



City of New Haven

Department of Parks, Recreation & Trees

720 Edgewood Avenue, New Haven, CT 06515 Tel. (203) 946-8020 Fax (203) 946-8024

John DeStefano, Jr., Mayor

Robert D. Levine, Director



SPECIAL EVENT PERMIT APPLICATION

Please complete all information or your application will not be accepted

Please type or print clearly.

Application Date: _____

Reservation#: _____

-APPLICANT INFORMATION-

Organization: _____

Applicant's Name/Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Home#: _____ Work#: _____ Cell#: _____

Fax: _____ E-mail Address: _____

Name of Park: _____ Specific Location: _____

Type of Event/Activity Planned: _____ Estimated Attendance: _____

- RUN/WALK RALLY PARADE WEDDING CEREMONY/PHOTOS
- FAIR CONCERT PICNIC OTHER (specify): _____

Permission Request: _____

Date(s) of Event: _____ Time(s): _____ AM/PM to _____ AM/PM

Day(s) of the week: _____

Time(s) for setup: _____ cleanup: _____

Person on Site Day of Event: _____ Pager/Cell#: _____

RESIDENT FEE: \$35.00

NON-RESIDENT FEE: \$75.00

MUST SHOW ID

***IMPORTANT: A non-refundable application fee is due and payable at the time the application is submitted. Cash, check/money order made payable to TREASURER, CITY OF NEW HAVEN.**

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) 946-8027.**

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.

By: _____
Name of Organization Or Trade Name

Signature
For Personal Liability under the following
Indemnification Paragraph

Its: _____
Position/Title

Fee with application: \$ _____

Check/Money Order#: _____

Insurance certificate required? Yes / No

PLEASE INDICATE WHETHER THE FOLLOWING ITEMS PERTAIN TO YOUR EVENT.

YES NO

___ ___ **Caterer (City of New Haven Public Health License is required)**

___ ___ **First Aid Facility(ies)**

___ ___ **Will you set up table(s) and/or chair(s)? (tables & chairs not provided by us)**

___ ___ **Fencing/Barrier(s), If yes, footage needed _____**

___ ___ **Do you need electricity and/or water? Circle one or both.**

___ ___ **Are you having Booth(s) and/or Exhibit Display(s)? Approx. amount: _____**

___ ___ **Are you using Canopy(ies), Tents and/or Enclosures? If yes, dimensions: _____**

___ ___ **Stage on the Green, Platform Stage, Bleachers? (circle which applies)**

___ ___ **Mobile Stage I? Stage II? Stage III? Stage IV? (circle which applies)**

___ ___ **Will you be using your own Stage(s), If yes, please include 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), If yes, 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.

___ ___ **Sponsorship/Vending or Promotional Activity? _____**

___ ___ **Amplified Sound? If yes, please indicate Start Time _____ End Time _____**

The City of New Haven requires that noise levels not exceed 70 decibels between 7:00 AM and 11:00 PM in a residential or commercial zone. Note: the City of New Haven requests that there be no amplified sound on park property before 11:00 AM except for purposes of sound checking.

****Please attach additional sheets as necessary, including plans, drawings, maps, etc.**