



TOWN OF SOUTHAMPTON

2022 SPECIAL EVENTS APPLICATION

COVID-19 Safety Plan required with all Applications

Southampton Town Code Chapter 283 Special Events requires specific material to be submitted as indicated on the application checklist provided. Chapter 283 may be accessed on the Town website at www.southamptontownny.gov under the link for Town Code. As each event has a different impact on the community and town resources, you will be notified if additional materials are necessary. If a section is not applicable, indicate N/A. It is the applicant's responsibility to ensure that the application package is complete and accurate.

NO BLANKS. If the property proposed for a special event is covered by any easement or covenant of any kind please provide a copy of all relative documents so they can be reviewed for compliance with your proposed event. Questions can be directed to specialevents@southamptontownny.gov

Incomplete Applications will not be processed

Complete Applications MUST be submitted at least 90 DAYS prior to the event.

NAME of EVENT _____	DATE(S) of EVENT _____	APPLICATION FEE (see pg.4) \$ _____	LATE FEE (see pg.4) \$ _____
RAIN DATE(S) of EVENT _____			

SUFFOLK COUNTY TAX MAP NUMBER(S) 0900 - _____ - _____ - _____ 0900 - _____ - _____ - _____ 0900 - _____ - _____ - _____ section block lot	EVENT LOCATION (Note: Street number(s) must be posted. Town Code §286) _____ Street _____ Hamlet _____ PARKING LOCATION (if parking will take place offsite) _____ Street _____ Hamlet _____
---	---

APPLICANT or RESPONSIBLE OFFICER **Charity** ____ **501(c)(3)** ____ **Other** _____

Name _____ Mailing Address _____ City/Hamlet/Village _____ State _____ Zip _____
(_____) Telephone _____ Email address: _____

Note: If the applicant does not own the property, or if the owner is a Corp. or Partnership, the endorsement on page 9 must be submitted.

CONTACT PERSON - If different from Applicant for all correspondence, including permit Same as applicant

Name _____ Mailing Address _____ City/Hamlet/Village _____ State _____ Zip _____
(_____) Telephone _____ Email Address: _____

OWNER of the PROPERTY Same as applicant

Name _____ Address - Residence _____ City/Hamlet/Village _____ State _____ Zip Code _____

PERSON RESIDING IN SUFFOLK COUNTY, authorized to Accept Notices, Summonses or Other Violations with Respect to the Event.

Same as applicant **DOB** _____ **Note: Notarized affidavit for consent of service on page 11 must be submitted.**

Name _____ Address - Residence _____ City/Hamlet/Village _____ State _____ Zip Code _____

PERSON RESPONSIBLE FOR ON SITE MANAGEMENT OF THE EVENT Same as applicant

Name _____ Mailing Address _____ City/Hamlet/Village _____ State _____ Zip Code _____
(_____) Telephone _____ Email address _____

ATTORNEY If applicable N/A

Name _____ Email Address _____



TOWN OF SOUTHAMPTON

2022 SPECIAL EVENTS APPLICATION

EVENT INFORMATION

TOTAL PEOPLE Per Day _____

Attendees _____	Caterers _____	Sound _____	Music _____
Spectators _____	Chefs _____	Entertainment _____	Vendors _____
Employees _____	Wait Staff _____	Electrical _____	Exhibitors _____
Organizers _____	Animal Care _____	Bartenders _____	Other _____

DURATION: _____ day(s)

DATE(S) of Event: ____/____/2022 to ____/____/2022 **Hours of Event:** _____ am / pm to _____ am / pm

For events of more than one day in duration, please include additional information with regard to dates and hours of operation

DATE(S) for SET UP _____ **DATE(S) for SITE TO BE CLEANED UP** _____

Please note insurance certificate must include coverage for set-up and clean-up dates.

ADMISSION FEE: \$ _____ (General Admission)

SPECIAL ADMISSION FEES (tables, groups, children, seniors, etc.) _____

EVENT DESCRIPTION: Provide website: _____

AND please provide a description including a detailed explanation of the purpose of the proposed event, the nature of the activities to be carried on, the objective and how the event is in compliance with the Town Code. Additional sheets may be added if necessary.

LOCAL GROUPS, ORGANIZATIONS, CHARITIES OR INDIVIDUALS who will benefit from the proceeds of the event and who are designated to receive proceeds. As defined in NYS Executive Law 171, a **local charity** is one that has offices within the Town of Southampton or an organization that provides services or funds that **directly** benefit Southampton Town residents.

