parking Director or Designee	De W Commissioner or Designee
Conditions:	conditions:
1	
Obtain the signatures below if the applicant will be providing food to attendees. Not needed for block parties.	
providing jobe to intendeed. Not assured for broom par indi-	<u>,</u>
_Approved _Denied Date	
Health Inspector or Designee	1
Conditions:	
	J
Once signed, the Department should:	•
Contact the applicant at the phone number a	have to energe for nick-litt.
Fax the application (no cover page) to the fo	Howing 19X mimoer.
Fax the application to the City Clerk at 617	625-4239.