



CITY OF JOHNSTOWN
 Office of the City Clerk
 PO Box 160, 33-41 East Main Street
 Johnstown, New York 12095
 (518) 736-4011

- OFFICE USE ONLY -	
Date: ____/____/____	Permit #: _____, 2023
Deposit Paid: <input type="checkbox"/> yes <input type="checkbox"/> no	Insurance provided: <input type="checkbox"/> yes <input type="checkbox"/> no
Signature: _____	
Deposit Refunded: ____/____/____	

EVENT / CITY PROPERTY USE APPLICATION / PERMIT

Applicant must complete and provide all supporting documents AT LEAST 36 HOURS prior to the date of event. If requesting street closure, the application must be submitted at least 2 (two) weeks prior to the date of event. Failure to provide required information or adhere to timelines will result in a delay of approval and / or denial of your Permit.

REQUIRED TO PROCESS APPLICATION	1. A \$100 Security Deposit, made payable to the City of Johnstown. The organization and/or individual will assume the responsibility of all clean-up of the area within 24 hours of such performance/event. Your deposit will be returned at the end of event if no damages are incurred.								
	2. Proof of insurance naming City of Johnstown as additional insured, with the following limits:								
	<table border="0"> <tr> <td style="text-align: center;"><u>Standard insurance requirements</u></td> <td style="text-align: center;"><u>If using the Bandshell / Park insurance requirements</u></td> </tr> <tr> <td>Bodily injury per person.....\$ 50,000.00</td> <td>Bodily Injury, per person.....\$250,000.00</td> </tr> <tr> <td>Bodily injury per occurrence.....\$100,000.00</td> <td>Bodily Injury, per occurrence.....\$500,000.00</td> </tr> <tr> <td>Property damage.....\$ 25,000.00</td> <td>Property Damage.....\$300,000.00</td> </tr> </table>	<u>Standard insurance requirements</u>	<u>If using the Bandshell / Park insurance requirements</u>	Bodily injury per person.....\$ 50,000.00	Bodily Injury, per person.....\$250,000.00	Bodily injury per occurrence.....\$100,000.00	Bodily Injury, per occurrence.....\$500,000.00	Property damage.....\$ 25,000.00	Property Damage.....\$300,000.00
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3. Submit a map and narrative that explains your event; the specific times and locations for all requested street closings; all planned uses of public utilities, parking lot usage, banners or decorations; garbage clean-up plans; and, whether or not any use of amplified sound is planned.									
4. Submit copies materials that will advertise the event. The organizer is responsible for ensuring that all advertising of event are removed from public facilities. Failure to comply may impact approvals for future applications.									
5. Notify residents and businesses immediately affected of any street closure or event.									
Dated: ____/____/____	_____								
	Applicant Signature								

APPLICANT	Group / Organization: _____	Phone: _____
	Contact Person _____	Email _____
	Address _____	State _____ Zip _____

EVENT INFORMATION	• Name and type of event: _____
	• Location: _____
	• Requested Date(s) of Event: _____
	• Time of Event: ____:____am/pm to ____:____am/pm
	• Will fundraising take place? YES <input type="checkbox"/> NO <input type="checkbox"/> Describe: _____
	• Will there be Vendors? YES <input type="checkbox"/> NO <input type="checkbox"/> (Vendors must apply for a permit from the City Clerk’s office, pay applicable vendor’s fee and provide insurance information as required. Applicants have the option to pay a Blanket Fee of \$50 to cover vendors for their event; permit must be completed).

*****ALL SECTIONS MUST BE COMPLETED*****

FAILURE TO COMPLETE THIS SECTION, IN ITS ENTIRETY, WILL RESULT IN A DELAY OF APPROVAL AND / OR DENIAL. A PERMIT WILL NOT BE ISSUED UNTIL APPROVED BY ALL DEPARTMENTS.

DEPARTMENT APPROVAL

DEPARTMENT OF PUBLIC WORKS

- Street closure by the Department of Public Works? YES NO ____:____am/pm - ____:____am/pm
If street(s) closure is requested, you must provide a clear 8 ½ x 11 sketch or map showing the street names, directions and the location(s) of barricades you are requesting.
- If using the Bandshell or Park, will you require electricity? YES NO
- Department of Public Works vehicles? For example “touch the truck” events? YES NO Specify vehicles requested and reason: _____

City Engineer Approval

POLICE DEPARTMENT

- Traffic control by the Johnstown Police Department? YES NO Specify as to what you are requesting. The placement of officers, how many officers requested, time in which you are requesting law enforcement presence, etc.

- Will firearms or weapons of any kind be used or displayed at this event? YES NO Specify in detail:

- Police Department vehicles? For example “touch the truck” events? YES NO Specify vehicles requested and reason: _____

Chief of Police Approval

FIRE DEPARTMENT

- Will the Fire Department be needed on site for fire safety purposes? YES NO If yes, state reason in detail:

- Will there be any use or display of explosives, fireworks or any other flammable items at this event? YES NO Specify in detail: _____
- Fire Department vehicles? For example “touch the truck” events? YES NO Specify vehicles requested and reason: _____

Fire Chief Approval