



PUBLIC GATHERING PERMIT APPLICATION

A Public Gathering Permit (PGP) is required when an outdoor publicly accessible gathering or event of fifty (50) or more people on Town of Cheshire property is to occur. The intent of this permit process is to ensure all relevant Town Departments are informed of and prepared for larger events in the community. The goal is to protect community assets and facilities; provide for appropriate public safety measures; and to give event-organizers confidence that necessary steps have been taken to provide for a successful community event. This permit application is not required for private pavilion or indoor facility/room rentals or for events occurring entirely on Cheshire Public Schools property.

This Application must be completed in full, including original signatures, before submitting to the Planning & zoning Department. The application must be received in the Planning & Zoning office at least **6 WEEKS** prior to the date of the proposed event. The Town Manager has the final authority to approve or deny public gathering permit applications. The Town reserves the right to cancel an event that does not obtain complete approval and the right to cancel an event if incomplete or inaccurate information is provided. A public gathering of 50 or more people on Town property without a permit is prohibited.

Organization's Name: _____

Applicant's Name: _____

Mailing Address: _____

Phone: _____ Email: _____

Event Location: _____

Exact Date(s) of proposed Public Gathering: (MUST include all required "set up" and "tear down" time, as well as the actual dates of the Public Gathering.)

Exact Time(s)/Date Begin: _____ End: _____

Number of people expected to be present for the event (incl. staff, volunteers, attendees): _____

- *The Town of Cheshire reserves the right to limit the number of attendees. The maximum number of permitted attendees will be determined after consultation with the Town of Cheshire.*

A Certificate of Insurance issued to the Applicant AND Town of Cheshire as an Additional Insured, evidencing comprehensive general liability insurance coverage of at least \$1,000,000 per occurrence in force for the duration of the event must be submitted with this application. This Certificate of Insurance must include an indemnification, defense and hold harmless provision for the benefit of the Town.

TOWN OF CHESHIRE USE ONLY:

Fee Received (TBD):	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>
Insurance Received:	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>
Request Approved:	YES <input type="checkbox"/>	NO <input type="checkbox"/>	MORE INFO: _____

Signature: _____ Date: _____

Please indicate whether you will be bringing:

Additional trash and recycling receptacles: YES NO NUMBER: _____

- *You are responsible for proper collection and removal of all waste generated by your event.*

Portable toilets: YES NO NUMBER: _____

- *If yes, please show locations on attached site plan.*

Tent: YES NO SIZE: _____
OPEN SIDES ENCLOSED

- *Tents must be in compliance with State of Connecticut tent regulations. The Town of Cheshire's Building Official or Fire Marshal can advise on tent requirements.*

Lighting and/or sound equipment: YES NO

- *If yes, please attach a list of the equipment you plan to use along with a stage plot with locations for the equipment.*
- *Lighting must meet the requirements of the Town of Cheshire's Fire Marshal.*

Does your event require electrical access? YES NO

- *If so, a plan for electrical access will need to be reviewed with the Town of Cheshire Building Official or Fire Marshal.*

Will food be sold or given away at your event? YES NO

- *If food is to be served, whether prepared on- or off-site, you must obtain a Temporary Food Permit from the Chesprocott Health District (<http://www.chesprocott.org/>).*

Will alcohol be served at your event? YES NO

- *If alcohol is to be served, you must obtain all pertinent State permits and abide by all Town and State laws and regulations. An additional list of policies applies if alcohol is to be served.*

Will road closure(s) be necessary? YES NO

- *Details of proposed traffic circulation and closings must be presented to the Chief of Police prior to his signing of the PGP application. If State roads are proposed for closing, a permit from the CT DOT may be necessary.*

PLANNING DEPARTMENT

84 South Main Street Cheshire, CT 06410

203-271-6670

Alcohol

- Does your event require a Special Exception? YES NO
- Has the Zoning Commission approved a S.E.? YES NO
- Have you obtained a State of CT liquor license? YES NO

Signage

- Will your event require temporary signs? YES NO
 - No signage may be erected without written permission granted from the Zoning Enforcement Officer
- Has your organization secured permits for such? YES NO

Attachments:

Site Map

- The site plan/map of the proposed Public Gathering should be to-scale and show exactly:
 - Layout of the Event (tents, booths/vendors, rides, aisles, etc.)
 - Location of Lighting
 - Parking Layout

CHESPROCOTT HEALTH DISTRICT

1220 Waterbury Rd, Cheshire, CT 06410

www.chesprocott.org

203-272-2761

If food will be prepared or dispensed at your event, you must obtain a Temporary Food Permit from Chesprocott Health District.

Has a Temporary Food Permit been secured? YES NO

Application can be found here: <http://www.chesprocott.org/licensures-forms/food-service/>

Will food trucks be present? YES NO

BUILDING DEPARTMENT

84 South Main Street, CHESHIRE, CT 06410

203-271-6640

Tent:

YES NO CAPACITY: _____
OPEN SIDES ENCLOSED
SQUARE FOOTAGE: _____

- Tents may require a Building Permit, depending on square footage, capacity, enclosure (or not), and if there will be heat and/or electrical. You should contact the Building Official to determine if a permit will be necessary.

Does your event require electrical access? YES NO

- Will you be utilizing portable generators? YES NO

POLICE DEPARTMENT

500 HIGHLAND AVENUE, CHESHIRE, CT 06410

203-271-5500

Is this event a concert and/or festival? YES NO

If yes, please list recent prior venues that have hosted this concert/festival:

Will on-site private security be provided? YES NO NUMBER: _____

Will on-site emergency medical services be provided? YES NO NUMBER: _____

- Where will they be located? _____

Will there be any athletic competitions or other activity/activities that could increase the likelihood of injury or illness? YES NO

Will the attendance be equal to or greater than 250? YES NO NUMBER: _____

Attendance will be:

STAGGERED OVER COURSE OF EVENT AT A SPECIFIC TIME TIME: _____

By completing this permit you acknowledge that the Town, at its sole discretion, may require you to hire additional police officers to ensure public safety for your event. You must check here to acknowledge: Yes (Required)

PARKS & RECREATION

559 S. Main Street, CHESHIRE, CT 06410

203--272-2743

Are you serving food? YES NO

- If so, trash recycling barrels are required at Permittee's expense

Will you require any special field lining or set up? YES NO

Do you intend to use "staked" tents on fields? YES NO

Will field lighting be necessary? YES NO

Have you provided a parking plan on your site map? YES NO

Portable toilets must be provided at the rate of 1 toilet per 50 patrons, at the Permittee's expense.

- ATTENDANCE: _____ / 50 = _____ PORTABLE TOILETS REQUIRED

**Public Gathering Permit
Required Declaration**

I declare that the information provided on this application is true and correct. I understand that if the information I have provided is inaccurate, or that if the actual event varies from the information provided herein, the permit will be revoked. I acknowledge that the Applicant is obligated to comply with all applicable federal, state and local laws and to indemnify, defend and hold the Town of Cheshire harmless from and against any claims, losses, actions, proceedings, demands, costs, expenses, damages and injuries arising out of or related to the Event for which a permit is granted.

Applicant's Name (Printed): _____

Applicant's Signature: _____

**REQUIRED SIGN OFFS
(in order required)**

	<u>Received Date:</u>	<u>Received By:</u>	<u>Approved By:</u>	<u>Action Date:</u>
Town Planner				
Recreation Director				
Building Official				
Police Chief				
Fire Chief/EMD				
Public Works Director				
Chesprocott Health Director				
Fire Marshal				
Zoning Enforcement Officer				
Town Manager				