Name _____	Mailing Address _____	City/Hamlet/Village _____	State _____	Zip Code _____	\$Amount _____
------------	-----------------------	---------------------------	-------------	----------------	----------------

Name _____	Mailing Address _____	City/Hamlet/Village _____	State _____	Zip Code _____	\$Amount _____
------------	-----------------------	---------------------------	-------------	----------------	----------------

As defined in Town Code §283, an applicant that is not a charitable organization shall have 90 days after the event to submit proof in writing including copies of cancelled checks to the Town Clerk's Office that pledges listed above were received by the Designated Charity.

If your organization is not a charitable organization, as defined in CH 283-1 of Southampton Town Code, please describe and note how the event will directly benefit a local charitable organization.

SIGNAGE

All signs should be removed within 3 days of the termination of the event. Flashing or moving signs are prohibited, Town Code §330-203B(8).

Freestanding Signs ONSITE

Number _____
Size _____
Location _____

Freestanding Signs OFFSITE

Number _____
Size _____
Location _____

(List all locations within the Town of Southampton; include dates.)

FIREWORKS

Date: _____

Time: _____

Location: Attach site plan

INCIDENT ACTION PLAN

NYS fire code requires an emergency plan. The incident action plan with the application **must be** submitted and approved by Chief Fire Marshal prior to the event. Plan attached: yes _____ no _____



TOWN OF SOUTHAMPTON

2022 SPECIAL EVENTS APPLICATION

SUBMIT PLANS, DRAWINGS, INCLUDING HANDICAP ACCESSIBILITY, AND COMPLETE THE FOLLOWING REQUESTS FOR INFORMATION

THE FOLLOWING INFORMATION MUST BE SUBMITTED: A DETAILED MAP OR PLAN, DRAWN TO SCALE, SHOWING ALL OF THE REQUIRED ELEMENTS LISTED BELOW WITH A SUMMARY OF ITEMS INCLUDED ON MAP, AS WELL AS ALL OTHER APPLICABLE INFORMATION AND MATERIAL REQUIRED.

PLEASE INDICATE BY CHECK MARK THE FOLLOWING INFORMATION WHICH HAS BEEN INCLUDED IN PLANS SUBMITTED. INSERT "N/A" IF NOT APPLICABLE. NO BLANKS.

1. ___ Filing Fee: *Number of Set Up days* _____ *Number of Event days* _____

- (1) for 1 day event with less than 250 people: **\$50 per event day; \$25 per set up day**
- (2) for events occurring over more than two days and/or events with 250 - 500 people: **\$150 per event day; \$75 per set up day**
- (3) for events occurring over more than two days and/or events with 500 - 1000 people: **\$300 per event day; \$150 per set up day**
- (4) for events occurring over more than two days and/or events with 1000 - 3000 people: **\$650 per event day; \$250 per set up day**
- (5) for events occurring over more than two days and/or events with more than 3000 people: **\$1,350 per event day; \$600 per set up day**

Filing Fee, Parcels with PDD designation: (1) for 1 day event with less than 250 people: **\$50 per event day; \$25 per set up day**
 (2) for events occurring over more than one day and/or events with 250 - 500 people: **\$100 per event day; \$50 per set up day**
 (3) for events occurring over more than one day and/or events with more than 500 people: **\$200 per event day; \$100 per set up day**

Late Application Fee: **\$10/per day** beyond the submission deadline in §283-2B. If more than 30 days late: **\$25/per day** fee.
APPLICATION WILL CONTINUE TO ACCRUE LATE FEES UNTIL DEEMED COMPLETE

Summonses may be issued to events that exceed the number of attendees on the permit.

Any **amendment** to the application for a Special Event permit will be subject to an amendment fee of **25%** of the applicable application fee. Amendments may include changes to the location, route, parking plan, number of people expected, etc. Amendments to Incident Action Plans or Parking Plans at the request of the Town are not considered amendments to the application.

2. ___ Comprehensive Liability Insurance Policy naming the Town of Southampton, 116 Hampton Road, Southampton, NY 11968 as an additional insured in the amount of \$1,000,000. If serving alcohol, Liquor Liability Insurance naming the Town of Southampton as an additional insured will also be required. *Insurance coverage must include set-up and break-down time and must list the name, date & location of the event under description of operations.*

3. ___ Disclosure Affidavit, Owner's Endorsement, Authorization for Inspection & Indemnity, Consent of Agent for Service on pages 7 - 11, of application. **GARDEN TOURS ONLY:** separate form to replace 8&9.

