LICENSING REQUIREMENTS FOR THEATRICAL EXHIBITS, CARNIVALS AND CIRCUS EVENTS

- 1. Complete the Town of Franklin Public Event Application
- 2. Provide in writing what actions are to be taken to address:
 - A. Pedestrian traffic, parking, and other issues relating to public safety
 - B. Incidents of disruptive behavior
 - C. Noise levels within the area
- 3. Provide written permission from property owner
- 4. Provide liability insurance
- 5. Provide workmen's compensation insurance
- 6. You must contact the Board of Health, Police Department, Fire Department and Building Department for any applications and inspections that may need to be performed.
- 7. Fee \$125

The Town Administrator will forward copies of application/checklist to the departments list below:

The Police Chief.

Fire Department - Will do a safety inspection.

Board of Health - Board of Health (520-4904) will confirm that all necessary permits are obtained and will do a health inspection on the premises.

Building Inspection Department –Determines that applicant is in compliance with all building codes and zoning regulations. They will also do a safety inspection. Applicant must arrange with the Building Inspection Dept. (520-4926) to schedule an inspection.

The Treasurer/Collector - will determine that property owner is update on municipal taxes. All taxes must be paid to date.



Town of Franklin Town Administrator's Office Tel: (508) 520-4949 355 East Central Street Franklin, Massachusetts 02038-1352

PUBLIC EVENT APPLICATION (PARADE, ROAD RACE, PERFORMANCE OR ASSEMBLY)

| Date: | | | |
|---|--|--|--|
| Applicant Name: | | | |
| Applicant's Organization: (corporation, unincorporated association, etc.) | | | |
| Contact Name: | | | |
| Address: | | | |
| Telephone # | | | |
| Description of Event: | | | |
| | | | |
| | | | |
| Date(s) Including Start and End Times: | | | |
| Description of Proposed Activity (ies) | | | |
| | | | |
| | | | |
| For Parades, Marches: Assembly Location, Route, Dispersal Location: | | | |
| Attach copy of route | | | |
| Expected Number and Type of Participants (persons, animals, vehicles): | | | |
| Audience/Spectator Estimate: | | | |
| Describe all crowd control, traffic control, or other safety measures: | | | |
| | | | |
| | | | |

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Insurance Information: _____

Issuing Company: _____

Public Liability Coverage Limit: _____

Requirements:

- You may be required to obtain a police detail or other additional municipal services. Costs for these are the responsibility of the applicant and prepayment, a deposit, or surety for payment may be required.
- You are required to provide us with Certificate of Insurance evidencing minimum public liability coverage of \$2,000,000 for the event and showing the Town of Franklin as an additional insured.
- NOTE: Approval of permit is based upon Town Administrator's determination that event will not pose a substantial risk of endangering public health, safety or welfare, based upon his application of public safety criteria, as provided in <u>Town Administrator's Policy and Procedure for Permitting of</u> <u>Parades, Performances and Assemblies.</u>

| Applicant, By: | | | | |
|-----------------------------|------------|-------|---|--|
| / - | Signature | Title | | |
| | | | | |
| _ | Print Name | | | |
| COMMENTS: FOR TOWN USE ONLY | | | | |
| | | | | |
| Police/Safety Off | icer: | | | |
| DPW: | | | | |
| BOH | | | | |
| | | | | |
| | | | | |
| Approval Ye | | | | |
| Conditions: | | | | |
| Signature: | | | _ | |

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