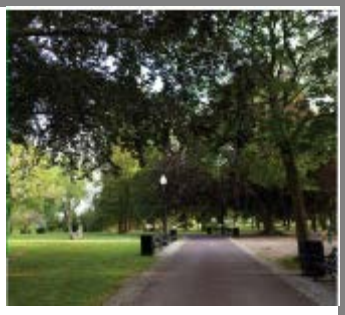
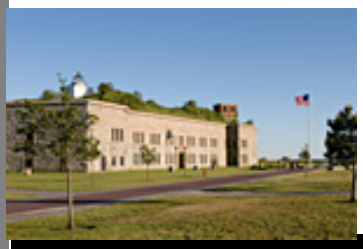
Application ID #:_____

Date of Submission:_____





CITY OF NEW BEDFORD

APPLICATION

FOR SPECIAL EVENT PERMIT

Welcome. The City of New Bedford appreciates your efforts in contributing to the heart and vitality of the City through your special event. We recognize that the City of New Bedford is fortunate to have many varied and beautiful public spaces all of which provide wonderful venues to hold Special Events.

To preserve the City's natural resources, while still offering entertainment, the City may permit the temporary use of public properties and/or roadways for special activities. The Parks Recreation & Beaches Department coordinates the review of these events with various City departments to ensure that events are conducted safely. **The Authorized User is required to demonstrate that adequate provisions have been made to comply with all local ordinances, as well as state and federal laws. All applicants must demonstrate they have fulfilled these requirements prior to the authorization of any event/special activities and the issuance of a permit.**

New Bedford Parks Recreation & Beaches (PRB) will assist in the coordination of City services for Authorized Users during the review process. Due to the high volume of requests and limited resources, **all requests for city services must be outlined on the special event application. Requests made after the application has been submitted will only be granted on an emergency basis.** The application process is as follows:

- ☑ Submit completed application ***no less than 90 days*** in advance of the event date and all applications **MUST be submitted in person** to the PRB Administrative Offices located at:

  181 Hillman St. Bldg #3
  New Bedford, MA 02740

- ☑ All applications require a non-waivable **$25 processing fee** made out to the *City of New Bedford* paid at the time of submission. **Processing fee is for consideration NOT reservation**.
- ☑ PRB administrative staff will provide a checklist of departments to be contacted no later than 7 business days after application is submitted. **Applicants MUST** contact all required city departments upon receipt of checklist
- ☑ The City reserves the right to require an event walk-through with applicant and applicable department contacts 30 days prior to event date
- ☑ All requirements **MUST** be satisfied in accordance with each department's respective timeline and in the entirety at least 10 days in advance of the event. When all applicable departments have confirmed the satisfaction of all requirements a paper permit will be issued to the Authorized User. **The Authorized User is responsible for obtaining the permit from the PRB Administrative Offices and must publicly display the permit during the event**

Further questions on the application process may be directed to the Parks Recreation & Beaches Administrative Office at (508) 961-3015 or by emailing infoprb@newbedford-ma.gov. The City of New Bedford appreciates your attention to these requirements.

Event Summary

EVENT TITLE:

ALL APPLICANTS ARE REQUIRED TO PROVIDE A DESCRIPTION OF THE EVENT
PLEASE ATTACH DESCRIPTION TO THIS APPLICATION

Event Categories:

- ☐ Sports/Recreation
- ☐ Concert/Performance
- ☐ Fundraiser
- ☐ Carnival/Circus
- ☐ Fair/Festival
- ☐ Special Attraction
- ☐ Parade/March
- ☐ Family Gathering
- ☐ Exhibits / Miscellaneous
- ☐ Outdoor Market
- ☐ Dance
- ☐ Other

	Day of the Week	Date	Time	
Set-up Starts				**Anticipated number of attendees at event:** _____
Event Starts				
Event Ends				
Dismantle Ends				
Location of event:				
Site Plan/Map:	**All applicants are required to submit a site plan/route plan/map of proposed event (please attach to this application)**			

REQUESTS FOR ANY STREET CLOSINGS MUST BE BROUGHT BEFORE THE CITY COUNCIL. THIS SHOULD TAKE PLACE NO LESS THAN 60 DAYS BEFORE THE EVENT. FOR MORE DETAILED INFORMATION ABOUT THE PROCEDURE AND REQUIREMENTS PLEASE CALL 508-979-1455

Contacts/ Organization Information

Please list the party who will serve as the primary point of contact for the event.

