



# TOWN OF LEXINGTON

## Special Event Permit Application

### Applicant and Sponsoring Organization Information

Name of Organization / Sponsor: \_\_\_\_\_ Non-Profit \_\_\_\_\_ Profit \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Tax ID #: \_\_\_\_\_ Applicant name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Web Site: \_\_\_\_\_

Event Manager: \_\_\_\_\_ Contact Info: \_\_\_\_\_

Other Contact person/s: \_\_\_\_\_ Contact Info: \_\_\_\_\_

### Event Information

**Event Type:**      Run/Walk                  Rally                  Parade                  School Event  
                         Concert                  Festival                  Political Event                  Food Truck

Other (specify) \_\_\_\_\_

Event Title: \_\_\_\_\_

Start Date & Time(s): \_\_\_\_\_ End Date & Times(s): \_\_\_\_\_

Estimated Attendance: # \_\_\_\_\_ Admission Fee: \_\_\_\_\_

Open to the Public:      Yes                  No

**Requested Location:**      Depot Square                  Visitors Center Lawn                  Hastings Park  
                         Hastings Park Gazebo                  Tower Park                  Battle Green

Street (specify): \_\_\_\_\_

Other (specify): \_\_\_\_\_

Set Up Date/Time & Description: \_\_\_\_\_

Breakdown Date /Time & Description: \_\_\_\_\_

## Event Details

Please indicate whether the following items pertain to your event.

YES NO

Food Concession and/or Food Preparation

Please specify method: Propane Gas Electric Charcoal Catered Other: \_\_\_\_\_

First Aid Facility (ies) and Ambulance (s)

Banner(s) and/or Sign(s) – **requires prior approval**

Street Closure(s) - **list streets:** \_\_\_\_\_

Amplified Sound - *If yes please indicate Start Time \_\_\_\_\_ End Time \_\_\_\_\_*

*The Town of Lexington requires that noise levels not exceed 10 or more decibels above the ambient noise between 8:00 p.m. and 7:00 a.m. in a residential or commercial zone.*

Will your event have Fireworks?

Will your event have animals? **If yes, specify:** \_\_\_\_\_

Will your event require lights? **If so, specify hours:** \_\_\_\_\_

Will you set up table(s) and/or chair(s)? **Approximate number?** \_\_\_\_\_

Fencing, Barrier(s) and/or Barricade(s), Traffic Cones

Does your event require electricity? **Source:** \_\_\_\_\_

Booth(s), Exhibit(s), Display(s) and/or Enclosure(s)

Canopy (ies) and or Tent(s) - **describe dimensions:** \_\_\_\_\_

Scaffolding, Bleacher(s), Platform(s), Grandstand(s) or related structure(s)

Container(s) and/or Dumpster(s)

Toilet(s) – **approximate number/vendor:** \_\_\_\_\_

Will you be holding a raffle at your event? **Describe:** \_\_\_\_\_

Vehicle(s) and/or Trailer(s) - **approximate number:** \_\_\_\_\_

Sleeping Trailer(s) and/or other accommodations

Stage(s) - **indicate dimension:** \_\_\_\_\_

Entertainment - **describe:** \_\_\_\_\_

Amusement Rides - **list and describe:** \_\_\_\_\_

Inflatable Device(s) – **list and describe:** \_\_\_\_\_

## Other Permits

Please note that all components of the event are subject to approval by the Town Managers Office and may also require approval by and/or permit(s) from other Town agencies and departments. It is the responsibility of the applicant to secure all necessary Town of Lexington permits, and to submit and payment required for permits.

## Insurance Requirements

Evidence of Insurance will be required before final permit approval. Please provide a Certificate of insurance, which shows a minimum of \$1,000,000.00 in Commercial General Liability Insurance and a Policy Endorsement, which indemnifies and holds harmless the Town of Lexington, and all of its agencies and departments. Some events may require a higher limit of insurance. Permittee must list the aforementioned parties as additional insured on their Certificate of Insurance. Each event is evaluated on its risk exposure. Any and all damages resulting from the event are the responsibility of the permittee and the permittee will work through designated staff to determine the most appropriate means for repair. The Town of Lexington is not responsible for any accidents or damages to persons or property resulting from the issuance of this permit.

## Affidavit of Applicant

My signature below indicates that everything I have stated in this application is correct to the best of my knowledge. I have read, understand and agree to abide by the policies, rules and regulations of the Town of Lexington as they pertain to the requested usage. The permit, if granted is not transferable and is revocable at any time at the absolute discretion of the Town of Lexington Manager's Office (or designee). All programs and facilities of the Town of Lexington are open to all citizens regardless of race, sex, age, color, religion, national origin or disability.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

**The following is required by your organization to insure the safety and health of all participating in this event: *Note: You do not need to contact the departments below if it is not required.***

**YES   NO**

Police Detail - estimated cost-\$ \_\_\_\_\_ per/day. Days Required \_\_\_\_\_(Contact Police)

Comments:\_\_\_\_\_

Fire / Ambulance Detail – estimated cost - \$\_\_\_\_\_ per/day. Days Required \_\_\_\_\_(Contact Fire)

Comments:\_\_\_\_\_

Indoor Rain Space – All organizations must apply and pay fees through the Public Facilities Department

Field Lining - \$\_\_\_\_\_ per/field. Additional fee for layout \$\_\_\_\_\_ (Contact Department of Public Works)

Trash removal - \$\_\_\_\_\_ per/day. Days required \_\_\_\_\_ (Contact Department of Public Works)

Portable toilets - Number required \_\_\_\_\_

Extra waste containiers - \$20.00 per day. Days Required \_\_\_\_\_ (Contact Department of Public Works )

Temporary Food Permit - \$15.00 (non-licensed) or \$50.00 (Commercial) (Contact Health )

Raffle Permit/License - (Contact Town Clerk’s Office)

Field Permit - (Contact Recreation)

Center Complex Lights Permit - (Contact Recreation)

DPW –781-274-8300 \* Fire Dept.- 781-862-0272 \* Police Dept. - 781-862-1212 \* Health Dept. - 781-698-4533 \*

Town Clerks Office – 781-698-4550 \* Public Facilities Dept. – 781-274-8300 \* Recreation Dept. – 781-698-4800 \*