

# Application for approval to hold an event in the City of Glens Falls

Office of the Mayor  
2nd Floor, City Hall, 42 Ridge Street, Glens Falls, NY 12801  
Phone: 518-761-3867 Fax: 518-761-0234

This form must be completed (both pages) and returned to the Mayor's Office at least **60 days** prior to your event. All requests must be approved first by the Board of Public Safety and/or the Recreation Commission, then by the Common Council. Please complete the form carefully. Additional information may be requested before your request will be considered.

**FEES: A \$200 refundable security deposit is required of all applicants for events in City parks and must be received by the Recreation Department at least 10 business days prior to the event. A use fee of \$250 will be assessed to all events that charge admission or otherwise collect money, or require participants to pay a fee, regardless of whether the host and/or sponsoring organization is a non-profit or for-profit group. Events that do not charge vendors or participants are eligible for a fee waiver. For events using city streets and/or sidewalks that request traffic assistance or other Police Department staffing, event organizers will be responsible to pay the cost of police manpower requested for the event. All fees must be paid 3 business days prior to an event.**

## Organization Information:

Organization Making Request: \_\_\_\_\_  
Address of Organization: \_\_\_\_\_  
Contact Name and Phone Number: \_\_\_\_\_  
FAX Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

## Event Information

Event Date Requested: \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_  
Anticipated Attendance: \_\_\_\_\_ per/day Has Event Been Held Before? \_\_\_\_\_ When? \_\_\_\_\_  
Event Type:  
 Run (race)  Bike (race)  Walk (non-race) Distance (5K, 3 mile...etc.) \_\_\_\_\_  
 Road Closure  Block Party  Festival  Concert  
 Fireworks (Requires Fire Works Permit from Fire Code Officer John Pagano, 761-3822)  
 Other (describe): \_\_\_\_\_  
Contact name(s) and telephone number(s) during event: \_\_\_\_\_

## Requested Venue for Event:

City Park  Crandall Park  Haviland's Cove  Cole's Woods  East Field  Other Park: \_\_\_\_\_  
 Fire Road Recreation Center  
 City streets and/or sidewalks (by street name) \_\_\_\_\_  
\_\_\_\_\_  
 Other (please describe) \_\_\_\_\_

Event Details: Please include anticipated need for traffic control, emergency medical services, sanitation plan, fire safety precautions and any special conditions that ought to be considered: (please use additional sheets if needed)

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Please provide a **schematic** or **map** if any public rights-of-way (streets, sidewalks or alleys) are being requested for use.

## Hold Harmless Agreement

Applicant agrees:

The City of Glens Falls, its agents, officers and employees, shall not be held liable for any claims, liabilities, penalties, fines or for any damage to any goods, properties or effects or any personal injuries to or death of any person, whether caused by or resulting from any acts or omission of owner or permittee, or his or her agents, employees or representatives, or for dangerous or defective conditions of the property of owner or permittee or are any way caused pursuant to this Special Event Permit Application permit; owner or permittee further agrees to indemnify and save free and harmless, and defend in any lawsuit the City of Glens Falls, its agents, officers, and employees, against any of the foregoing liabilities and of any and all costs and expenses incurred by the City of Glens Falls, its agents, officers and/or employees on account of any claims therefore.

## Statement of Understanding

I understand that a general liability insurance Certificate of Insurance naming the City of Glens Falls as an additional insured, with coverage of \$1,000,000 covering the day(s) of the event must be filed with the Mayor's Office no later than 15 days prior to the event. Failure to do so may terminate this agreement.

I further understand that this application constitutes a request and should not be construed as approval for the requested event. No approval is implied from this form's submission. Applicants will be informed of the status of this request following the meeting at which the Common Council considers this request. Notification will be by U.S. mail and/or e-mail using the addresses provided with this application.

I also agree to remove all items brought to and utilized during the event. All items will be removed immediately following the event and the venue will be left in a clean, litter-free condition.

I have read the Hold Harmless Agreement and the Statement of Understanding, as well as the other requirements stated in this application and I agree to comply with the requirements stated therein. I also agree to comply with any conditions of approval set forth as a result of the review of this application.

\_\_\_\_\_  
Applicant's signature

\_\_\_\_\_  
Date

\*\*\*\*\*For Office Use Only\*\*\*\*\*

Application received on: \_\_\_\_\_ Received by: \_\_\_\_\_

Approved: Public Safety: \_\_\_\_\_ Recreation Commission: \_\_\_\_\_ Common Council: \_\_\_\_\_  
Date Date Date

Certificate of Insurance Received: \_\_\_\_\_ Security Deposit Received \_\_\_\_\_

Notifications:  Applicant Date of notification \_\_\_\_\_  Police  Fire/EMS  DPW

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_