CP-648 (1/2023)



# Facility Use Permit Application Parks and Recreation Department

Kristen M. Doulos Town Parks Director

6 Newtown Road • Hampton Bays, NY 11946 Tel (631) 728-8585 Fax (631) 728-8525 www.southamptontownny.gov/parksrec

Receipt of the application is not a guarantee of facility use. Application will not be finalized until approved and executed by the Parks and Recreation Town Parks Director or designee. Submit application form to: Town of Southampton Parks & Recreation Department, 6 Newtown Rd., Hampton Bays, NY 11946
Fax: (631) 728-8525 or via Email: ParksAndRec@southamptontownny.gov.

		Today's Date		
<b>Type of Facility Requested</b> □ Park □	Activity Center	□ Beach		
Name of Facility				
Name of Resident/Applicant				
Organization (if applicable)	·			
		l be made out in the organization's name.	•	
Is your Organization: 501 (C), Not for Prof	it, or Non-Profit? ☐ Yes	□ No If yes, please attach a copy.		
Address				
City	State	Zip Code		
Phone numbers: Home		Cell		
Work Email Address		Fax		
Secondary Contact		Phone		
			_	
	Event Details			
Name of Event		Expected Attendance		
Type of Event		Estimated # of Vehicles		
Description of Event/Activities		#of Parking waivers if needed		
If use of facility requires any special setup	traffic control etc. please	complete Special Requests Section below		
	, traffic control, etc., picase c	complete opecial requests section seron		
Special Requests				
		100		
			<u> </u>	
	<b>Event Dates and Times</b>			
Day(s) of Week		Start Time   End Tin		
	·		—	
Further details regarding times				

	Additional Info	rmation		
<u> </u>		And the state of t	<u>ad in the State of the Company of t</u>	
Please	e answer all questions correctly. Unanswered question	ons may delay your	request.	
1.	Is this event open or advertised to the public? *		Yes □	No □
2.	Is this a fundraising/revenue producing event? *		Yes □	No □
3.	Will there be soliciting or selling of any kind? *		Yes □	No □
4.	Will you be serving beer or wine? <b>ONLY PERMITTED</b> A	AT BEACHES & TIAN	A BEACH ACTIVI	TY CENTER
	If yes, Complete Alcohol Permit Application		Yes □	No □
5.	Will you be charging a fee for this event? If yes, how mu	ach?	Yes □	No □
6.	Will you be using a caterer? If yes, please fill out inform	ation below:	Yes□	No □
	Contact Person			
	Business Name			
	Address S	tate	Zip	
	Contact Phone# 4			<del></del>
7.	Will you be using an Event Planner? If yes, please fill ou	ıt information below:	Yes □	No □
	Contact Person 4x		_	
	Contact Phone#4x	:4 Permit#		
8.	Will this event be having some type of music? NO AMPI	LIFIED MUSIC ALLOV	WED ON ANY OF	OUR
	BEACHES. If yes, what type?		Yes □	No □
9.	Will you be requesting a contained fire? If yes, desc	cribe container	Yes □	No □
10.	10. Will there be any type of display or advertising at the event?			No □
	OU ANSWERED YES ON QUESTIONS 1, 2 OR 3, PLEASE MARSHAL'S OFFICE FOR A SPECIAL EVENT APPLICA			VN
IMPOR	RTANT CONSIDERATIONS:			
1.	Consumption, sale or distribution of alcoholic beverages requires			
2.	Special Occasion Liquor License which can be obtained through A Business License may be required for the sale of any items on pu		press.	
3.	Request for a road closure or parking restrictions requires approv	al from Southampton Tov		
4.		a Fireworks Permit from	the <b>Town Fire Mar</b>	shal's office
5.	and specialized State and Federal licensing. Flying of unmanned air vehicles (UAVs) or "drones" may require a for state and federal laws.	ı special operations certifi	icate. Check out the c	official FAA
6.		equired to pay these costs.		
REQUI	REMENTS:			

#### RE

- Applicant is required to pay facility fee upon submission of permit (unless otherwise directed).
- Applicant is required to provide the Town with a refundable damage deposit depending on size and type of event upon approval of permit (if applicable).
- 3. Applicant is required to provide proof of insurance (\$1,000,000 LIABILITY w/ Town as Addt'l Insured) prior to the event indemnifying the Town of Southampton of any liability OR applicant is required to purchase a user group insurance policy through the Town, if applicable. NOTE: Certificate Holder MUST be addressed to: Town of Southampton, 116 Hampton Road, Southampton, NY 11968.
- No costs are to be incurred by the Town. All costs, direct or indirect, associated with the event are the responsibility of the applicant.
- Applicant is required to ensure all Town regulations and applicable bylaws are followed.

