



**CITY OF JOHNSTOWN**  
 Office of the City Clerk  
 PO Box 160, 33-41 East Main Street  
 Johnstown, New York 12095  
 (518) 736-4014

- OFFICE USE ONLY -

Approved: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Permit # \_\_\_\_\_, 2020

## EVENT / CITY USE APPLICATION / PERMIT

**Applicants MUST fill out this application and all supporting materials AT LEAST 36 HOURS prior to the date of the event.**

### APPLICANT INFORMATION

Name of Group / Organization: \_\_\_\_\_

Name of Event: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

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

### EVENT INFORMATION

- Requested Date(s) of Event: \_\_\_\_\_ :\_\_am/pm to \_\_\_\_\_:\_\_am/pm
- Will fundraising take place? YES  NO   
 If yes, describe the nature of the fundraising activities: \_\_\_\_\_
- Will there be any use of weapons or explosive devices, including fireworks, used or displayed at this event? YES  NO   
 If yes, name of company \_\_\_\_\_  
 \*a certificate of company's liability insurance naming the City of Johnstown as additional insured must be provided
- If using the Bandshell or Park, will you require electricity? YES  NO
- Will there be Vendors? YES  NO   
 \*If yes, Vendors must apply for a permit from the City Clerk's office, pay applicable vendor's fee and provide insurance information as required.

### STREET CLOSURE / PARADE

Will the following be requested?

- Street closure by the Department of Public Works? YES  NO  \_\_\_\_\_:\_\_am/pm to \_\_\_\_\_:\_\_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 places barricades might be placed.
- Traffic control by the Johnstown Police Department? YES  NO

**NOTICE TO ALL APPLICANTS: Permit will not be issued until the following is provided.**

1. Submit a narrative that explains the purpose of the event; the specific times and locations for all requested street closings; all planned uses of public utilities, banners or decorations; garbage clean-up plans; and, whether or not any use of amplified sound is planned.
2. Submit a map outlining the event location and all street and/or parking lot closings.
3. Submit copies of flyers, posters, or other materials that will advertise the event. The organizer is responsible for ensuring that all flyers, posters, etc. advertising the event are removed from public facilities. Failure to comply may impact approvals for future applications.
4. Notify residents and businesses immediately affected by street closure/event.
5. Provide proof of insurance naming the City of Johnstown as additional insured, with the following limits:
  - Bodily injury per person.....\$ 50,000.00
  - Bodily injury per occurrence.....\$100,000.00
  - Property damage.....\$ 25,000.00

If using the Bandshell or Park the following limits are required:

  - Bodily Injury, per person.....\$250,000.00
  - Bodily Injury, per occurrence.....\$500,000.00
  - Property Damage.....\$300,000.00
6. The organization and/or individual will assume the responsibility of all clean-up of the area within 24 hours of such performance/event; a \$100 security deposit may be required (deposit will be returned, via a City of Johnstown check, at the end of event if no damages are incurred).

Dated: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_ Applicant Signature



<b>PERMIT APPROVAL - OFFICE USE ONLY</b>	
Fee paid: \$ _____	Insurance provided: Yes <input type="checkbox"/> No <input type="checkbox"/>
Receipt #: _____	Deposit Paid: Yes <input type="checkbox"/> No <input type="checkbox"/>
Permit issued: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Comments / Conditions: _____	
Copy sent to: <input type="checkbox"/> Police <input type="checkbox"/> Fire / Codes <input type="checkbox"/> Department of Public Works	
Clerk's Office: _____	Dated: _____
Deposit Refunded: Yes <input type="checkbox"/> No <input type="checkbox"/> ____/____/____	