

City of New Haven Department of Parks, Recreation & Trees

720 Edgewood Avenue, New Haven, CT 06515 Phone 203-946-8020 OR 203-946-8027 New Haven

Justin Elicker, Mayor Jeff Pescosolido, Director David R. Belowsky, President, Board of Park Commissioners

Permit Application (NOT FOR ATHLETIC FIELD USE)

Please read the following and complete the application:

- All permit requests <u>must</u> be submitted no less than 3 weeks in advance. Failure to do so will result in a late charge of \$40 in addition to your permit costs.
- Please complete with all the information pertaining to your event. Any <u>incomplete</u> applications will not be processed.

Application Information

Work:	Cell:	
Email:		
Specific Location:	:	
	* <mark>Estimated Atte</mark>	endance:
Event Time(s):	AM/PM to	AM/PM
Clean up: _		
	Cell:	
	Stat Work: Email: Specific Location: Specific Location: Speci	State:Zip:

[^] A <u>non-refundable</u> application fee is due and payable at the time the application is submitted. Cash, certified bank check/money order made payable to TREASURER, CITY OF NEW HAVEN.

*Additional charges may apply pending approval once submitted and reviewed by Permit Committee.

PLEASE READ THE FOLLOWING CAREFULLY & SIGN

The applicant agrees to be bound by the rules and regulations of the Parks Department governing its use and by the Ordinances of the City of New Haven and Regulations of the New Haven Board of Park Commissioners. The applicant will pay the fees for labor and/or rental of equipment provided by the Parks Department in certain instances that have been identified on this application and the information sheet. In addition, the applicant will pay fees for any additional labor not stated but provided by the Parks Department as a result of the applicant's activity. The applicant will be required to pay the estimated costs associated with this event prior to the actual park permit being issued. The balance must be paid within TEN WORKING DAYS after being billed. Any balance not paid within the 10 days will automatically cancel the event. Certified checks or Money Orders must be made payable to TREASURER, CITY OF NEW HAVEN. Cash will not be accepted.

On _____(date), the undersigned applicant has inspected the site where the event will occur and is satisfied with and accepts the site in its existing condition and hereby agrees to indemnify, defend and hold harmless the City of New Haven and the New Haven Board of Park Commissioners and their employees, officers and agents from and against any and all claims, losses, suits, actions, demands, fines, fees, judgments, damages and cost arising out of or in any way connected with the use of the undersigned of the City of New Haven facility known as ______, on the date(s) of the permitted event.

Upon reviewing all information on this application, the Parks Director and/or Police Chief may require Park's staff and/or Police to be present at this event. The undersigned permit holder agrees to pay for all city services directly associated with the event.

Please note that all components of the event are subject to Parks Department approval and may require approval by and/or permits from other city agencies. Parks Department approval does not constitute permission from other agencies. It is the responsibility of the applicant to secure all necessary city permits.

Evidence of insurance will be required before final permit approval. Please provide an insurance certificate, which shows a minimum of \$1 million dollars in commercial liability insurance and a policy endorsement which indemnifies and holds harmless the City of New Haven and the New Haven Board of Park Commissioners. Some events may require a higher limit of insurance. The permittee must also list the aforementioned parties as additional insured on their certificate of insurance. Each event is evaluated on its risk exposure. The City of New Haven is not responsible for any accidents or damages to persons or property resulting from the issuance of this permit.

** In applying for this park permit, the applicant shall agree that no intoxicating liquors shall be sold, distributed free or otherwise made available in connection with the use of such permit. Any special concerns and/or considerations with regard to the event must be made by contacting the Director of the Department of Parks, Recreation & Trees at (203) 946-8020 or 203-946-8027.

Everything I have stated on this application is correct to the best of my knowledge. I have read, understand and agree to abide by these policies, rules and regulations on this form as they pertain to the requested usage. The permit, if granted, is not transferable and is revocable at any time at the discretion of the Parks Department and/or the Board of Park Commissioners.

Rv.		
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Name of Organization or Trade Name (If applicable)

Its: _____

Position/Title (if applicable)

Insurance Certificate Required? ____ Yes / ____ No

Signature

For Personal Liability under the following Indemnification Paragraph

Creating Community through People, Parks and Programs 720 Edgewood Avenue, New Haven, CT 06515, Phone 203-946-8020 or 203-946-8027

Standard Event Checklist

Please indicate whether the following items pertain to your event. If none applies, please check 'No'. YES NO

re are additional costs including mobile stage/bleacher rental fees and staff costs.
Mobile Stage I? Mobile Stage II? Mobile Stage III? Bleachers? (Circle which applies); If available, please be
Please indicate time AM/PM toAM/PM
Bathroom Rental; If available, please be advised there are additional costs.
Please indicate timeAM/PM toAM/PM
Electricity/Water; If available, please be advised there are additional costs.
Sponsorship/Vending or Promotional Activity?
Are there any tickets, admission or other charges? Amount
*Please note that you cannot advertise your event prior to permit approval.
Will event be advertised? How?
Banner(s) large or small? If yes, please describe:
Inflatable Device(s) (Not allowed at some locations)? If yes, you <u>MUST</u> provide us with a certificate of r a minimum of 1 million dollars before receiving your permit. Please describe:
Entertainment, please describe:
Will you be renting Portable Toilet(s)? If yes, please indicate company providing units:
Do you need Trash Receptacles and/or Recycling Containers? (Circle one or both.)
Are you using Canopy(ies), Tents and/or Enclosures? If yes, dimensions:
Are you having Booth(s) and/or Exhibit Display(s)? Approx. amount:
Will you set up table(s) and/or chair(s)? (tables & chairs are not provided by us)
e contact Health Department 203-946-8174 (City of New Haven Public Health License is required)

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