

TOWN OF PAWLING

The Pride of the Harlem Valley
Town Hall
160 Charles Colman Blvd.
Pawling, NY 12564
(845) 855-3244

Building & Zoning Administrator Stormwater Management Officer

Ken Clair, Jr. buildinginspector@pawling.org

Mary Porcaro buildingdepartment@pawling.org

SPECIAL EVENTS SCHEDULE OF FEES

NUMBER OF ATTENDEES	FEE – PER EVENT	NUMBER OF EVENTS	AMOUNT
Administration Fee	\$100.00		
125 AND UNDER	\$100.00		
126-500	\$250.00	~	
501-1,000	\$500.00		
INSPECTION	PER –	NUMBER OF	
FEES	INSPECTION	INSPECTIONS	
UP TO 125	\$125.00		
126-500	\$200.00		
500-1,000	\$1,000		
TOTAL DUE			

Please make a check payable to the Town of Pawling

Total amount du	e at the time of fil	ing an application: \$_	
Application Fee	\$		
Inspection Fee	\$		
FOR OFFICE USE ONLY:			
Applicants Name:)	
Address:			
City:		_ State:	Zip Code:
Email address:			



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JoAnne Daley jdaley@pawling.org

SPECIAL EVENT APPLICATION

DAT	E:
APPLI	CATIONS FOR SPECIAL EVENT PERMITS SHALL BE SUBMITTED AT LEAST 60 DAYS PRIOR TO THE EVENT.
1)	Applicant(s) Name:
	Address:
	Phone: Fax:
	Cell:
	Email Address: Contact person who will be organizing the event
	Name:
	Address:
	Phone:
	Number to contact during the event:
	Phone:
2)	Event Details Event Name:
	Event Location:
	A. Tax Map Designation:134089 -
	B. Zoning District
	C. Acreage D. Intersecting Streets:
	E. Restrictive Covenants or Easements affecting Premises:
Event l	Description:
Numbe	er of Events: List Dates Below:
2	
3.	5
Will an	admission fee be charged: (Yes) (No)
Is this	event Handicap Accessible: (Yes) (No)
Sales:_	None Goods and Services (describe)

Please attach a survey or sketch map/plan showing parking and event planning, including, without limitation, the assembly location, proposed location(s) for parking, outdoor areas proposed to be used, and the location of any tent(s) and stages, music & outdoor loudspeakers or PA system, food trucks, vendees and additional sanitary facilities to this application.

3) Name and	Address of Recor	d Property Owner	<u>(s):</u>		
Email Addr	ess:				
	on, name and addres			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
Phone: #		Fax: #			×
Cell: #	ess:				
* If more the	an one Owner, or a	Corporation, the na	mes, addresses, phone num submitted on an accompan	bers and email address o	of each owner,
the owner c	onsent section at the oner consent will be	e end of this applica come part of the app	ten consent of the actual protion or by providing a notar plication and the application of 1 is the property owner.	rized letter from the own	er separately.
please mark	ing Organization: N/A and skip to the spelationship to the sp	e next question.	ring organization, please an	swer the following ques	tions. If not,
Name of sp	onsoring organization				
		one number:			
5) Date, Ti	me and Scope:				
ate m/dd/yr	Start Time	End Time	Number of People Expected	Number of Vehicles	Number of Vehicle
* .	Include set up	Include shut down	Include Workers,	Expected On Property	Expected On Street (Public or Private)
	Indicate AM/PM	Indicate AM/PM	volunteers, staff, vendees, security etc.		(Public or Private)
1					

Please Note: If off-site parking is proposed, the location of such parking area(s) in the form of a survey or sketch map AND the traffic management plan for the parking of vehicles and transportation of cars or guests to and from the asser MUST be attached to this application. Expected maximum number of attendees: Please Note: Any event on property owned or controlled by the Town or any event where the anticipated attendance et 1,000 people require approval by resolution of a majority of the Town Board. If an event was held the previous year, what was the number of attendees: (Yes) (No). Name of person(s) who will be engaged in the preparation and/or sale of alcohol or beer: Name: Address: If more than one, add additional names on a separate sheet of paper and attached to the application: Submission of a copy of the State Liquor Authority license or permit for the event is required. 8) Food Service(s): Will food be served at the event: (Yes) (No). Name of person(s) who will be engage in preparation, vendee, caterers and/or sale of food. Name: (Yes) (No).	-			T		
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County Department of Health permits and/or vendee permits from the Town of Pawling, Town Clerks office must be	Email Address: Phone: # Email Address: Email Address: Phone: # Email Address:	ervice(s): e served at the event int have food trucks eson(s) who will be e	:(Y :(Y engage in preparation Fax#:	Yes) (No). Yes) (No). On, vendee, caterers and/or sa	ale of food.	