Applicant Name | Phone | E-Mail

Organization Name | Address Street | City | State | Zip

Web Address | Organization Phone | E-Mail

Emergency Contact: In case of an emergency during the event, a person must be available to be contacted during the hours of the event. Please Identify:

Emergency Contact Name | Cell Phone # | Other Contact # (if applicable)

Organization Status

TAX EXEMPT, NON-PROFIT: This refers to an organization that has been recognized as tax exempt by the Internal Revenue Service at least six (6) months prior to your event date and is in good standing with the IRS. If you are a bona fide tax exempt, nonprofit organization, a copy of your current tax exemption letter is required.

Yes	No	
		Is the Authorized User a commercial entity?
		Is the Authorized User a bona fide tax exempt, non profit entity? If yes, you must attach to this application a copy of your IRS tax exemption letter providing proof and certifying your current tax exempt status.
		Are fees for admission, entry or participation required? If yes, please provide amount?_____
		Are fees for vendors or others required? If yes, please provide amount(s):_____

Insurance

The Authorized User shall secure general liability insurance from an approved insurance company listing the City of New Bedford and the Park Board or other applicable department as additional insured, and providing coverage of $1 million per occurrence and $3 million in the aggregate. Evidence of said insurance must be submitted to the Parks Recreation & Beaches Office (or other applicable Department) no later than fourteen (14) working days prior to the Special Event.

Insurance Agency Phone

Street City State Zip

Contact Name Policy Type Policy Amount Policy Number

Security Deposit

The Authorized User shall deposit the sum of $5,000.00 in cash, certified funds or money order, with the City of New Bedford (or other applicable Department), at least five (5) working days prior to the Special Event. Said deposit shall act as security that the premises has to be returned to its original condition, immediately following the Special Event, wear and tear excepted. Rather than deposit said fund with the City, the Authorized User may obtain a surety bond in the amount of $5,000.00 securing its performance of its obligations hereunder. Said deposit held by the City will not bear interest and shall be released upon determination by the City that the Authorized User's obligations hereunder have been satisfied. **The City reserves the right to waive these requirements, depending upon the size and risk level of the event.**

Bonding Company Phone

Street City State Zip

Contact Name Bond Type Bond Amount Bond Number

PLEASE THOROUGHLY REVIEW THE LIST OF ITEMS BELOW. CHECK 'YES' IF AN ITEM PERTAINS TO YOUR EVENT AND CHECK 'NO' IF THE ITEM DOES NOT PERTAIN TO YOUR EVENT. IF A REQUEST FOR A SPECIFIC SERVICE IS NOT LISTED HERE, PLEASE INLCUDE A SEPARATE LETTER OF REQUEST FOR THE ITEM.

YES	NO	
		SECURITY PLAN Security determination will be made based on the size and type of your event. The New Bedford Police Department will make that assessment after reviewing the application. *Certain activities require heightened security. The type of security will be determined by local, state and or federal officials. **If using licensed Security Company - Licensed Professional Security Company shall provide the City with an insurance certificate naming the City of New Bedford as "Additional Insured." A copy of such must be submitted no later than 10 days prior to the Event date.)
		MEDICAL SERVICES/SAFETY PLAN **At a minimum, all events should have knowledge of 911 Access and someone who is certified in First Aid/CPR. Also, basic First Aid stations and/or kits SHALL be on site.** The following is the ratio of the number of ambulances needed for the number of people in attendance: 1 ambulance for: 1,000-10,000 2 ambulances for: 10,001-20,000 3 ambulances for: 20,001+ people
		FIRE SAFETY PLAN Will your event include any of the following: Tents, Temporary Structures, Bonfires, Fireworks, Propane use, any open flame. *Certain special events may require a fire watch detail. A fire inspector shall inspect the site of the event and determine the need for a fire watch detail.
		FOOD CONCESSION/HEALTH PLAN Will you be serving any type of food, beverage or perishable item at your event?
		ALCOHOL Will you be serving /offering alcoholic beverages at your event?
		REQUEST FOR USE OF PARK LANDS Are you requesting the use of a public park or recreation venue in the city?
		AMUSEMENT RIDES/INFLATABLE DEVICES Will your event include amusement rides or inflatable devices?
		ENTERTAINMENT Will your event be providing entertainment services such as a concert, sound amplification, or other entertainment? Please specify type:_____
		ELECTRICTY / GENERATOR Will your event require access to electricity or require the services of a city electrician?
		PLUMBING SERVICES Will you be requesting the use of water, sinks, plumbing equipment or the use of a city plumber?

