

### **City of New Haven** Department of Parks, Recreation & Trees

Phone 203-946-6960, hhatton@newhavenct.gov

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



# **Permit Application** NO WALK-INS - EMAIL ONLY

Please read the following and complete the application:

- All permit requests must 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**

Today's Date:	
Organization (if applicable):	
Applicant's Name/Title:	
Address:	
	State:Zip:
Phone – Home:	Work:Cell:
Fax:	Email:
Name of Park:	Specific Location:
Type of Event/Activity Planned:	*Estimated Attendance:
	<pre>//ParadeWedding Ceremony/PhotosPicnicOther (specify):</pre>
Date(s) of Event:	Event Time(s): AM/PM to AM/PM
Day(s) of the Week:	
	Clean up:
Person On-site Day of Event:	Cell:
Certified bank check/mone Payment by phone a	tion fee is due and payable at the time the application is submitted ey order made payable to TREASURER, CITY OF NEW HAVEN ccepted via Visa, MasterCard, Discover or American Express. Phone 203-946-6960

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

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### \*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. Payment by phone accepted via Visa, MasterCard, Discover or American Express. Phone 203-946-6960.

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 Hershey (Hatton) Cantiello at 203-946-6960 or hhatton@newhavenct.gov.

Everything I have stated on this application is correct to the best of my knowledge. I have read, understand and agree to a bide 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 and Public Works Department and/or the Board of Park Commissioners.

By: \_\_\_

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

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### **Standard Event Checklist**

Please indicate whether the following items pertain to your event. If none applies, please check 'I	No'.
YES NO	
Food Served. Source: Food from HomePotluckCater (Name)	
If yes, please contact Health Department 203-946-8174 (City of New Haven Public Health License is required)	
Will you set up table(s) and/or chair(s)? (tables & chairs are not provided by us)	
Are you having Booth(s) and/or Exhibit Display(s)? Approx. amount:	
Are you using Canopy(ies), Tents and/or Enclosures? If yes, dimensions:	
Do you need Trash Receptacles and/or Recycling Containers? (Circle one or both.)	
Are you using Portable Toilet(s)? If yes, please indicate company providing units:	
Entertainment, please describe:	
Inflatable Device(s) (Not allowed at some locations)? If yes, you <u>MUST</u> provide us with a certificate of insurance for a minimum of 1 million dollars before receiving your permit. Please describe:	
Banner(s) large or small? If yes, please describe:	
Will event be advertised? How?	
*Please note that you cannot advertise your event prior to approval.	
Are there any tickets, admission or other charges? Amount	
Sponsorship/Vending or Promotional Activity?	
Electricity/Water; If available, please be advised there are additional costs.	
Please indicate timeAM/PM toAM/PM	
Bathroom Rental; If available, please be advised there are additional costs.	
Please indicate time AM/PM toAM/PM	
Mobile Stage I? Mobile Stage II? Mobile Stage III? Bleachers? (Circle which applies); If available, ple advised there are additional costs including mobile stage/bleacher rental fee and heavy equipment operator.	ase be
Please indicate time: AM/PM to AM/PM	
Amplified Sound? If yes, please indicate Start Time End Time Please be advised amplified sound/DJs are not allowed in any New Haven Park with the exception of DeGale & New Haven Green. No amplified sound allowed on Green prior to 1:00 pm on Sundays.	Park
The City of New Haven requires that noise levels not exceed 70 decibels between 7:00 AM and 11:00 PM in a residuent or commercial zone. Note: The City of New Haven requests that there be no amplified sound on park property befor 11:00 AM except for purposes of sound checking.	
Any Special Requests?	
**Please attach additional sheets as necessary (including plans, drawings, maps, etc.)	

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