4. ___ Copy of current contract or agreement with property owner.

5. ___ Detailed Map, Plan or Sketch, Drawn to Scale, showing the following, on 8½ x 11 paper:

Location, Size and Number of the Following:

- a. ___ Existing Building(s) or Structure(s)
- b. ___ Proposed Temporary Building(s), Structures(s) or Trailer(s)
- c. ___ All Access Roads Including Internal Circulation
- d. ___ Tent(s), including size, number and location. **Permit required from Chief Fire Marshal for all tents greater than 200 square ft.** Contact 702-2919 for more information.
- e. ___ Stages, Decks, Bleachers, Platforms (**If applicable certification and/or inspection**)
- f. ___ Areas of Assembly for Spectators, Vendors, Exhibitors, Employees, Organizers, Animals
- g. ___ Exits, Width(s) Specified
- h. ___ Restrooms, Including Handicap Accessibility
- i. ___ All Temporary Utilities
 ___ Generator(s) ___ Fuel Storage ___ Cooking Facilities ___ Water (Supply, Storage, Distribution)
- j. ___ All Audio Equipment (Loudspeakers, Horns, Music, etc.)
- k. ___ Location of Fire Extinguishers, Location of Fire Lanes, Location of Water Supply
- l. ___ Dumpsters, Trash Barrels

6. ___ Letter from Participating Charity, confirming the anticipated donation. Non-profit organizations must show proof of 2021 donation in the form of a cancelled check 90 days after the event date.

7. ___ Incident Action Plan. Any questions regarding this document, call the Chief Fire Marshal's Office at 702-2919 or JJRankin@southamptontownny.gov



TOWN OF SOUTHAMPTON

2022 SPECIAL EVENTS APPLICATION

8. ___ Use of Town Facilities. If the Event is to be held at a Town Park, Beach or other Town-owned Property a "Facility Use Permit" is required pursuant to Town Code §111-3D. If and when both a facility use permit and a special event permit are required, the validity of the facility use permit is contingent upon issuance of the special event permit (Southampton Town Code 283-7). Please contact Parks & Recreation (728-8585) for information regarding a facility use permit. In addition all vendors hired by host shall provide proof of general liability, workers compensation, disability insurance and licenses required by New York State, Suffolk County or the Town of Southampton
9. ___ Plan for Disposal of Garbage, Trash, Rubbish and Sanitary Waste and Sewage including dumpster location. Attach Town of Southampton Solid Waste Collection Permit (Southampton Town Code 205-5)
10. ___ Parking Plan both onsite and offsite (if applicable) including method of transport, layout, ingress and egress, loading and delivery, passenger pick-up/discharge.
11. ___ Plan, drawings and locations for All Signs.
12. ___ Lighting Plan. Include Type(s) of lighting, overhead, ground etc. and number of fixtures by type (search lights, strobe lights, laser lights or revolving lights are prohibited, Town Code 283).
13. ___ Copy of Any Applicable Legal Protective Measures (Covenants, Easements, Indentures or Other Restrictions, Including Approvals/ by the Southampton Town Board, Planning Board, Zoning Board of Appeals or Conservation Board.)
14. ___ Additional Town permits may be required: (1) Events with Animals (Southampton Town Code §150-9). Contact Department of Animal Control, 702-2915 (2) Events with Fireworks (Southampton Town Code §164-5). Contact Fire Prevention, 702-2919.
15. ___ Copy of Sanitary, Food Service or other Health related permits issued by the Suffolk County Department of Health Service along with a valid Workers Comp Certificate listing the Town of Southampton as certificate holder. If alcohol is being served, additional insurance for Liquor License and NY State Liquor Permit is required. (See page 3)
16. ___ Security Company: A copy of a NY State License must be submitted, along with a valid Workers Comp Certificate listing the Town of Southampton as certificate holder and a copy of the Certificate of Liability Insurance. A signed contract must be attached if 250+ attendees are expected along with a security plan, Crowd Manager's certificate and ID for each manager that is required (Page3).
17. ___ Parking Company: A copy of a valid Workers Comp Certificate and listing the Town of Southampton as certificate holder. A signed contract must be attached if 500+ attendees are expected (See page 3).
18. ___ Residential Zoning Requirement, CH 283-3H.
19. ___ Copy of Electrician's Suffolk County Electrician's License (See page 3).