		TENTS/TEMPORARY STRUCTURES Will you be erecting any tents or temporary structures for use during your event?
		STAGE/BANDSHELL Are you requesting the use of a City-owned bandshell or stage?
		CITY EQUIPMENT RENTAL Are you requesting the use of other city equipment such as a gazebo, bleachers, trash barrels, traffic control equipment, crowd control fencing, snow fencing, trolley, shuttle buses, etc… ?
		TRASH/ WASTE REMOVAL All events are responsible for the removal of waste from public space and provide documentation of vendor.
		RECYCLING The city has a mandatory recycling program which you are required to follow. Contact 508-979-1520 for more information on this requirement.
		PORTABLE TOILETS All events are required to provide access to adequate restroom facilities for event goers. **All applicants must provide documentation of Portable Restroom Vendors.**
		PUBLIC RESTROOMS Will you be requesting the use of a public restroom facility?
		WATER/BEACH/ SHORELINE/HARBOR SAFETY PLAN Will you be holding any portion of your event on-water, beach, shoreline, or in the harbor? If yes, please note all applicants must acquire proper permissions from the United States Coast Guard at least 120 days in advance of the event.
		PARKING Will you be requesting the use of a public parking space? If not, you must provide an adequate description of the event parking plan and authorized user is responsible for informing all event patrons of legal and proper parking.
		STREET CLOSING Will you be requesting the closure of streets or public traffic ways for the event?
		CITY/PUBLIC BUILDING Will you be requesting the use of a city building during your event? **Please describe building:**

The City reserves the right to reassign resources and/or materials for a City purpose at any time. Every effort is made to avoid scheduling conflicts so that all purposes can be accommodated.

APPLICANTS MUST PROVIDE PROOF OF A LICENSE TO OPERATE AND/OR INSURANCE FOR ALL NON-CITY VENDORS FOR THE FOLLOWING SERVICES EMS, WASTE REMOVAL, AMUSEMENT RIDES, SECURITY, PORTABLE RESTROOMS, PARKING

Applicants Affidavit – PRB & Solicitors

Event Title | Event Date(s) | Time

Location

I, on behalf of the organization I represent, certify that all the foregoing pages in this Special Event Permit Application have been completed, and for those pages for which are not applicable, it has been so noted on the appropriate sections. I attest that the information contained herein is accurate, to the best of my knowledge and belief.

I attest that I have read all the rules, regulations and guidelines specified herein and that which is included in the addendums to this Application.

I, acting on behalf of the organization I represent, am authorized to commit that organization to agree to abide by the rules, regulations and guidelines specified herein, and that I will accept all responsibilities for any payments for municipal services and/or resources as they have been outlined and as they may be utilized by me and the organization whom I am representing and the patrons who will be served by this Special Event.

Name of Applicant | Title

Organization Name

E-mail address

Signature | Date

This Affidavit MUST BE SUBMITTED, ***signed*** and
presented in person to the following:
City of New Bedford
Parks, Recreation & Beaches- Administrative Offices
181 Hillman Street, Building #3
New Bedford, MA 02740

FAILURE TO RETURN THIS SIGNED AFFIDAVIT WITH THE COMPLETED PERMIT APPLICATION SHALL CAUSE THIS SPECIAL EVENT APPLICATION TO BE DEEMED INCOMPLETE

CHECK LIST:

Each department must respond in writing (emails are acceptable) before the permit will be issued.

Department	Rcvd	Approval	Comments
City Clerk			
City Council			
Licensing Board			
Park Board			
Mayor's Office			

You must complete ALL of the sections above before moving on with the departments below. Failure to properly follow procedure may result in Special Event cancellation.

Community Services			
DPI			
DFFM			
Emergency Management			
Emergency Medical Services			
Environmental Stewardship			
Fire Department			
Harbor Development			
Health Department			
Inspectional Services			
Police Department			
Recycling			
Solicitors Office			
Traffic			