9) <u>Security and Valet Information</u>: If security is to be provided, please provide the following information. Name of Security, Valet Company or both if applicable:

site

Name:Address:
Address:Phone: #
Contact Person(s):
Attach the security duties and/or valet plan to this application.
10) Tents: If a tent(s) is (are) proposed, the size and placement of the tent on the premises must be included in the sketch survey map/plan attached to this application.
(Yes), tent will be utilized at the proposed special event, and it is understood that in addition to this application, separate application to, and a site inspection for approval by, the Building Department is required
(No), there will be no tents utilized at the proposed assembly/assemblies.
Proposed number and dimension of tents to be utilized:
Will propane tanks be used in the tents:(Yes)(No).
11) <u>Medical Emergencies:</u> Please provide the medical and emergency plans, along with personnel to provide such service Name and Address of Emergency Service Provider:
Please Note: Copies of any contract with an emergency service provider may be requested.
12) <u>Fireworks:</u> Will Fireworks be used at the event(Yes)(No). If yes, a separate firework's permit must be obtained from the Building Department.
13) Portable Toilets: Will Portable Toilets be provided for the event:(Yes)(No). If yes, placement of the portable toilets must be included in the sketch or survey map/plan attached to the application. Sanitation Facilities to provide for the event:(Yes)(No) If yes, locations of all facilities must be included in the sketch or survey map/plan attached to the application.
14) Music: The issuance of a special event permit does not allow deviation from the Code of the Town of Pawling Chapte \$215-35 established regulations for noise. Please select all options that are applicable to your event.
(Yes), music will be provided in the following manner(s): Indoor Outdoor Live Band DJ Other: Time, Duration and location(s) of Music:
(No), there will be no music provided at the proposed event/assemblies: Outdoor loudspeaker or PA system:(Yes)(No) f yes, provide a brief description:
f yes, placement of the musician/bands/ speakers etc must be included in the sketch or survey map/plan attached to the application.

Description of proposed outdoor lighting:	
Location of proposed outdoor lighting:	

15) <u>Lighting</u>: If additional outdoor lighting is proposed for the event, please complete the following:

Add to sketch or survey map/plan, if applicable.

16) Miscellaneous:

Every application for a special event permit pursuant to Code of the Town of Pawling, Chapter §215-44.2 shall include a certificate of insurance that evidence a general liability insurance policy and declaration page from the policy naming the Town of Pawling as additional insured with limits of \$2,000,000 per occurrence or such other limit as may be required by the Town Board for events where expected attendance exceeds 500 attendees.

By signing below, the owner(s) hereby certifies that to the best of his/her/their knowledge:

I have answered the foregoing questions to the best of my knowledge and belief and swear that the answers contained in this application are true and accurate.

If attendance is anticipated to exceed 125 people, written notification of this application has been sent to all neighbors required by Town Code Section 215-44.2-4 by certified mail, return receipt requested.

I understand that it is my responsibility to ensure that the patrons, licensees and/or invitees of the Special Event, or those engaged in conducting the same, do not trespass upon any adjoining property or premises.

I acknowledge that Chapter 215-44.2 of the Code of the Town of Pawling, entitled "Special Events" is the controlling legislation for the regulation of Special Events in the Town of Pawling, and that the issuance of a permit pursuant to this application requires compliance with all provisions and regulations within.

I further acknowledge that the issuance of a permit pursuant to this application is not a waiver for any activity prohibited by law, and as a condition of any permit issued, compliance with all provisions of the Code of the Town of Pawling, as well as applicable state and Federal Law is required. Further, by signing below, I hereby confirm that there are no restrictive covenants, easements or other restrictions preventing the use of the premises for the event proposed.

I hereby consent to the inspections of the premises by the Code Enforcement Office and/or Fire Marshal, or other Enforcement Officer, upon request, for the purpose of ensuring that the terms and conditions of the permit are met.

I also hereby agree to indemnify and hold harmless the Town of Pawling, its officials, employees, agents, and other person from and against all claims, cost, judgements, liens, encumbrances, and expenses, including reasonable attorney fees arising out of the acts or omissions or negligence of the applicant, its agents, employees, or subcontractor, in connection with this application and any permit or gathering related to their application.

Owner	Owner	
Notary	Notary	
Owner	Owner	
Notary	Notary	

This Page is for Office Use Only:	
Date:	
Application number:	
Application Fee:	Inspection Fee
Check box: □ One Time event □ Si Dates of series of events: List below:	x events in a three month period. Other: # of events
Reviewed and signed by Code Enforcen	nent Officer Data