

PUBLIC EVENT PERMIT APPLICATION
City of Somerville, Commonwealth of Massachusetts

Event name Irving Street Block Party
Description block party

Location (attach a route if applicable) Irving Street

Date(s) Sat Sept 15 Rain date(s) Sun Sept 16

Start time (include setup) 12 NOON End time (include breakdown) 8 pm

Estimated maximum attendance at any one time 50 ±

Attendee fees or suggested donations \$-

Will food be served? ☒ Y ☐ N If yes, describe donated food from attendees

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 Irving Street Neighbors

Mailing address (to mail the license) 76 Irving St Somerville 02144

Contact person Helen Corrigan

Telephone 617-625-6975 Email hcorrigan11@gmail.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 N/A

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. 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 Helen Corrigan Date 8/7/12
 Print name Helen Corrigan Phone 617-625-6975 Email hcorrigan11@gmail.com
 Event name (taken from page-1) Living St Block Party

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

Approved ☒ Denied ☐ Date <u>8/6/12</u> Signed: <u>[Signature]</u> Police Chief or Designee Added Conditions:	Approved ☐ Denied ☐ Date _____ Signed: _____ 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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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 asserts that the performance disturbs.
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 Helen Corrigan Date 8/7/12
 Print name Helen Corrigan Phone 617-625-6975 Email hcorrigan1@gmail.com
 Event name (taken from page 1) Living St Block Party

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

Approved ☒ Denied ☐ Date <u>8/7/12</u> Signed: <u>[Signature]</u> Police Chief or Designee Added Conditions: _____ _____ _____	Approved ☒ Denied ☐ Date <u>8/7/12</u> Signed: <u>[Signature]</u> 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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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 617 625-4230.

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 Helen Corrigan Date 8/7/12
 Print name Helen Corrigan Phone 617-625-4975 Email hcorrigan11@gmail.com
 Event name (taken from page 1) Irving St Block Party

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 _____ Signed: _____ Chief Fire Engineer or Designee Added Conditions: _____ _____ _____
☒ Approved ☐ Denied Date <u>8/9/12</u> Signed: _____ Traffic and Parking Director or Designee Added Conditions: _____ <u>MAA</u> _____ _____	☐ 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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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 performance, the applicant must provide a schedule of AM or PM (10:00 AM or 10:00 PM) and a start time on Saturday or Sunday, as indicated on the date of the event, and a parking location which can accommodate all of the performance vehicles.
5. Any fees charged by the applicant for the sale or consumption of the alcohol must be paid in full prior to the event.
6. The premises described for the event must be used for the event, and all of the terms, conditions, and limitations set forth in the Sample 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: 8/1/12
 Print name: David L. [Name] Phone: 617-625-8531 Email: [Email]
 Event name, date, time, location: [Event Name] [Date] [Time] [Location]

Please sign and date below to approve the application. Signatures must be submitted to the Board of Aldermen.

Approved _____ Denied _____ Date _____ Signed: _____ Public Inspector or Designer Added Conditions: _____	Approved _____ Denied _____ Date _____ Signed: _____ Chief of Police or Designer Added Conditions: _____
Approved _____ Denied _____ Date _____ Signed: _____ Traffic and Parking Director or Designer Added Conditions: _____	Approved _____ Denied _____ Date <u>8-9-12</u> Signed: <u>[Signature]</u> Director of Public Safety or Designer Added Conditions: _____

Please sign and date below if the applicant will be responsible for the event. Signatures must be submitted to the Board of Aldermen.

Approved _____ Denied _____ Date _____ Signed: _____ Public Inspector or Designer Added Conditions: _____
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Once signed, the Department should:

1. Contact the applicant at the phone number / email address above to arrange for pick up.
2. Fax the application (no cover page) to the following fax number: _____
3. Fax the application to the City Clerk at 617-625-8531.