

TOWN OF SARATOGA
SPECIAL EVENTS APPLICATION

Applicant Name: <u>Sophia Dennis</u>	Organization: <u>Fall Fest</u>
Address: <u>Town Hall Parking</u>	Address: _____
City/State/Zip: <u>Saratoga NY</u>	City/State/Zip: _____
Phone: _____ Cell: _____ e-mail: _____	Phone: _____ Cell: _____ e-mail: _____
Date of the Event: <u>Oct. 10</u>	Start Time for Event: <u>1-8pm</u>
Location of Event: <u>Town Hall Parking Lot</u>	End Time for Event: <u>8pm</u>

Please check one:

- ☐ SMALL EVENT – less than 49 participants
☒ LARGE EVENT – more than 50 participants

Describe briefly the proposed event.

Fall Festival

Use additional sheet if necessary.

Location of the event(please be specific)

Town Hall Parking Lot + Spring Street

Schedule of event or events (attach by date the tentative activity planned for each location chosen).

Approximate number of participants expected: 100 +

Approximate number of support staff/volunteers: 20

Number of vehicles anticipated and parking requirements: ~~100 cars~~ no parking requirement

Will town property be used for this event: _____

☒ yes ☐ no (if yes, please explain fully)

Town Hall Parking Lot + Spring Street

❖ There is **NO CAMPING ALLOWED** within the Saratoga Town Limits and violators will be cited.

Coordination with the Town of Saratoga Department of Public Works (DPW)

- What traffic control or parking issues are you anticipating: None
- What parking plan have you in place: Public Parking
- What services do you require from the Police Department or DPW? :
None
- What are your security plans: : None
- What services are required from the Fire Department? :
None
- What services are required from the Planning Commission? :
None
- What plans have you made for garbage containment and removal? Sunrise Sanitation
- What plans have you made for sanitary control/portable toilets?:
Public Restrooms
- Will you be serving food? If yes, have you contacted the State of Wyoming Certified Food Safety Professional at 307-326-8001 for food service requirements: Food Trucks
- Alcoholic Beverages: Describe the location of any alcohol sales or serving stations, liquor license to be used, measures to insure proper ID for purchases and list persons supervising the operations.
None
- Liquor Liability insurance to be required as described in Special Events Conditions #5.
None
- Any other request by applicant: :
Street Closure/Power Pole
- Name of persons who will be "in charge" at the site/activity: :
Sophia Korg Dennis

On-site
Manager: Sophia Dennis
Home Phone: _____ Cell Phone: 307 321 8221
Alternate On-site Manager
Home Phone: _____ Cell Phone: _____

Insurance Information: (if applicable)

Name of Insurance
Company: None
Address: _____
Phone Number: _____
Contact Person: _____
Policy Number: _____

Please provide Certificate of Insurance naming the Town of Saratoga as an additional insured,

Billing Address (if different than previously identified)

Firm/Name: _____
Street Address: _____
City/State/Zip: _____
Fax Number: _____
Phone: _____

Special Terms and Conditions to the Special Event Application

By submitting and signing this Application, the applicant/organization hereby agrees to comply with the Town of Saratoga Special Event conditions (attached hereto and made a part thereof) and further agrees not to violate any Federal, State, County or municipal laws, rules or regulations. Applicant further agrees to be bound by all Saratoga municipal codes in the conduct of the requested special event.

In consideration for permission to conduct its special event, applicant agrees to indemnify, defend and hold harmless the Town of Saratoga, its officers, agents, employees and volunteers, (including the payment of the Town's attorney's fees incurred in defense of the same) from any and all damage to property, injury to, or death of any person and from any and all liability, claims, actions or judgments which may arise from the proposed activity.

The Town of Saratoga, its employees, appointed and elected officials hereby preserve any and all immunity available to them pursuant to Wyoming law and the Wyoming Governmental Claims Act, and nothing contained herein shall be deemed to be a waiver of its immunity.

Dated this 2, day of Sept, 2024

Sophia Dennis
Applicant Signature



What other agencies or groups have you contacted?

Have you received Applications from these agencies for your event (IF APPLICABLE)?

Please circle applicable agencies and attach a copy of the Application.

- ☐ Saratoga Planning Commissioners –(zoning issue if event is not an applicable use)
- ☐ Zoning and Planning Officer – (events requiring zoning clarification)
- ☐ Saratoga Department of Public Works (street closures – use of public parks)
- ☐ Saratoga Police Department: (events with alcohol sales or use – crowd control)
- ☐ Wyoming Highway Department –(parades or use of Highway 130/230)

TOWN OF SARATOGA SPECIAL EVENTS SIGN OFF SHEET

Proposed Special Event: _____

Date of Special Event: _____

Approved: _____ **Date:** _____
Planning and Zoning Officer

Approved: _____ **Date:** _____
DPW Supervisor

Approved: _____ **Date:** _____
Police Chief

Approved: _____ **Date:** _____
Fire Chief

Approved: _____ **Date:** _____
Planning Commission

Approved: _____ **Date:** _____
Town Council

TOWN OF SARATOGA
SPECIAL EVENTS APPLICATION CONDITIONS



Please initial each condition as read

1. SD Application holder shall obey all Federal, State, and local rules, regulations and laws. Application holder shall obey all Town of Saratoga municipal ordinances, rules and guidelines pertaining to the use of Town property, including the location and storage of vehicles and equipment, crowd control, and the restoration of premises to their original condition after the use for the special event.