#### RULES/REGULATIONS/INDEMNIFICATION

### Please READ CAREFULLY. Complete and/or initial on the following important policies, rules and regulations:

- a. For proof of residency, please attach a copy of your **VALID** driver's license (MUST be 18 & over for Facility Permits & 21 & over for Beach Gatherings) and a current, 6 month & 1 year ago of electric/cable bills or a Southampton Town Tax Bill. All applications are approved on a case by case basis, subject to certain restrictions and availability of facility and staff.
- b. Set-up/clean-up/removal of decorations will be the responsibility of the group. Please include this in your requested time. **You will not be given access prior to the time scheduled on your permit**. Non-compliance of this policy will cause forfeiture of the refundable security deposit. The deposit will be refunded to the applicant if the facility is left clean and free of damage.
- c. If group is an organization, issue refundable deposit to: \_\_\_\_\_Allow at least 14 working days
- d. **Consumption of alcohol is only permitted on Southampton Town Beaches.** Violation of this regulation will mean forfeiture of the refundable security deposit and cancellation of your event at time of infraction.
- e. Parking is only permitted in designated areas. No parking on grass or walkways.
- f. Gambling is not allowed on Southampton Town properties.
- g. Other permits may be required depending on the type of event (i.e. Special Events, Fundraisers, Films/Photoshoots.)
- h. Law Enforcement intervention due to violation of rules and regulations will mean cancellation of event and may incur additional charges, affect future use and forfeiture of any remaining fees and security deposit paid.
- i. **Submission of the completed form** *does not* **guarantee you the site or date.** You will be notified if the site is available or not.
- j. If booking Red Creek Park Activity Center or Tiana Beach Activity Center, submit the completed application form along with the full payment and refundable security deposit. If facility or any other alternative is unavailable, your payment and security deposit fee will be refunded to you within 7-14 business days.
- k. **Cancellation Policy:** Facility Use Permits are **NON-REFUNDABLE**. **NO EXCEPTIONS**. Rain dates are allowed for Beach Gatherings **(Only after inclement weather has occurred)**.
- I. Changes made to the dates, times, number of attendees, etc. after the permit has been processed will be assessed a permit revision fee or may result in **new permit fees** (case by case basis). (initial)
- m. Any cost incurred due to damage to the facility/grounds or due to law enforcement intervention arising from the group's event will be billed to the group.
- n. Payments may be in the form of cash, check or credit card (We Accept All Major Credit Cards). All deposits and fees <u>must</u> be paid in full no less than two weeks prior to being issued a valid Facility Use Permit. Checks <u>must</u> be payable to the "Town of Southampton". In the event of a bounce check, fees will be applied.

\*If the applicant provides false information such as: purpose of event, names & addresses of event holder(s), number of persons in attendance, etc., the event may be cancelled prior or during the event at the discretion of the Town Staff and may result in forfeiture of fees and deposits and/or denial of current and future applications for use of Department facilities and may incur additional Town charges.

\*I certify that I have read and understand all the rules and regulations governing the use of the parks and facilities. I, the undersigned, do hereby agree that we will abide by the policies governing the use of the parks and will be responsible for any damages to the parks, facility, furniture, or equipment caused by our occupancy of the property. I understand that any false information provided or violation of any rules and policies will result in immediate cancellation of our event and will cause forfeiture of all fees and deposits. (initial)

#### TOWN OF SOUTHAMPTON PARKS & RECREATION INDEMNIFICATION FOR USE OF FACILITIES & PROPERTY

I hereby certify that I am authorized to issue contracts on my own behalf or that of the organization listed which I represent. I further certify that I have read the rules, regulations, conditions and terms of the Southampton Town Parks & Recreation application for a Facility Use Permit. In consideration for my or my organization's use of the facilities and/or property owned or operated by the Town as listed, I hereby agree on behalf of myself and my organization, if any, as follows:

- 1. That I and my organization will abide by all rules and regulations of the Town and all other directives of the Town.
- 2. That I and my organization will indemnify and hold harmless the Town, its officers, agents, representatives and/or liability, including legal costs and attorneys' fees, that may result from any death or injury to persons or damage to property that may result from my or my organization's use of the facilities and/or property, whether such death or injury or damage to property is caused by the passive or active negligent act or omission of the Town except that this indemnification shall not apply to any loss rising solely from the intentional or willful misconduct of the Town.
- 3. That neither myself nor any one of my organization shall make any claim against the Town, its officers, agents, representatives and/or employees for any injury or liability which I have indemnified the Town.
- 4. That I personally and on behalf of my organization will conduct a reasonable safety inspection of the Town facilities and/or property and all grounds, structures or buildings used by me and/or my organization immediately prior to use of the facilities and/or property, and will bring any conditions creating any hazard to the attention of appropriate Town representatives. My signature below signifies my agreement to the rules, regulations, policies and Town Indemnification.

