

# Special Events Permit Application

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

Date of Application: 4/21/25		Permit Application # (For office use only) 2025-04	
<p>To avoid a late fee, applications must be submitted a minimum of 60 days prior to the event with a non-refundable application fee of \$0 attached. Late applications are subject to an additional \$0 processing fee and those submitted within 30 days of an event may not be accepted. The payment of fees does not guarantee event approval. Fees may be waived upon Village of Albion Board of Trustees approval.</p> <p style="text-align: center;"><b>APPLICANT MUST NOTIFY BUSINESSES/RESIDENTS THAT WILL BE AFFECTED OF ANY STREET CLOSINGS DURING THEIR EVENT</b></p> <p>All applicants will be charged facility rental fees as appropriate and are expected to fully reimburse the Village for all services related to event production which may include, but are not limited to, Police, Fire/EMS, Park and Facility Maintenance, Sanitation, Street, Site Supervisors, Environmental, and all necessary permit fee. Daily fees will be accessed until all event equipment is removed from the park premises.</p> <p style="text-align: center;"><b>***Comprehensive site plans must accompany this application.***</b></p> <p style="text-align: center;">* Note the Important Notice, Section 12, page 6.</p>			
Section 1 – Applicant Information			
Name of Applicant (must be contact person and be on site during the event) Tim McMurray			
Drivers License Number 731 514 062	State NY	E-Mail Address for Correspondence Tmcmurray@villageofalbionny.com	Date of Birth 03/31/83
Phone Number 585 200 4788	Fax Number	Cell Phone Number	
Business Address	Village	State	Zip
Corporation/Organization Name of D.B.A. AYSAP			
State of Incorporation NY	Tax ID #	501(c)3 # 20-5535033	Village Sales Tax ID #

Section 2 – Event Information			
Name of Event AYSAP Football/cheer Practice & Games			Anticipated Daily Attendance 300
Event Date(s) 7/21/25 - 10/31/25	Set-up Date(s)/Hours	Hours Each Day Practice 3hrs Games (Saturday) 8hrs	Take Down Date(s)/Hours
E-Mail address for public information Lousboyz@yahoo.com		WEB address for public information NOFAyouthfootball.com	
Location of Event/Address Bullard Park Multiusefield (East field)			
Sponsors of the Event			
Brief Description of Event Football & cheerleading			
Is this a Fund Raiser or for Profit? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please provide the following:			

Section 3 – Event Features				
Will there be an admission charge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list all price categories below.				
Will there be entertainment? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please attach a complete list of entertainment. <i>A complete list of entertainment will be required before final approval. Once approved, no changes may be made unless authorized.</i>				
Will merchandise and/or food items be sold? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, please attach a complete list of vendors. <i>Jeff Holler</i>				
What type of advertising/promotion will be done prior to the event? Please attach all promotional material.				
Radio	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	What Stations?	TV	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No What Stations?
Fliers/Posters	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	How many?	Press Releases	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No How many?
Newspaper Ads	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	What publication?		
Is any other promoter/producer assisting you with your event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Name of Promoter and Promotion Company		Address	Village	State Zip
Will the event include any of the following? (Indicate on site plan and/or vendor list)				
Tents or Canopies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Number of Tents: <i>Tents over 400 sq ft and canopies over 900 sq ft require permits from the Code Enforcement Office.</i>				
Company		Contact name and phone		
Fireworks <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>Fireworks require permits from the Code Enforcement Office.</i>				
Open Flames or Cooking <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Games Only</i>				
Company		Contact name and phone <i>Jeff Holler (585) 590-0983</i>		
Temporary Fencing <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Provide accurate dimensions of fenced area on site plan.				
Company		Contact name and phone		
Port-O-Johns <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Company		Contact name and phone		
Electrical Services/Generators <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Company		Contact name and phone		
Carnival/Amusement Rides <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No A separate permit from the Fire Dept may be required.				
Company		Contact name and phone		
Signs / Banners <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Company		Contact name and phone		
Inflatables <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Company		Contact name and phone		

**Section 4 – Transportation**

Does the event propose using, closing or blocking any of the following If yes, specify location and duration on site map

Village Streets	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Village Sidewalks	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Village Bus Stops	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Public Parking Lots	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Public Bicycle Parking	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Multiuse Paths	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Village Alleys	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Village Right-of-Ways	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**Section 5 – Use of Village Utilities**

Will any Village electric hookups be used? No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Electric Location including amperage	Scene Board only
Will any Village water hookups be used? No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Water Location(s)	water spicket
Will waste water/gray water be generated?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is so, how will it be disposed?	

**Section 6 – Alcohol**

Will there be alcohol at the event?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Will alcohol be given away?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Will the alcohol be sold?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Will the alcohol be donated?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Who is the alcohol being donated by or purchased through:
Is alcohol included in the admission price of the event?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

If you answered Yes to any of the above, a Village and/or State Liquor License will be required.  
 Attach copy of State of New York application.  
 Which type of license will be used for the event?  
 Special Event Liquor License     Extension of Premise (existing liquor license holders only)

Has the applicant/organization ever had a liquor license or event permit denied, revoked or suspended?  Yes  No  
 If yes, please explain:

If applying for a Special Event Liquor License, the following must be provided:

Name of Liquor License Holder	License #	Village	State	Phone	On-site Agent

How will attendees be identified as minors or age 21 and over?

