

City of Amsterdam Special Event Permit

Please note: 48 hours prior to date of event, all vendors or suppliers of services, including applicant, must supply any and all required permits and/or licenses required by any Federal, State, or local governing, regulatory or permitting agencies AND a Certificate of Insurance naming the City of Amsterdam as additionally insured.

Minimum liability insurance required: \$1,000,000.00 and proof must be submitted with the application.

1. _____
Name of Applicant, Organization or Group: _____
If not-for-profit, New York State ID#: _____
Business or mailing address of Applicant: _____ City, State, and Zip: _____
Contact Person: _____ Telephone No. _____

2. _____
Nature of event: _____ Date or dates of event: _____
Number of people expected to attend: _____ FROM: _____ A.M. TO: _____ A.M.
_____ P.M. _____ P.M.
Will function be held: INSIDE _____ OUTSIDE _____ BOTH _____
Name of place where event is to be held: _____
Street address where event is to be held: _____
Is the gathering being held for the benefit of anyone other than the applicant? _____ NO If yes, state name of beneficiary:
_____ YES
Will anyone other than the applicant or the beneficiary named above be sharing the receipts from this gathering? _____ NO If yes, provide details:
_____ YES

3. _____
Attach a diagram of the area to be used. Answer the questions below and indicate these items on the diagram.
Will there be: FOOD: _____ NON-ALCOHOLIC BEVERAGES: _____ ALCOHOLIC BEVERAGES: _____
GAMES OF CHANCE: _____ FIREWORKS: _____ OTHER (describe) _____ offered at this event?
Number of bars or stands (if any) serving alcohol beverages: _____ Number of rest rooms available: _____
Area where consumption of alcoholic beverages will be restricted to: _____ Number of entrances to restricted area: _____

4. _____
Will anyone other than the applicant be providing any of the above? _____ NO
_____ YES
If yes, state name and address of provider(s): _____

5.

Who will provide security for this function?

Will this function be open to the public? YES
 NO

Attach a letter from the Amsterdam Police Department stating that they are aware of the function AND have reviewed proposed security:

6.

RIVERLINK PARK APPLICANTS

Special Event applications for the use of the Riverlink Park must be submitted to the Waterfront Commission for review.

All events held at Riverlink Park must be accessed by use of pedestrian bridge. The at-grade railroad crossing on Front Street is for the use of maintenance, service and emergency vehicles ONLY and CANNOT be used for any other reason.

Will this event require a crossing permit for any maintenance or service vehicles? NO YES

7.

This certification must be signed and dated by: the individual applicant OR each member of a partnership OR an officer duly authorized by order of the Board of Directors of the applicant corporation, group or association to make statements and answers in this application on behalf of said applicant entity, with the same force and effect as if said entity made such statements and answers itself.

I certify that I know the contents of this application and the statements contained herein: that the same are true of my own knowledge; and that I am authorized to execute this application and sign this certification. I further certify that I have read the terms and conditions for the applied for permit and agree to comply with this conditions.

_____	_____	_____
Authorized Signature	Title	Date
_____	_____	_____
Authorized Signature	Title	Date

PROVIDE THE FOLLOWING FOR ALL AUTHORIZED SIGNATURES ABOVE (attach additional sheets if necessary)

Print Name: _____ Date Of Birth: _____ Age: _____

Residence street address of above: _____ City, State, ZIP _____

Home Telephone: _____ Work Telephone: _____

OFFICE USE ONLY: APPROVED: Wtrfrnt Comm date _____ Rec. Dept. date _____ City Clerk date _____