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PUBLIC EVENT PERMIT APPLICATION
City of Somerville, Commonwealth of Massachusetts

Date SEPTEMBER 20, 2010

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.

Event name WILLOW AVE. BLOCK PARTY

Description BLOCK PARTY FOR NEIGHBORS

Location WILLOW AVE BETWEEN ELM AND SUMMER STS.

Date and time SUNDAY, OCTOBER 17, 2 - 6 PM

Rain date and time (if applicable) —

Estimated maximum attendance at any one time 30

Attendee fees or suggested donations —

Organization name KELLE SHUGRUE

Mailing address 43 WILLOW AVE SOMERVILLE 02144

Telephone 781 640-7748

Have you made any arrangements for:

Auxiliary Police? Yes ☒ No If yes, describe _____

Security? Yes ☒ No If yes, describe _____

Parking? Yes ☒ No If yes, describe _____

Food? Yes ☒ No If yes, describe _____

Restrooms? Yes ☒ No If yes, describe _____

Liability Insurance? Yes ☒ No If yes, describe _____

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. 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.

- ___ Contact the applicant at the phone number 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.

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 carning 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 _____ Date 9/20/10
Applicant name (print) KELLE SNUGRUE Applicant phone 781 640-7748
Event name (taken from page 1) WILLOW AVE BLOCK PARTY

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 _____ Police Chief or Designee Conditions: _____ _____	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Date <u>9/20/10</u> <u>[Signature]</u> Chief Fire Engineer or Designee Conditions: <u>Moveable Barriers</u> <u>Only</u>
<input type="checkbox"/> Approved <input type="checkbox"/> Denied Date _____ Traffic and Parking Director or Designee Conditions: _____ _____	<input type="checkbox"/> Approved <input type="checkbox"/> Denied Date _____ DPW Commissioner or Designee Conditions: _____ _____

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

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

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<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Date <u>9/29/10</u> Traffic and Parking Director or Designee Conditions: <u>[Signature]</u> _____ _____	<input type="checkbox"/> Approved <input type="checkbox"/> Denied Date _____ DPW Commissioner or Designee Conditions: _____ _____ _____

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Approved _____ Denied _____ Date _____ Police Chief or Designee Conditions: _____ _____ _____	Approved _____ Denied _____ Date _____ Chief Fire Engineer or Designee Conditions: _____ _____ _____
Approved _____ Denied _____ Date _____ Traffic and Parking Director or Designee Conditions: _____ _____ _____	Approved _____ Denied _____ Date <u>9-18-11</u> DPW Commissioner or Designee Conditions: _____ _____ _____

Approved Denied Date _____

 Health Inspector or Designee
 Conditions: _____

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