**Village of Suffern**

**61 Washington Avenue**

**Suffern, NY 10901**

**Phone: (845) 357-2600**

**Email Contact:** **clerk@suffernny.gov**

**APPLICANT INFORMATION:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EVENT SPONSOR NAME: City/State/Zip:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: City/State/Zip:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone: E-Mail Address:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EVENT COORDINATOR NAME: Cell Phone:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone: E-Mail Address:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Alternate Contact/Title: Cell Phone:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Insurance Carrier: Phone: Policy #: Exp. Date:**

**LOCATION ADDRESS, DATES, TIMES: (Note: A detailed letter of intent can be substituted as an attachment)**

**1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TRAFFIC:**

**Street Closure € Yes € No Lane Closures € Yes € No Intermittent Traffic € Yes € No**

**Banners/Signage € Yes € No**

**EQUIPMENT:**

**€ Stage/Sound Equipment € Generator\* € Crane**

**\*For an event requiring an electrical generator rated at 200 amps or more, the attached Electrical Generator Affidavit must be submitted 7 days in advance of event activities.**

**VEHICLES AND OTHER EQUIPMENT:**

**Trucks #\_\_\_\_\_\_\_ Motor Homes # \_\_\_\_\_\_\_\_ Vans #\_\_\_\_\_\_\_ Honey Wagon # \_\_\_\_\_\_\_\_**

**Cars #\_\_\_\_\_\_\_ Other Equipment # (Please List): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PERSONNEL:**

**€ Light/Sound Crew # \_\_\_\_\_\_\_\_\_ € Staff # \_\_\_\_\_\_\_\_\_ € Pyrotechnics Crew # \_\_\_\_\_\_\_\_\_**

**€ Other # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**€ Total Estimated Personnel # \_\_\_\_\_\_\_\_**

**Animals € Yes € No If yes, please describe \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SPECIAL EFFECTS:**

**€ Pyrotechnics € Stage € Stunts € Loud Noises € Other**

**If yes, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

PLEASE NOTE: IF PYROTECHNICS ARE USED, A LICENSED PYRO-TECHNICIAN IS REQUIRED TO BE ON SITE. A COPY OF THE CURRENT LICENSE MUST BE ATTACHED.

PLEASE NOTE: IF EVENT INCLUDES LOUD NOISES, APPLICANTS MUST NOTIFY IN WRITING ALL RESIDENTS AND BUSINESSES WITHIN 200 FEET WITHIN 7 WORKING DAYS PRIOR TO EVENT.

**CATERING FACILITIES AND VEHICLE PARKING REQUESTS**:

**(Catering facilities and additional parking are available upon request. If Village facilities are available on the dates requested, a quote for these services will be provided separately.)**

**Catering Facilities Are Requested € Yes € No**

**Additional Parking Is Requested € Yes € No**

**VILLAGE OF SUFFERN FEE GUIDELINE**:

**A. Reimbursement for Police, DPW, and other involved Village employees or agencies as per Mobilization Fee Guidelines if applicable.**

**B. Cost of the use of recreation buildings (as required).**

**C. Parking Permits (as required).**

**INSURANCE CERTIFICATE(S):**

**NO PERMIT SHALL BE ISSUED FOR EVENTS WITHIN THE VILLAGE OF SUFFERN UNLESS THE APPLICANT FOR SUCH PERMIT:**

1. PROVIDES PROOF OF INSURANCE COVERAGE AS FOLLOWS: GENERAL PUBLIC LIABILITY IN THE AMOUNT OF NOT LESS THAN $1,000,000 COMBINED SINGLE LIMIT; AUTOMOBILE LIABILITY COVER OWNED AND NON-OWNED VEHICLES IN THE AMOUNT OF NOT LESS THAN $2,000,000 COMBINED SINGLE LIMIT; AND WORKER’S COMPENSATION AND DISABILITY INSURANCE AS REQUIRED BY THE STATE OF NEW YORK.
	1. **Your company name must exactly match the insured name on your certificate of insurance (including LLC, Inc, Corp, etc.).**
	2. **It can take up to 48 business hours for your insurance to be validated. Certificates of insurance must be e-mailed to our office at clerk@suffernny.gov by your broker at least 48 business hours prior to your project.**
	3. **The Village of Suffern must be listed as additional insured on all insurance ~~certificates~~ policies pursuant to the agreement below and as a condition of the issuance of a permit herein. As proof of naming the Village as Additional Insured pursuant to an agreement, any insurance certificate must expressly show proof of such coverage.**
	4. **A Workers’ Compensation Certificate may be required based upon the activities outlined in this application. If a Workers’ Compensation Certificate is required you will be notified by the Village of Suffern.**

**PERMIT PROVISIONS**:

**Permittee waives all claims against the Village of Suffern (Village), its officers, agents and employees for loss or damage caused by, arising out of, or in any way connected with the exercise of this permit. As a condition of the issuance of a Permit, Permittee hereby agrees to indemnify, defend, and hold the Village, its authorized agents, officers, representatives and employees harmless from and against any and all losses, damages or claims, causes of action, costs, liabilities, penalties, judgement and expenses including, without limitation, defense costs and reasonable legal fees resulting from any and all claims or damage of any nature, including any accident, loss or damage to persons or property which the Village may incur and which arise from or relate to any activity conducted by permittee or any of its officers, agents, employees, representative, contractors, consultants, or students.**

