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PUBLIC EVENT PERMIT APPLICATION
City of Somerville, Commonwealth of Massachusetts

Event name Storm the State house
Description Mass Motorcycle Association will meet at 9 New Washington St to go together to the State house to take about motorcycle safety issues
Location (attach a route if applicable) 9 New Washington St
Date(s) Thursday May 16th Rain date(s) No
Start time (include setup) 9:00 AM End time (include breakdown) 12:00 PM
Estimated maximum attendance at any one time 50 - 75 Bikes
Attendee fees or suggested donations 0
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 Massachusetts Motorcycle Association
Mailing address (to mail the license) PO Box 378, Brimfield, MA 01010
Contact person John Doe DiEmilio
Telephone 800-432-1662 508-594-8881 Email Vice chair@massmotorcycle

2013 APR 19 A 1:38
CITY CLERK'S OFFICE
SOMERVILLE, MA

Have you made arrangements for:

Auxiliary Police? ☒ Yes ☒ No If yes, describe _____
Police Detail? ☒ Yes ☒ No If yes, describe working w/ middlesex sheriff's office
Parking (for Attendees)? ☒ Yes ☒ No If yes, describe Open Street Parking
Restrooms? ☒ Yes ☒ No If yes, describe 2 hours of restrooms
Liability Insurance? ☒ Yes ☒ No If yes, describe 1 million dollar

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 Dor D'Errico Date 4/3/13
 Print name Dor D'Errico Phone 508-554-8881 Email vlachos@massmutual.com
 Event name (taken from page 1) Storm the State house - Safety Issues for Motorcycles

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>4/16/2013</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: _____ _____ _____
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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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Applicant signature Don D'Errico Date 4/3/13
Print name Don D'Errico Phone 508-554-6801 Email mdachan@massmutual.com
Event name (taken from page 1) Storm the State House - Safety Issues for Motorcyclists

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

Approved ☐ Denied ☐ Date _____
Signed: _____
Police Chief or Designee
Added Conditions: _____

Approved ☒ Denied ☐ Date 4/16/13
Signed: [Signature]
Chief Fire Engineer or Designee
Added Conditions: _____

Approved ☐ Denied ☐ Date _____
Signed: _____
Traffic and Parking Director or Designee
Added Conditions: _____

Approved ☐ 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: _____

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Applicant signature Don D'Errico Date 4/3/13
 Print name Don D'Errico Phone 508-554-8881 Email Wacham@massmutual.com
 Event name (taken from page 1) Storm the State house - Safety Issues for Motorcycles

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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: _____ _____ _____
<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Date <u>4/18/13</u> 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: _____ _____ _____
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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 Doe D'Errico Date 4/3/13
 Print name Doe D'Errico Phone 508-564-4401 Email mechuck@assnmtwyle.com
 Event name (taken from page 1) Storm the State house - Safety Issues for Motorcycles

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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>4-23</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: _____ _____

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