Special Events Permit Application Village of Albion • 35 East Bank Street • Albion NY 14411 • Phone 585-589-9176 • Fax 585-589-1218

31	1	I Dam	nit Anniliantion # (For offi	oo ugo onky)	300-	1	
Date of Application: 3 27	125	Peri	nit Application # (For offi	ce use only)	1015	-04	
To avoid a late fee, application of \$0 attached. Late applicatio may not be accepted. The pays Board of Trustees approval.	ns are subjec	t to an additional \$ (processing fee and the	se submitted	within 30 da	ays of an event	
APPLICANT			S/RESIDENTS THAT GS DURING THEIR		FFECTEI		
All applicants will be charged related to event production Sanitation, Street, Site Super	n which may ervisors, Env eq	include, but are not ironmental, and all i juipment is removed	limited to, Police, Fire/ necessary permit fee. Da from the park premises	EMS, Park an aily fees will b s.	d Facility No e accessed	Maintenance, until all event	
***Compr			st accompany t		ativii.	_	
		Note the <i>Important</i> Λ	otice, Section 12, page	6.	r osseszonszelőken	es ane verifica	
Section 1 – Applicant Inf Name of Applicant (must be conta	ormation	ha an aita duning tha a	uant\				
(ales and	be on site during the e	venty				
Drivers License Number	State	E-Mail Address for	Correspondence		Date of Bi	rth	
604-077-794	14			24/1	Glic	150	
Phone Number	Fax Num	Philwarne 190 Yahoo Com 9/15/50 Del Cell Phone Number				7,0	
585-589-5701	80-520-5201 585-746-3165						
Business Address	Business Address			Village Course State Zip			
CATHER BASIN RS			ALBION		NY	14411	
Corporation/Organization Name of D.B.A.							
State of Incorporation	Toy ID#	1501	(c)3 #	Village Sale	s Tax ID#		
State of incorporation	Tax ID#	501	(0)5 #				
Section 2 – Event Information	ation .						
Name of Event	0			Anticip	ated Daily A	ttendance	
Event Date(s) Set-up Date(s)/Hours Each Day Take Down Date(s)/Hours						n Date(s)/Hours	
11 -	1 - 1/4			40			
5/26/25 10:00 km BT 1 H							
E-Mail address for public information WEB address for public information							
Location of Event/Address What E of A	LBIDES -	MAP ATTA	chers		94		
Sponsors of the Event Lesion, VFW							
Brief Description of Event		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Is this a Fund Raiser or for Profit? Yes Pro If yes, please provide the following:							
is this a Fund Raiser of for Front: 11 fes 1							

Section 3 – Event Feat	ures		<u> </u>			
Will there be an admission cha	rge? Yes	No If yes, list a	all price categories bel	low.		<u> </u>
		The second second				
Will there be entertainment?	☐ Yes	No If yes, ple	ase attach a complete	list of automainment		
	A complete l	ist of entertainment w	ill be required before	final approval.		
	Once a	pproved, no changes n	nay be made unless at	uthorized.		
Will merchandise and/or food i	tems be sold?	Yes 🔀 No If	yes, please attach a c	omplete list of vendors		
What type of advertising/prome	otion will be done	nrior to the event?				
VILLE LEW LETTER	I HILL	Please attach all pr	comotional material.			
Radio Yes	No What Sta	tions?	TV	Yes No W	hat Stations	?
				Yes No Ho	w many?	
Newspaper Ads Yes	☐No What publ	lication? BATALA A	1			
Is any other promoter/producer	assisting you with	your event? Yes	JEUS KINO			
Name of Promoter and Promot	20073	Address		[x7*11	Loui	18:
There of Found the Hollow	on Company	Address		Village	State	Zip
Will the event include any of the	e following? (Indic	cate on site plan and/or	r vendor list)			
Tents or Canopies			er of Tents:			
	r 400 sq ft and can	opies over 900 sq ft re	equire permits from th	e Code Enforcement O	ffice.	
Company		Contact nam				
Fireworks	Yes X	No s require permits from	A. C. I. F. C.	.00		
			ine Code Enjorcemen	и Ојјісе.		
Open Flames or Cooking	Yes X	No				
Company		Contact nam	e and phone			
			* ***	W 1171-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		
Temporary Fencing	☐ Yes 🔼 ì		dimensions of fenced	area on site plan.		
Company		Contact nam	e and phone			
Port-O-Johns	Yes X	No I				
Company		Contact name	a and altern			
Company		Contact many	e and phone			
Electrical Services/Generators	☐ Yes ☑N	No .				
Company		Contact name	e and phone			
Carnival/Amusement Rides	☐ Yes 🛛 N	lo A separate permi	t from the Fire Dept n	nay be required.		
Company		Contact name	e and phone			
C' ID	——————————————————————————————————————					
Signs / Banners	☐ Yes ℤN	0				
Company		Contact name	and phone			
Inflatables	Yes N	o				
Company		Contrat no	and phase			
		Contact name	sand buone			

