

Town of Naples
OUTDOOR ENTERTAINMENT APPLICATION

EVENT

Event Name:

Summer Entertainment

Event Description:

5 Events to 00:00
Friday and Saturday 23:00 pm

SPONSORING ORGANIZATION INFORMATION

Legal Business Name:

Guy's OLDE Towne Tavern

Mailing Address:

678 Roosevelt Trail

City:

Naples

State/Zip:

ME 04055

Phone:

(781) 424-4087

Email:

gskellett@yahoo.com

CONTACT PERSON - DAY OF EVENT

Name:

Gary Skellett

Mailing Address:

Same

City:

State/Zip:

Phone:

Email:

TYPE OF EVENT

<input type="checkbox"/> Town Department Event	<input type="checkbox"/> Political or Ballot Issue Event	<input type="checkbox"/> Road Race
<input type="checkbox"/> Non-Profit Event	<input type="checkbox"/> Sporting Event	<input type="checkbox"/> Neighborhood/Block Party
<input type="checkbox"/> For-Profit Event	<input type="checkbox"/> Video or Film Production	<input type="checkbox"/> Auto/Boat Show
<input checked="" type="checkbox"/> Other (Describe) <u>Summer Entertainment</u>		

EVENT INFORMATION

Event Location: 678 Roosevelt Tral

Event Date(s): 6/15/19 - 9/1/19 Event Hours: Fri and Sat till 23:00

Date/Time for Set-Up: —

Date/Time for Clean-Up: —

Describe clean up plan: —

Estimated Attendance (per day of event): —

Describe crowd control measures: Fenced yard

Describe the event's potential impacts to abutters: Music till 23:00 on Friday and Saturday

Will the event take place on Municipal Property? Yes No

If yes, please check off all event locations: Gym Singer Center Board Room
 Village Green Baseball Field Softball Field Town Docks

SOUND/MUSIC BROADCASTING/AMPLIFICATION

Will an amplified system(s) be used to broadcast voice or music? Yes No

Will amplification be limited to indoors or outdoors? Indoor Only Outdoor Only Both

Describe the amplification activity: Live Performance Recorded Playback/DJ Loudspeakers

If other, please describe: —

Time amplification will be used (beginning to end time): 20:00 to 23:00

Proposed location of amplification(s): 678 Roosevelt

Describe noise control and potential impact to abutters: Trees soundproof stage

RIGHT OF WAY USE / PARKING

Will street closures be necessary? Yes No

If Yes, please attach a map (tax map, Google map) that shows all closures.

Street(s) to be closed (date, time & duration): _____

Will parking lot closures be necessary? Yes No

If Yes, please attach a map (tax map, Google map) that shows all closures.

Parking lot(s) to be closed (date, time & duration): _____

What arrangements have been made to accommodate the loss of parking? _____

Will there be offsite parking locations? Yes No

If Yes, please attach a map (tax map, Google map) that shows all available locations.

If Yes, will there be a fee for parking? No Yes Fee \$ _____

Will there be shuttles provide to offsite parking locations Yes No *n/o*

If Yes, will there be a fee for use of shuttle? No Yes Fee \$ _____

How will handicapped parking be handled/identified? _____

CONSTRUCTION OF STRUCTURES

Will any of the following be used during the event?

No stakes of any kind are to be used in right of way pavement or municipally owned paved parking areas.

<u>Item</u>	<u>Quantity</u>	<u>Item</u>	<u>Quantity</u>
<input type="checkbox"/> Booths	_____	<input checked="" type="checkbox"/> Stages	_____
<input type="checkbox"/> Tents	_____	<input type="checkbox"/> Awnings	_____
<input type="checkbox"/> Canopies	_____	<input checked="" type="checkbox"/> Tables	_____

A layout plan must be provided to include the locations of proposed structures.

GARBAGE / SANITATION

Describe the plan for garbage control and disposal: onsite dumpsters

Will dumpsters be brought in for this event? No Yes How Many? _____

The Town of Naples requires that the number of portable toilets for the event be calculated using the chart below.

Attendees	Length of Event (Hours)									
	1	2	3	4	5	6	7	8	9	10
50	1	1	1	1	2	2	2	2	2	2
100	2	2	2	2	3	3	3	3	3	4
250	2	2	3	3	3	3	4	4	6	6
500	3	4	5	5	5	6	6	7	7	8
1,000	5	7	8	8	9	9	10	10	12	12
2,000	8	13	15	17	18	19	19	19	20	20
3,000	12	19	23	25	28	28	28	30	30	30
4,000	16	24	30	34	36	38	38	38	38	38
5,000	19	32	38	42	44	46	46	48	48	48
6,000	23	38	46	50	54	57	57	60	60	60
7,000	28	42	54	60	63	66	66	66	66	66
8,000	32	48	60	66	72	72	75	78	78	78
10,000	38	60	75	84	88	92	96	96	96	100

Based on your anticipated attendance, how many units will you be supplying? # _____
A layout plan must be provided to include the locations of proposed structures.

SIGNAGE

Do you plan to have any special events signs? Yes No

Describe signs and proposed locations: 

Signs must conform to the Town of Naples Sign Ordinance.

AMUSEMENTS / VENDORS / LIQUOR SERVICE

Will the event have amusement rides, inflatables, climbing wall, dunk tank, live animals, etc.?

No Yes If Yes, describe in detail the types of attractions proposed: _____

If Yes, additional insurance listing the Town of Naples as additionally insured will be required.