Have the alcohol servers received training in sale/service of alcoholic beverages? If yes, when and where?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Is a bartending service being used? Name of Company	<input type="checkbox"/> Yes <input type="checkbox"/> No
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**Section 7 – Event Security**

Are you requesting Albion Police officers?  Yes  No  
*After reviewing the event application, you may be required to use Village of Albion Police Officers for the event. See fee schedule for cost.*

Are you providing private licensed security?  Yes  No      Number of personnel: \_\_\_\_\_  
*The Village of Albion allows only security companies that are licensed and bonded in the State of New York.*

Security Company/Contact/License Info.	Need name from Rol#
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white Barrels  
 x13 (includes ones next to bleachers)

for Jay \*

**Section 8 – Emergency Medical Services**

Are you requesting emergency personnel?  Yes  No Number of personnel requested: \_\_\_\_\_  
**If this event exceeds 5,000 attendees a permit from Department of Health, as required under NYS Sanitation Code 18, will be required and attached hereto**  
*After reviewing the event application, you may be required to use Village 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? **Barrel use & Dumpster**

Volunteers  Outside refuse company  Company Name: \_\_\_\_\_ Contact Name/Phone: \_\_\_\_\_

*All costs for containers, dumping and removing are the responsibility of the applicant/promoter.*

*The park must be returned to its original condition and all equipment removed or daily rental fees will be accessed.*

**Section 10 – ADA Accessibility Requirements**

**Parking**

*Existing Lots:* When lots are used for activities other than parking, accessible spaces must be kept open and usable. If not possible, the same number of spots must be provided as close as possible to original spaces 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 features, including parking, exhibits and activities and public amenities.

**Portable Toilets**

For every 500 people in attendance 1 portable/non-portable toilet shall be accessible, unless facilities 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 requirements for those facility users, vendors and contractors entering into agreements with the Village for the purpose of special events and activities. Before commencing use or services under an agreement with the Village of Albion a certificate of insurance that complies with the requirements referenced below must be furnished.

**All special event applicants shall name the Village of Albion as an "Additional Insured", per item one below, on all policy(ies), except workers compensation and shall reflect this on a Certificate of Insurance. Applicant agrees that any insurance available to the applicant shall be primary and non contributory to the Village's self insured retention. Applicant shall obtain certificates of insurance from all vendors participating in this event unless covered under applicant's insurance policy. Vendors must comply with all requirements listed in this section. Complete and accurate certificates must be received by the Special Events Office a minimum of five (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 required depending upon the nature and scope of the event.**

**The certificate must show:**

1. 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 workers compensation.
2. The Village of Albion shall be notified at least 30 days prior to cancellation or alteration of any insurance coverage. A 10-day notice of cancellation for non-payment of premium.
3. Workers Compensation Policies shall contain a Waiver of Subrogation clause in favor of the Village of Albion.
4. General Liability Including:

Bodily Injury	Contractual	Independent Contractors
Comprehensive Form	Product/Completed Operations	Hazard
Premises Operation	Personal injury	Broad Form Property Damage

**In addition, specific date(s) and locations(s) of the event, to include set up and take down, must be stated clearly on the certificate. Certificates must be received no less than five (5) working days prior to the event.**

Section 11- Insurance Requirements (con't)

**INSURANCE LIMITS**

**General Events**

General events consist of those events held at any Village facility.  
General Liability - \$1,000,000 each occurrence, \$2,000,000 aggregate  
Auto Liability - \$1,000,000 combined single limit (each accident)  
Workers Compensation - New York Statutory Requirements  
Liquor Liability - \$2,000,000 each occurrence

Same as last year  
updates in July will  
provide once  
received

**OTHER INSURANCE OR RISKS**

All other risks shall comply with the Additional Insured requirements as stated in item 1 above.

**Fireworks Production**

General Liability - \$5,000,000 each occurrence  
Auto Liability - \$1,000,000 combined single limit (each accident)  
Workers Compensation - New York Statutory Requirements

**Liquor Liability**

If your event is approved to have alcohol you will need to show proof of liquor liability coverage.  
All Village facilities - \$2,000,000 each occurrence

**Carnival/Amusement Rides**

\$2,000,000 General Liability  
\$1,000,000 Auto Liability  
Workers Compensation - New York Statutory Requirements

Football camp 7/22-7/23

Game Dates:

- 8/16
- 8/23
- 8/30
- 9/6
- 9/13
- 9/20

once schedule  
is completed  
I will provide  
official dates

Practice:

Mon-Thurs each week  
5:30pm-8:00pm

- 9/27
- 10/4
- 10/11
- 10/18
- 10/25

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

4/21/25

Date

Coordinator

Title

4/21/25

Date