Section 4 – Transportation							
Does the event propose using, closin	g or blocking any of the	following	If yes, s	specify location	on and duration o	n site map	
Village Streets	¥Yes □ No		Villag	e Sidewalks		☐ Yes	₩ No
Village Bus Stops	Yes No			Parking Lots	,	☐ Yes	No
		-			,	☐ Yes	No No
Public Bicycle Parking	☐ Yes ► No			ise Paths			
Village Alleys	Yes No		1	e Right-of-W		Yes	₩ No
Section 5 – Use of Village I					, d		And production of the state of
Will any Village electric hookups be No	used? Yes X	Electri	c Locatio	on including a	mperage		
Will any Village water hookups be us	sed? Yes 🛣	Water	Location	(s)			
No Will waste water/gray water be gener	ated? Yes Yes No	Is so, h	ow will i	it be disposed	?		
Section 6 – Alcohol			9. 3.7				
Will there be alcohol at the event?	☐ Yes 🕱 No						
Will alcohol be given away?	Yes No						
Will the alcohol be sold?	☐ Yes ☒ No						
Will the alcohol be donated?	Yes No	Who is the	alcohol	being donated	l by or purchased	through:	
				_			
Is alcohol included in the admission p	rice of the event?	Yes X	No				
If you answe	red Yes to any of the abov	re, a Villag	ge and/or	State Liquor	License will be r	equired.	
	Attach copy o Which type of l						
Special Event					.: isting liquor lic	ense holde	rs only)
Has the applicant/organization ever h			Avian and an			and the same of th	
If yes, please explain:			-	· Compression recomme	and process and area of a recognitive section of the section		
If applying for a Special Event Liquo	r License, the following n	nust be pro	vided:				
Name of Liquor License Holder	License	# V	illage	State	Phone	On-site	Agent
					<u> </u>		
	and the state of t		-				
How will attendees be identified as m	inors or age 21 and over?						
Have the alcohol servers received tra	ning in sale/service of alc	oholic	Isal	partending ser	vice being used?		
beverages? Yes No Yes No							
If yes, when and where? Name of Company							
Section 7 – Event Security							
Are you requesting Albion Police off After reviewing the event applicat.		to use Ville	age of All	bion Police O	fficers for the eve	ent. See fee .	schedule for cost.
-y				•	,		
Are you providing private licensed so	curity? Yes Z	No		Num	ber of personnel		
					4.0		
The Village of Albi	on allows only security co	mpanies t	nat are li	censed and be	onded in the State	of New Yo	rk.
Security Company/Contact/License I	nfo.					Need nam	e from Rol#
					V 144		