Will there be food, beverages, concessions, or mobile vendors? No Yes

If Yes, describe in detail the types of attractions proposed: Pub food

If Yes, proper health department approvals and necessary state and local permits must be obtained. Please list non-local vendors approved to participate in this event

Will there be any fireworks or pyrotechnics at this event? No Yes

The Town of Naples requires that fire department personnel and apparatus be on scene anytime any pyrotechnics are to be used, and the expense to be covered by the event coordinator. Please refer the Public Safety section of this application for the fees required.

Will alcohol be served at this event? No Yes

If Yes, describe in detail the proposed locations: Bar

If yes, Liquor Liability Insurance is required. Location must be identified on event layout plan and describe measures to prohibit sale of alcohol to minors or visibly impaired individuals.

If alcohol is to be served in more than one location, please list those locations by the business name, property owner's name and contact information and confirmation that the establishment has obtained the proper local and State licensure for service.

Business Name	Owners Name	Owner's Contact Number	Confirmation of Proper Licensure
Gary's Old Time Tavern	Gary Skellett	(781) 424-4087	<input checked="" type="checkbox"/>

Please attach additional sheet if necessary.

PUBLIC SAFETY

Any event with more than 1,000 attendees, or an event that is deemed by the Planning Board to have the potential for public safety risk, will require public safety presence at the event for the duration of the event open to the public, at the expense of the event coordinator.

The following is personnel and apparatus staffing requirements and the fee schedule for public safety coverage:

Contracted Personnel Required – Police or Security Services *N/A*

Attendees	Impacted Hours				
	4	8	12	16	24
1,000	2	2	2	2	2
3,000	3	4	6	6	6
6,000	10	10	12	14	14
10,000	16	16	16	18	18

Contracted Personnel Required - Fire Services*
 One fire apparatus is required per four (4) personnel *N/A*

Attendees	Impacted Hours				
	4	8	12	16	24
1,000	0 / *2	0 / *2	0 / *2	0 / *2	0 / *2
3,000	0 / *2	0 / *2	0 / *2	0 / *2	0 / *2
6,000	2 / *4	2 / *4	2 / *4	2 / *4	2 / *4
10,000	4 / *8	4 / *8	4 / *8	4 / *8	4 / *8

* If pyrotechnics or open fires will be present

Contracted Personnel Required - Emergency Medical Services*
 One Ambulance always required on scene – Second Ambulance required to stand by on scene for any event greater than 3,000 or longer than 8 hours *N/A*

Attendees	Impacted Hours				
	4	8	12	16	24
1,000	2	2	2	2	2
3,000	3	4	4	4	4
6,000	6	6	6	6	6
10,000	7	7	7	7	7

* Anticipated temperatures greater than 85°F for outdoor events shall necessitate doubling the number of personnel required

** Any event having special hazards (i.e. mosh pits) shall require additional personnel at one and a half times the indicated number in Table.

Public Safety Fee Schedule

Sheriff's Department

Contact the Cumberland County Sheriff's Office for imposed fees.

Emergency Medical Services

Minimum of Two Personnel- \$30.00 each / per hour
1 Ambulance - \$75.00 / hour

Fire Apparatus with Staffing (if applicable for fireworks)

Minimum of Four Personnel - \$30.00 each / per hour
1 Fire Truck - \$125.00 / hour

Marine Safety

Each Staff - \$30.00
1 Boat - \$50.00 / hour

APPLICATION CHECK LIST

- Application Completed
- Event Map Attached (*Including all details as required by the application*)
- Detailed Plans Attached (*As required by the application*)
- Certificates of Insurance – *To Cover the Event Dates, Naming the Town as Additionally Insured*
- Event Signage Plan Attached

If any document is missing with this application, please explain: _____

APPLICATION AGREEMENT AND AUTHORIZED SIGNATURE(S)

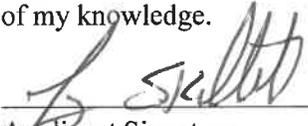
Please complete this application and return it, along with all the required documentation, to the Naples Town Office at least 60 days prior to the starting date of the event. Please note that a new application must be submitted for each year.

The applicant and sponsoring organization understand and agrees to provide the following:
A Certificate of Insurance, with all coverages deemed necessary for the event, naming the Town of Naples as and additionally insured on all applicable policies, and an Indemnification Agreement on the sponsoring organization's letterhead. Both documents must be provided to the Town Office not less than 14 calendars days before the event.

Compliance with all local ordinances and policies and all applicable State laws. The specific events permit does not relieve the applicant or sponsoring organization from meeting any application requirements of law or other public bodies or agencies.

Payment of any invoice for Town services, which may be rendered or deemed necessary as part of the event and event approval, must be received prior to the event. The approval of this event may include additional requirements and/or limitations based on the Town's review of this application, in accordance with the Town's Events Policy. It may be necessary to meet with Town staff during the review of this application and the Planning Board approval may be necessary. The applicant (or the sponsoring organization) is responsible for contacting the State of Maine Liquor Enforcement Office and/or the State of Maine Health Department to secure any and all permits required for this event. The applicant agrees the sponsoring organization will operate the event in conformance with the written approval.

As the duly authorized agent of the sponsoring organization, I hereby apply for approval of this Event and affirm the above understandings. The information provided on this application is true and complete to the best of my knowledge.



Applicant Signature

Gary Skelton

Printed Name

4/19/19

Date