**It is expressly agreed by the permittee that as a condition of the issuance of a permit and the permittees agreement to defend and indemnify the Village as set forth above, the permittee is required to name the Village of Suffern as an additional insured under the relevant insurance policies set forth above.**

**The Village shall have the privilege of inspection of the premises covered by this permit at any ~~or all~~ time. The Village may terminate this permit at any time if Permittee fails to perform any covenant herein contained at the time and in the manner provided. The Village agrees it will not unreasonably exercise this right of termination.**

**The parties hereto agree that the Permittee, its officers, agents and employees, in the performance of this permit, shall act in an independent capacity and not as officers, employees or agents of the Village.**

**No alteration or variation of the terms of this permit shall be valid unless made in writing and signed by the parties hereto.**

**Permittee shall not discriminate against any employee or applicant for employment because of race, color, religion, ancestry, sex, age, national origin, or physical handicap.**

**If Permittee is unable to hold the event on the scheduled date due to inclement weather, the Village must be notified in writing by the next business day in order to reassign permit to a rescheduled date.**

**The Village shall be compensated for any loss or damage to Village property by Permittee. Permittee agrees to clean and restore the property to its original condition prior to use as a location site.**

**Public use of Village Park facilities – No vehicle(s) allowed on park turf areas. All equipment must be transported via dolly or hand carried in and out of park facility. No temporary parking of vehicles(s) on park turf for loading or unloading equipment.**

**Permittee is responsible for fully complying with posted signage surrounding the requested site. The Village will not dismiss any citation issued to the Permittee or any person(s) associated with the event who are in violation of posted regulations.**

**Permittee hereby agrees to ensure compliance with the conditions of the permit and agrees to obtain prior Village approval for deviations from the information provided herein and understands that failure to comply with these requirements may result in the immediate cancellation of permit.**

**The undersigned acknowledges that the Village of Suffern shall not be liable at any time, and the undersigned agrees to assume all risks for any loss, damage or injuries whatsoever to the person or property of any person or entity whatsoever arising out of the above refenced processes, materials, or conditions which are implemented as part of the above referenced event.**

**Applicant’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

**APPROVALS:**

**POLICE DEPARTMENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**BUILDING DEPARTMENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DPW (If Applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**FIRE DEPARTMENT (If Applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**MAYOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**FOR VILLAGE USE ONLY - APPLICATION CHECK LIST:**

* **Completed and Signed Application**
* **Certificates of Insurance(s)**
* **Neighborhood/Business Notification (If Applicable)**
* **Completed Electrical Generator Affidavit (If Applicable)**
* **Current Pyro-Technician License (If Applicable).**

**Village of Suffern:**

**Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_ By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Office of the Village Clerk**

**Affix Seal of the Village of Suffern below to authorize permit:**

**SAMPLE**

**NEIGHBORHOOD/BUSINESS NOTIFICATION**

DATE

NAME

ADDRESS

Dear Neighbors/Businesses,

This letter is to inform you that on DAY/DATE, PRODUCTION COMPANY will be holding an event at locations in your area from approximately START TIME to FINISH TIME. “EVENT NAME” is sponsored by EVENT SPONSOR NAME.

In order to facilitate this event, we may need to park equipment and production vehicles beginning START TIME & DATE. The streets affected may include:

LIST STREETS WHERE EVENT WILL TAKE PLACE

We are aware of the inconvenience caused by our activity and apologize in advance. We will do everything possible to minimize the impact of our activities on your neighborhood. Please let us know of any special concerns (scheduled deliveries, construction, accessibility needs, etc.) within 5 business days of receipt of this notice by contacting our Event Coordinator. We will do everything possible to find a mutually agreeable solution.

We appreciate your cooperation in helping to make this event a success! Thank you in advance for your understanding and cooperation.

EVENT SPONSOR NAME:

EVENT COORDINATOR NAME:

PHONE NUMBER

ADDRESS

EMAIL ADDRESS

**VILLAGE OF SUFFERN**

**ELECTRICAL GENERATOR AFFIDAVIT**

**This document is a statement of intent to employ an electrical generator rated at 200 amps or more in the Village of Suffern. This generator shall be operated by a person who has been properly instructed in it’s safe use by the generator owner representative.**

**The generator attendant shall not perform any duties on the set while the generator is in operation except those involving generator setup, cabling, and lighting setup.**

|  |  |
| --- | --- |
| Date: | Generator Amperage Rating: |
| Event Sponsor: | Title: |
| Event Organizer/Coordinator: | Event Organizer/Coordinator Phone Number/Email |
| Name of Attendant: | Attendant Phone Number: |
| Generator Manufacturer, Owner Representative Name, Address, and Telephone Number: |
| Site Location: |

**Event Organizer**:

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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