

APPLICATION FOR PUBLIC GATHERING PERMIT

The undersigned hereby applies for a Public Gathering Permit and in connection with this application provides the following information:

PERSONAL INFORMATION:

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

Permanent Address: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Telephone Number: \_\_\_\_ (     ) \_\_\_\_\_

Interest in Proposed Site: \_\_\_\_\_

Name of Promoter/Sponsor of Gathering: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_ (     ) \_\_\_\_\_

Address of Proposed Site: \_\_\_\_\_

Nature or Purpose of Gathering: \_\_\_\_\_

Dates and Hours of Operation of the Gathering: \_\_\_\_\_

Alternate Dates and Hours of the Gathering: \_\_\_\_\_

Maximum Numbers of Persons to Attend Gathering at Any One Time: \_\_\_\_\_

Maximum Number of Persons Allowed to Sleep at Location of Gathering (If applicable): \_\_\_\_\_

Description of Plan to Limit Maximum Number of People Permitted to Attend Gathering: \_\_\_\_\_

Describe Plans for Fencing Location of Gathering/Include Location of Gates: \_\_\_\_\_

Describe Plans for Supplying Portable Water, Including Amount Available and Outlets: \_\_\_\_\_

Describe Plans for Providing Toilet and Lavatory Facilities Including Source, Number, Location, Type and Means of Disposing Waste: \_\_\_\_\_

Describe Plans for Parking Vehicles Including Size and Location of Lots, Point of Highway Access and Interior Roads Between Highway Access and Parking Lots: \_\_\_\_\_

Plans for Camping Facilities, if any, Including Facilities Available and Location: \_\_\_\_\_

If Applicant is a Corporation, attach a certified copy of Articles of Incorporation together with name, age, residence and mailing address of each person with 10% or more of stock of corporation.

Attach proof of ownership on which Assembly is to be held or statement made upon oath or affirmation by record owner of property that Applicant has permission to use such property for gathering of 500 or more persons.

Attach bond or proof of insurance policy naming Town of Fulton as an insured (if required)

Will Applicant apply for Temporary Fermented Malt Beverage License in connection with the gathering?  
\_\_\_\_\_ Yes \_\_\_\_\_ No

If a maximum exceeding 1,000 person will be in attendance at one time, attach proof that emergency services have been contracted for.

Applicant's Verification of Information:

I hereby certify that the statements above are true and correct to the best of my information.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

---

TOWN OF FULTON ONLY

Filing Fee Paid: \_\_\_\_\_ Yes \_\_\_\_\_ No

PERMIT

Permit Granted: \_\_\_\_\_ Yes \_\_\_\_\_ No

CONDITIONS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PROOF OF INSURANCE AND/OR BOND

Filed (if required): \_\_\_\_\_ Yes \_\_\_\_\_ No

PROOF OF CONTRACTING FOR EMERGENCY SERVICES

Filed: \_\_\_\_\_ Yes \_\_\_\_\_ No

---

TOWN OF FULTON:

\_\_\_\_\_  
Chairman Evan Sayre

ATTEST:

\_\_\_\_\_  
Laura Siclovan, Clerk/Treasurer