PLEASE SUBMIT ORIGINAL APPLICATION, PLANS & ALL DOCUMENTATION

I hereby depose and certify that all the above statements and information and all statements and information contained in the supporting documents and drawings attached hereto are true and correct. I hereby agree to provide notice in writing to the Town Clerk's Office immediately, should there be any material changes regarding the information submitted in this application. I hereby authorize officials and employees of the Town of Southampton to enter the property to make any and all inspections necessary in connection with this Special Event.

Sworn to before me this

_____ day of _____, 2022.

Name of Applicant

Notary Public

Applicant Signature

A false statement made herein is punishable as a class A misdemeanor pursuant to section 210.45 of the penal law of the State of New York.

***NOTICE: A violation of any of these provisions of chapter 283 pertaining to special events permits shall be a misdemeanor and shall be punishable as the chapter provides.**



TOWN OF SOUTHAMPTON

2022 SPECIAL EVENTS DISCLOSURE AFFIDAVIT

5. During the preceding 24 months before the filing of this application, have any of the following individuals employed any Town officer or employee or a relative thereof involving compensation in an amount of \$500 or more? Said compensation may be directly made, or indirectly made through a corporation or business interest held by any Town officer or employee or their relative.

- | | | |
|---------------------------------|-------|-------|
| | Yes | No |
| a. Owner | _____ | _____ |
| b. Applicant | _____ | _____ |
| c. Agent for owner or applicant | _____ | _____ |
| d. Attorney | _____ | _____ |
| e. Other | _____ | _____ |

If the answer to Question 5 is yes, Town Code Chapter 23 requires that the information be provided below:

<u>Name</u>	<u>Position (Owner, Agent, Attorney, Other)</u>	<u>Corporation</u>

Applicant Signature

Sworn to before me this _____ day of _____, 2022.

Notary Public

A FALSE STATEMENT MADE HEREIN IS PUNISHABLE AS A CLASS "A" MISDEMEANOR PURSUANT TO SECTION 210.45 OF THE PENAL LAW OF THE STATE OF NEW YORK

For the purposes of this disclosure, an official of the State of New York or an elected or appointed official or employee of the Town of Southampton shall be deemed to have an interest in the applicant and/or owner when that official or employee, their spouse, brothers, sisters, parents, children, grandchildren or the spouse of any of them is:

- the applicant or owner; or
- an officer, director, partner, or employee of the applicant or owner; or
- Legally or beneficially owns or controls stock of a corporate applicant or owner, or is a member of a partnership or association applicant or owner; or
- Is a party to an agreement with the applicant or owner, express or implied, whereby said official or employee may receive any payment or other benefit, whether or not for services rendered, dependent or contingent upon the favorable approval of such application. Ownership of less than five percent of the stock of a corporation whose stock is listed on the New York Stock or American Stock Exchange shall not constitute an interest for the purposes of this disclosure.



TOWN OF SOUTHAMPTON 2022 AUTHORIZATION FOR INSPECTION AND INDEMNITY AGREEMENT

Property Owner Page 1 of 1

**IF MORE THAN ONE OWNER, A SEPARATE PAGE MUST BE SIGNED AND SUBMITTED
BY EACH PROPERTY OWNER**

STATE OF NEW YORK }

}ss:

COUNTY OF SUFFOLK }

I, _____, being by me duly sworn,
please print name

deposes and says: I am the Owner of the Property located at:

described in the foregoing Application, and that I have authorized Officials and Employees of the Town of Southampton to enter my property to make all inspections necessary in connection with this Special Event.

Furthermore, in consideration of issuance by the Town of a Special Event Permit on the Property, the Owner voluntarily agrees to indemnify and hold the Town of Southampton and its officers, employees, and agents harmless from and against any and all losses, liabilities, damages, or costs sustained by any person for personal injury, death, or property damage arising out of, or as a consequence to the Special Event.

The undersigned further agrees to indemnify and hold harmless the Town and its officers, employees, and agents from and against any and all losses, liabilities, damages, or costs which may be imposed upon, incurred by or asserted against the Town by reason of any act of omission of the undersigned, which result in damage or injury of any kind to any person or any property and which arises out of or is any way connected with the event permitted by this permit.

Signature of Property Owner

(If Owner is a corporation, please indicate name of corporation and title of corporate officer whose signature appears above)

Sworn before me this

_____ day of _____, 2022.

Notary Public