2. SD Application holder shall confine its activities to the location and time schedules approved for the Application. Traffic control shall be maintained as approved by the Saratoga Police Department and configured by the Saratoga Public Works Department when events are conducted on Town streets or on Town property.

3. SD Reference to or the use thereof of the Town of Saratoga Logo is strictly prohibited in advertising of the event, unless prior written approval is granted by the Town of Saratoga.

4. SD Application holder does hereby covenant and agree to indemnify and hold harmless the Town of Saratoga harmless from any and all loss, cost, damages, injuries, judgment and claims of any kind, including and an all costs, including any attorney's fees, on account of personal injury or property damage resulting from any activity of Application holder.

5. SD In no way limiting the indemnity agreement above, Application holder will furnish to the Town of Saratoga a certificate of insurance providing liability, casualty and property coverage acceptable to its legal department showing combined single limit coverage for death or bodily injury, property damage or loss, marine and fire protection, or the equivalent of such coverage, not less than \$1,000,000.00. Applicant shall, if given permission to sell liquor, provide insurance enforcement for liquor liability naming the Town of Saratoga as additional insured for the amount of at least \$1,000,000.00. The Town of Saratoga, including its officials, employees and agents, shall be named an additional insured in the liability policy. Contractual liability coverage insuring the obligations of this agreement is also required. The insurance cannot be cancelled or substantially modified without ten (10) days notice to the Clerk of the Town of Saratoga.

6. SD Application holder shall reimburse the Town of Saratoga for costs incurred in the use of Town equipment and assignment of municipal employees to duty in connection with the special event activities. A schedule of expected costs shall be prepared by the Saratoga Department of Public Works Supervisor after identification of the municipal sites to be used for the special event. Application holder shall post a cash bond as a refundable deposit against the estimated cost when requested.

7. SD Neither the Application holder, nor its agent, employees, servants or helpers shall be or deemed to be, the employee, agent or servant of the Town of Saratoga. None of the benefits provided by the Town of Saratoga to its employees, including, but not limited to medical insurance, compensation insurance, and unemployment insurance are available to Application holder or its employees, agents, servants or helpers.

8. SD Fees shall be charged for the use of Town Property: Application holder shall not conduct any event on Town property intended to attract or entertain the public or charge fees to spectators without specific approval of the Town of Saratoga in writing. No alterations or changes to Town owned property would be allowed without prior written permission from the Town Council or their designee.

9. SD Additional Applications and fees may be required for use of facilities of the Town of Saratoga and entry upon areas subject to special security requirements, such as the Saratoga Lake area, Veterans Island, Kathy Glode Park or the Hot Pool and Municipal Pool areas. Use of such facilities and areas may be further conditional upon assurances of compliance with security and other requirements of these facilities.

10. SD Application holder shall designate a local agent to sign this Application application who shall have the authority to represent them in all matters relating to exercise of the privileges herein granted and who shall be responsible for compliance with these conditions.

11. SD Arrangements for use of Town property, (i.e. building, streets/alleys, sidewalks, parks or other public places or property) owned by the Town must be approved by the Town Clerk in writing in advance of the actual event.

12. SD If Application holder finds it necessary or desirable to use Town equipment, only Town employees will be allowed to operate said equipment, unless prior arrangements in writing are made and then only with the prior approval of the DPW Supervisor.

13. SD The Application holder will be required to reimburse the Town as provided for contracting/ use of town services, equipment, building, or if not addressed, for the wages due the employees, calculated at their regular hourly overtime rate and including all withholdings required by the federal and state governments. In addition, the Application holder will be responsible for reimbursing the Town for additional bookkeeping or clerical costs.

15. SD Application holder shall be responsible for all additional costs incurred by the Town of Saratoga for garbage and sanitary clean-up due to the special event.

Application approved:

Mayor /Clerk

Date: _____



TOWN OF SARATOGA

PO BOX 486

PHONE: 326-8335

APPLICATION FOR STREET CLOSURE

DATE: _____

A street closure permit issued by the Town of Saratoga authorizes any person holding the authority to temporarily close any area to vehicular traffic for any gatherings within the municipal boundaries of the Town of Saratoga, and under the Town of Saratoga Municipal Code 5.08.220

APPLICANT NAME: Sophia Dennis

BUSINESS NAME: Fall Fest

BUSINESS ADDRESS: _____

PHONE NO. 307 321 8221

REASON FOR PERMIT REQUEST: Fall Fest

LOCATION OF OFF -PREMISES: Spring St.

DATE(S) REQUESTED: Oct 10 TIME: 1pm - 8pm

ORIGINAL PERMIT REQUEST

TIME: 1pm STREET: Spring St.

ADDITIONAL REQUEST:

TIME: _____ STREET: _____

TIME: _____ STREET: _____

PARKING LOT CLOSURE: Oct. 10 TIME: 1pm - 8pm

RE-ROUTE TRAFFIC: _____

THE FOLLOWING IS FOR OFFICIAL USE ONLY

APPROVED BY: _____ DATE: _____

MAYOR SIGNATURE

APPROVED BY: _____ DATE: _____

CLERK SIGNATURE