## **LOWER SAUCON TOWNSHIP EVENT APPLICATION**

1.	Type of organization:  Non-Profit (tax exempt)  Not-for-Profit  Commercial/Private  Other			
2.	Sponsoring organization			
3.	Name of Chief Officer of organization			
4.	Name of Applicant/Event Coordinator  a. Address  b. Home phone ()  c. Cell phone number ()  d. Fax number  e. E-mail address			
5.	Type of event: (Choose one)  run/walk; bike tour/bike race; concert; parade; sporting event; fair/festival; campout craft show wedding ceremony/pictures other			
6. 7. 8.	Event title  Event dates  Purpose of Event			
9. 10. 11. 12.	Location of event  Set-up dates & times  Breakdown dates & times  Hours of event			
13. 14. 15. 16. 17. 18. 19. 20. 21.	Estimated number of people participating  Estimated number of spectators  Estimated number of parking spaces needed  Will you require road closure?			
26. 27.	Number of portable toilets needed (1 for every 200 people)  Number of ADA portable toilets needed (10% of total portable toilets)			
28.	Describe your waste management and clean-up plan			
29.	On map of park, show where the following will be located:			

- Location and # of first aid facilities and ambulance location a.
- Location and # of any fences and barriers that will be used Location and # of any generators that will be used b.
- C.

- d. Location and # of canopies and tents that will be used
- e. Location and # of any booths, exhibits, displays or enclosures that will be used
- f. Location and # of any vehicles and/or trailers that will be used
- e. Location and # of any scaffolding, bleachers, platforms, stages, grandstands and other structures that will be used
- f. Location and # of other related event components not covered above

30.	D. Please describe your procedures for crowd control and internal security					
31.	Please describe your accessibility plan for persons with disabilities					
32.	Please describe your arrangements for first aid staffing and equipment					
33.	Please describe your plan for handicapped accessible parking  Will musical entertainment be provided at the event? Yes No Will amplified sound be used? Yes No Will sound checks be conducted prior to the event? Yes No Will any inflatables, hot air balloons or similar devices be used? Yes No Will any signs, banners, decorations or special lighting be used? Yes No Will any fireworks, rockets, or other pyrotechnics be on site? Yes No					
34.						
35. 36. 37. 38. 39. 40.						
Date		Signature				
		OFFICE USE ONLY				
	Distribution  □ Public Works □ Police Dept. □ Zoning □ Fire/EMC	Action  Approved by P & R Board  Approved by Township Council				
	<u>FEI</u>	E/SECURITY DEPOSIT/INSURANCE REQUIRED	Rec'd			
•	A refundable \$250 security/damage Insurance a. Individual – proof of insurance b. Individual with Outside Vendaless than \$1,000,000 combined. c. Business Use – proof of insurance	of \$25 must be included with this application ge deposit is required for all events  where with minimum \$100,000 liability coverage for(s) – proof of insurance with comprehensive general liability coverage not sed single limit france with comprehensive general liability coverage or Named Operation and 1,000,000 combined single limit				
•	Release and Waiver					

## **INDEMNITY AND HOLD HARMLESS AGREEMENT**

(USER), in c	onsideration of the permission granted to it to utilize
SAUCON TOWNSHIP (TOWNSHIP) and their off indemnified parties), from any and all claims, lial proceedings of any kind or nature, losses or dam which the indemnified parties may incur arising out	by agrees to indemnify and hold harmless LOWER icers, employees, agents or instrumentalities (the pilities, injuries, demands, suits, causes of action or ages including attorney's fees and costs of defense, at of the negligence, error, omission, intentional acts, the use of the Township facilities by the USER, its associated with the USER.
	cifically includes claims, liabilities, injuries, demands, sing from the negligent acts or omissions of the
defend all claims, suits, or actions of any kind or na	n with all of the foregoing and shall investigate and ature, including appellate proceedings in the name of costs, judgments, and attorney's fees which may issue
	nt and its underlying obligations shall be construed in he for any action brought hereunder shall lie in the ennsylvania.
	ny of its employees, volunteers, guests, invitees or to be employees, agents, guests, or invitees of the
l,,	being the of
	(USER), hereby warrant and represent that I have
read and understand this agreement and that	I have full legal authorization to enter into this
Agreement.	
Date	Signature
	Print Name