Section 8 – Emergency Medical Service	S					
Are you requesting emergency personnel? Y		Number of personnel	1 requested:			
If this event exceeds 5,000 attendees a permit		ealth, as required w	nder NYS Sanitation Code 18, wil			
be required and attached hereto						
After reviewing the event application, you may i	e required to use Villag	e of Albion Off-Duty	EMT's or paramedics for the event.			
Section 9 – Facility/Park Maintenance						
What is your trash removal and clean-up plan?						
N/A						
Volunteers Outside refuse company	Company Name:	Contact Na	ame/Phone:			
All costs for containers, dump	ing and removing are the r	esponsibility of the appl	licant/promoter.			
The park must be returned to its origina	l condition and all equipme	ent removed or daily ren	rtal fees will be accessed.			
Section 10 - ADA Accessibility Require	ments					
Parking Existing Lots: When lots are used for activities	other than parking access	ible annual must be bu				
not possible, the same number of spots must be	provided as close as possi	ble to original spaces a	and/or main event site.			
Temporary lots: Accessible spaces must be created and held in reserve for people with disabilities, laid out in accordance with standards, marked with the accessibility symbol, and connected to the closest accessible route.						
Accessible Routes Accessible routes must connect event site feature	s, including parking, exhi	bits and activities and	public amenities.			
Portable Toilets						
For every 500 people in attendance 1 portable/no	n-portable toilet shall be	ccessible, unless facil	ities are available. For questions or			
assistance with these requirements please call 585-589-9176.						
Section 11-Insurance Requirements						
The Village of Albion has established insurance required to Village of Albion has established insurance required to the Village of Albion has established insurance required to the Village of Albion has established insurance required to the Village of Albion has established insurance required to the Village of Albion has established insurance required to the Village of Albion has established insurance required to the Village of Albion has established insurance required to the Village of Albion has established insurance required to the Village of Albion has established insurance required to the Village of Albion has established insurance required to the Village of Albion has established insurance required to the Village of Albion has established insurance required to the Village of Albion has established in	irements for those facilit	v users, vendors and co	ontractors entering into agreements			
with the Village for the purpose of special events an Village of Albion a certificate of insurance that com	d activities. Before comm	encing use or services	under an agreement with the			
All special event applicants shall name the Village	of Albion as an "Addit	onal Insured", per ite	em one below, on all policy(ies).			
except workers compensation and shall reflect this o	n a Certificate of Insurance	e. Applicant agrees th	nat any insurance available to the			
applicant shall be primary and non contributory to the	e Village's self insured re	tention. Applicant sha	all obtain certificates of insurance			
from all vendors participating in this event unless co requirements listed in this section. Complete and ac	vered under applicant's in	surance policy. Vende	ors must comply with all			
(5) working days prior to the event. Separate certific	ates of insurance shall be	provided by all carniv	al and amusement companies and			
(5) working days prior to the event. Separate certificates of insurance shall be provided by all carnival and amusement companies and firework production companies with the limits shown in this section and shall name the Village of Albion as "Additional Insured" as per						
item one below. Additional coverage may be require	d depending upon the nat	ure and scope of the e	vent.			
The certificate must show: 1. The Village of Albion, its agents, officers.	amplessees and reclambees	1 6 1 1122	- 17 - 39 47 G (*G - 4 - 6			
 The Village of Albion, its agents, officers, employees and volunteers are named as "Additional Insured". All Certificate of Insurance policies must reflect this with the exception of modern some policies must reflect this with the exception of modern some policies. The Village of Albion shall be notified at least 30 days prior to cancellation or discussion. 						
2. The Village of Albion shall be notified at 1.	ייייי איייי איייי איייי אייייי אייייי איייייי	71				
nonce of cancellation for non-payment of p	remium.					
 Workers Compensation Policies shall conta General Liability Including: 	in a Waiver of Subrogation	n clause in favor of th	e Village of Albion.			
Bodily Injury	Contractual	Independent Co				
Comprehensive Form	Product/Completed Ope	Independent Co erations Hazard	muracions			
Premises Operation	Personal injury	Broad For	rm Property Damage			
In addition, specific date(s) and locations(s) of certificate. Certificates must be received no l	f the event, to include se	t up and take down,	must be stated clearly on the			