NO REFUNDS  □ APPROVED	5///	FOR OFFICE USE ONLY		
□ APPROVED			PERMIT NO	
	□ DENIED (If so, REASON)	· :	PAYMENT TYPE:	
□ SECURITY I	DEPOSIT / TYPE:		CHECK NO	
FEE REQUIRE	ED: F	EE PAID:	CASH	
□ INVOICE AT	TTACHED SHEET ATTACHED			
_ 000 D 0 11 XX			STAFF SIGNATURE / DATE	
CC:	□ MAINTENANCE □ BEACH MANAGER □ OTHER	□ PUBLIC SAFETY □ POLICE	□ PARK SUPERVISOR □ TOWN CLERK	
MAINT. INSTI	RUCTIONS		· · · · · ·	

CP-642 (1/2020)



## Alcohol Beverage Permit Application

Kristen M. Doulos Town Parks Director

### **Parks and Recreation Department**

6 Newtown Road • Hampton Bays, NY 11946 Tel (631) 728-8585 Fax (631) 728-8525 www.southamptontownny.gov/parksrec

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	Today's Date				
Name	e of Applicant				
Orgar	nization (if applicable) All paperw	ork, including any refur	nds, will be made out	in the organizati	on's name.
Is you	ur Organization: 501 (C), Not for Profit, or Non-Profit? $\Box$ Yes $\Box$ No $\Box$ If yes, please attach a copy.				а сору.
Addre	ess			<u> </u>	. <u></u>
City_		State	Zip Co	ode	<u>.</u>
Phon					
	l Address			<u> </u>	
Secon	Secondary ContactP		Phone	Phone	
	r's License Number				
- C. E		Additional Infor	mation		
`	s) of Evente of Event		Fstir	ected Attendance nated # of Vehicl	
	tion of Event				
	ription of Event/Activities				
1.	What type of alcohol will be con	sumed/possessed at thi	s function?	Beer	Wine
2.	Alcohol will be served during wi	nat hours? From	to		
3.	What food will be provided duri	What food will be provided during the alcohol consumption period?			
4.	What procedures are proposed under the influence will not obta	to supervise the consumain or consume alcohol	nption of alcohol to e served at the function	nsure that person	ns underage or

#### IMPORTANT CONSIDERATIONS:

- Consumption, sale or distribution of alcoholic beverages requires approval from Town Board and a Special Occasion Liquor License which can be obtained through the New York Business Express.
- 2. If you would like to provide beer & wine to attendees of your event <u>at no cost</u> and it is a <u>private</u>, "by invitation only" event (family reunion, company picnic, etc.), you must apply for an Alcoholic Beverage Permit. By Town Code, 111-3 SEC. D10, applicants for an Alcoholic Beverage Permit must meet the following criteria:
  - a. Procedures must be written out and included with application to ensure that underage persons and persons under the influence of alcohol will not obtain or consume alcoholic beverages served at the function.
  - b. Procedures proposed are likely to secure and supervise the area and participants.
  - Alcohol consumption will be limited to certain designated areas at each facility and grounds.
  - d. The applicant must agree to provide sandwiches and other food services at the location during the time of consumption in an amount sufficient to serve the number of persons anticipated to attend.
  - e. The applicant must sign that he/she understands and agrees to be personally responsible for and may need to provide financial guarantees to ensure cleaning, trash disposal and/or repairs necessary as a result of the event. The amount of the financial guarantee will be determined by the Parks & Recreation Town Parks Director.
  - f. The applicant agrees to indemnify and hold the Town, its employees and agents harmless to the extent allowed by law for all liability claims arising from the event.

#### TOWN OF SOUTHAMPTON PARKS & RECREATION INDEMNIFICATION FOR USE OF FACILITIES & PROPERTY

As a condition of being granted an alcohol beverage permit, I hereby agree to be present at the event at all times and responsible for maintaining order at the facility and grounds. I agree to comply with Town, County and State regulation related to alcohol consumption. I certify that I am 21 years of age or older and the information I have provided here is true and accurate to the best of my knowledge. I understand that kegs and glass containers to consume alcohol are not allowed. I hereby agree to defend, indemnify and hold harmless the Town of Southampton, its officers, officials, employees and agents for all liability claims arising from the event. My signature below signifies my agreement to the rules, regulations, policies and Town Indemnification.

Signature of Applicant:			Date:	
NO REFUNDS!!!		FOR OFFICE USE ONLY	PERMIT NO.	
□ APPROVED □ DENIED (If so, REASO			PAYMENT TYPE:	
			CHECK NO.	
			CREDIT CARD	
FEE REQUIRED:	FI	EE PAID:	CASH	
CONDITIONS: A	BSOLUTELY NO UNDERAG	E DRINKING!!!	OWN AS ADD'L INSURED) CERT. RECEIVED	
			TOWN PARKS DIRECTOR / DATE	
CC:	MAINTENANCE BEACH MANAGER	PUBLIC SAFETY POLICE	PARK SUPERVISOR TOWN CLERK	

OTHER \_\_\_\_\_