



Village of Horseheads Parks & Recreation
 202 South Main St.
 Horseheads, NY 14845
 607-739-5691

Teal Park

Special Event/Pavilion Permit Application

- Answer all sections of this application completely; incomplete applications will be returned
- Return completed applications to the Village of Horseheads, Parks & Recreation, 202 South Main St. Horseheads, NY 14845
- No permits will be granted unless the back of application is signed, certificate of liability insurance is included, along with a \$35 rental fee.
- **Please read and sign the back of this permit**

Section I Applicant Contact Information	1. Name of Applicant: _____ 2. Organization (if any): _____ 3. Mailing address: _____ 4. Phone: Day Time- _____ Night Time- _____ 5. Email: _____ DOB: _____
Section II Alternative Contact Information	1. Alternative contact: _____ 2. Home Address: _____ 3. Phone: Day Time- _____ Night Time- _____ 4. Email: _____ DOB: _____
Section III Event Information	1. Have you held this event before? Yes No (circle one) If yes, provide event name and date: _____ 2. Type of Event: _____ 3. Date of Event: _____ 4. Number of participants/spectators: _____ 5. Set up begins: _____ Clean-up ends: _____ 6. Time event begins: _____ Time event ends: _____ 7. Will participants/spectators be charged? Yes No If so, how much? _____ Will there be vendors at the event? Yes No If so, what is the vendor permit fee? _____ Will there be merchandise available for sale? Yes No If so, provide a list of items & Prices _____ *If the answer to any of question #8 is yes, please apply for a Temporary Use Authorization vending permit 9. Describe in detail activities planned. List all items to be distributed. (Sale or distribution of food, Products, promotional material, speeches, ceremonies, equipment to be used, etc.) MUST BE COMPLETED _____ _____
Section IV Additional Information	1. Will the event be advertised? Yes No If so, describe advertising plan including dates and media outlets: _____ 2. Will any pamphlets, handbills, or advertising matter of any kind be distributed at the event? Yes No If so, what kind of advertising? _____ 3. Do you plan to drive vehicles onto Parkland? Yes No 4. Have you made any provision for on-site medical services? Yes No 5. Have you made any provision for on-site security? Yes No 6. Do you have insurance? Yes No 7. Do you plan to have amplified sound at event? Yes No If yes, you must obtain a noise law permit application from the Village of Horseheads

Office Use only	
Fee Required: Yes _____ No _____	Conditions: _____
Received: Check _____ Cash _____	
Received By: _____	By: _____
Date: _____	Village Official Date
Action taken: Denied _____ Approved _____	revised 1/2021

Village of Horseheads Parks & Recreation
202 South Main St.
Horseheads, NY 14845

GENERAL RULES REGARDING USE OF VILLAGE OF HORSEHEADS PARKS & RECREATION

The use of all Village of Horseheads Parks & Recreation facilities shall be subject to the following rules. Violation may result in immediate revocation of approval. Approval for the use of recreational and park facilities shall be subject to the discretion of the Recreation Director.

1. In the event of inclement weather, the Parks & Recreation Director or his designee has the final authority on whether facilities are useable.
2. Intoxicants shall not be brought onto Village facilities at any time without prior written authorization of the Village Board. §76-3, 168-9 I
3. Profanity, objectionable language, disorderly acts, or illegal activities of any kind are absolutely prohibited, and those violating this prohibition will be ejected from the premises. §168-9 BB.
4. Any damage to municipal facilities shall be properly repaired at the applicant's expense.
5. Applicants must clean up the facilities after use.
6. Permits may be revoked at any time.
7. Smoking and other use of tobacco products is not allowed in Village of Horseheads Parks. §58-1.
8. All applicants must provide the following insurance. FAILURE TO DO SO WILL RESULT IN REVOCATION OF YOUR PERMIT.
 - A. The applicant hereby agrees to cause the Village to be named as an unrestricted, non-contributory additional insured on the applicant's insurance policy. The Village may require an actual copy of the policy.
 - B. The policy naming the Village for any applicable insured shall
 - *be an insurance policy from an A.M. best rated "secured" New York State licensed insurer
 - *contain 30-day notice of cancellation
 - *state that the applicant's coverage shall be primary coverage for the Village, its Board, employees and volunteers.
 - C. The applicant agrees to indemnify the Village for any applicable deductibles.
 - D. Minimum limits of insurance:
 - *Commercial General Liability Insurance
 - \$1,000,000 per occurrence/\$1,000,000 aggregate
 - E. Applicant acknowledges that failure to obtain such insurance on behalf of the Village constitutes a material breach of contract and subjects it to liability for damages, indemnification, and all other legal remedies available to the Village. The applicant is to provide the Village with a certificate of insurance, evidencing the above requirements have been met. The failure of the Village to object to the contents of the certificate of the absence shall not be deemed a waiver of any and all rights held by the Village.

CONCESSION FACILITY RULES

1. The applicant shall be responsible for securing and maintaining all approvals necessary for such use, including but not limited to Chemung County Health Department permits.

Signature: _____

Date: _____