Section 12 - Important Notice

All applicants are advised that events, whether gated or on-gated, whether charging admission or not, and which are held on Village parks, streets and/or sidewalks next to streets, are held on traditional public forums (fora) within which the exercise of U.S. Constitutional First Amendment rights have been and are traditionally conducted. The Village cannot and will not tolerate any restriction of such rights by applicants and/or their promoters, employees, agents, subcontractors, assigns, volunteers, security personnel or others associated with applicants (collectively "Event Personnel") in the holding of events. In addition, Event Personnel shall comply with all other laws, common laws, statutes, ordinances and rules and regulations, including, but not limited to, those involving the storage of guns at events held without a State of New York spirituous liquor license and those concerning the language which is placed on entry signs to such events. By signing this Permit Application, all applicants acknowledge and agree that the Insurance and Indemnification provisions contained respectively in Sections 11 and 13 of this Permit Application apply to alleged violations by Event Personnel of any of the laws, common laws, statutes, ordinances and rules and regulations pertaining to the subject matters stated in this paragraph, and that the insurance and/or self-insurance of applicants and/or Event Personnel will cover the Village, its respective officers, agents, employees and volunteers should the Village, and/or its respective officers, agents, employees and volunteers be subjected to claims, demands, lawsuits and/or other actions alleging such violations. Applicants are encouraged to consult with their own attorneys for independent legal advice about applicants' duties and obligations concerning the subject matters contained in this paragraph.

Applicant acknowledges that applicant has read and understood this Notice, agrees to comply with and abide by its terms, and has placed applicant's initials in the space below to verify such acknowledgement and understanding.

Initials of applicant's authorized agent or applicant

Section 13 - Certification

I hereby certify that the statements made in this application are true and complete to the best of my knowledge, and that I am authorized to execute the application. Intentional omissions or falsification of information is sufficient grounds for denial of the application and subsequent revocation of the permit. I agree to indemnify, defend and save harmless the Village and its respective officers, agents and employees and volunteers from any and all losses, claims liabilities, damages, costs and expenses, including reasonable attorney's fees and court costs, resulting from the conduct of the applicant, sponsor or promoter, their employees, suppliers, vendors or agents, or any of their guests, invitees or licensees with regard to the event applied for. I agree to indemnify, defend and save harmless, the Village and its respective officers, agents and employees, and volunteers from any and all losses, claims, liabilities, damages, costs and expenses, including reasonable attorney's fees and court costs, resulting from any facility, park or lake closure due to inclement weather. In such an instance, I understand that all event participants must follow the Village's guidelines and procedures for lake/facility evacuation and that this event is being held inside the Village limits and all Village rules and regulations apply. I also understand that the Village reserves the right to determine if park facilities are unusable as a result of inclement weather.

I realize my submittal of this application request constitutes a contract between myself and the Village of Albion and is a release of Liability.

I am the said applicant and submit this application request of my own free will.

Signature of Applicant's Authorized Agent or Applicant

AD JUNEUR SHEAR POST

Date

3/27/25 Date

AMERICAN LEGION SHERET POST #35 ALBION, NY the oldest Post in Western NY 3429 Gaines Basin Road ALBION, NY 14411 585-283-4697 POST HOURS Tuesday thru Thursday 240 Friday and Saturday 3p.m - 12p.m. STATE GT Noon to 6p.m. BURLE BUNTY LINE COURT HAUSE 5 LNE UP LILE UP R LOCK PARIL ST CHUDEN PAZADE ROUTE -ST. VEDDEDE 10:00 AM - 11:00 AM LEST TIME BLOUL PARADE ROUTE EASTAVE AUGIDAL Monte School