

| Parks Dept. Use Only | | | |
|---|------------|--|--|
| Damage Deposit Fee | Receipt #: | | |
| Rental Fee: | Receipt #: | | |
| Maintenance Cost: | Receipt#: | | |
| Event & Festival Application :(if applicable, copy) Yes No | | | |
| Notes: | | | |
| | | | |



Springfield Department of Parks, Buildings, and

Recreation Management

Park Permit – Riverfront Park

| Name Of Organization | Contact Name: |
|--------------------------|---------------|
| Email: | Address: |
| City: | State: |
| Zip Code: | Phone Number: |
| Additional Phone Number: | |

Event Information

| Date of Event: | | Rain Date: | |
|-----------------------------|--|--------------------|--|
| Number of People Attending: | | Set up Time AM/PM: | |
| Start Time AM/PM: | | End Time AM/PM: | |
| Notes: | | | |
| | | | |

All checks are payable to the City of Springfield

*All fees, including maintenance costs, must be paid a minimum of 30 days in advance to secure your Park Permit. *

Costs / Information

| Mandatory Damage Deposit: Please include payment with this application, if there is no damage, a refund will be issued. Amount: \$200.00 | Staff Use Only Amount: |
|---|-------------------------------------|
| Park Rental Fee: Amount: \$300.00 | Staff Use Only Amount: |
| Mandatory Maintenance Cost: (Must be a minimum of 4 hours) Park Employee: \$45.82/hr. Electrician: \$57.61/hr. | Staff Use Only Total Hours: Amount: |

Cancellations MUST be made five business days before the occasion to qualify for a refund.

| Organizer is responsible for contacting and coordinating with Amtrak and the Springfield Parking Authority | | | |
|--|--|--|--|
| *Amtrak Cost: (Must be a minimum of 4 hours) for the use of the Amtrak gates open for set up, entrance, exit, and take down the personnel coverage during the event. | Contact Amtrak, for further information via email David Bouteiler: David.Bouteiller@amtrak.com Robert Deida: Robert.Deida@amtrak.com | | |
| *Parking Authority: Please arrange for parking access under the I91South parking garage. Address:1620 E Columbus Ave, Springfield, MA 01103 | Contact the Springfield Parking Authority at 413-273-8440 for further information. | | |

Additional anticipated cost to be paid by park applicant



| | Special Circumstances | | | |
|--|--|---|--|--|
| Banners | Tents | | | |
| banners | rents | Mega-Shell (Separate Application) | | |
| Electricity | Trash Receptacles | Selling Items (Hawkers/Peddlers License can be obtained from Police Department) | | |
| music) require an application fi (21) prior to your scheduled ev Please contact the Licensing I | rom the City of Springfield Law Deent so all departments can review a Department in City Hall Room 305 | 11 | | |
| | ghout the park during set up, start t | | | |
| APPLICA | ANT IS RESPONSIBLE FOR OB | TAINING ALL NECESSARY LICENSES | | |
| All Parks (| Open at Dawn | All Parks Close at Dusk | | |
| No Fire | s Allowed | Alcoholic Beverages Prohibited | | |
| All Areas Must Be | Left Clean & Orderly | Affixing of Notices is Prohibited | | |
| No Admission | May Be Charged | Live Animal Rides Prohibited | | |
| | No Amusement Rides / Bounce Houses | / Inflatables or Mechanical Operations | | |
| Please complete below | | | | |
| I hereby attest that the p | preceding information is true. Furth | er, I agree to abide by the Rules and Regulations of the | | |
| Springfield Board of Park Comn | nissioners as stated on the regulatio | ns information sheet. I agree to reimburse the City of | | |
| Springfield, Department of Par | rks, Buildings, and Recreation Ma | anagement, for any costs incurred in furnishing this property for | | |
| our use. (Such costs include but | are not limited to trash pickup; clea | an up after the event; and/or repair of damages to park property.) | | |
| The deposit will be refunded, pro | ovided none of the aforementioned | situations occur. | | |
| As the Responsible Part | y/Authorized Representative of the | Applicant for this Permit, I (name)agree to the | | |
| aforementioned and following co | onditions for the use of park propert | ies. I/WEhereby agree to and shall at all times, | | |
| defend, indemnify, and hold the | City of Springfield and its officers, a | gents, and employees, wholly harmless from any and all | | |
| losses, costs, expenses (including court costs and attorney's fees and - interest), claims, demands, suits by any person or | | | | |
| persons, for property damage, personal injuries, including death, and other liabilities of whatever kind of nature, caused by, | | | | |
| resulting from incident to, connected with, or arising directly or indirectly out of acts or omission of anyone using park property | | | | |
| pursuant to this Permit. This indemnity shall survive termination of the agreement. | | | | |
| I have received a copy and agree to abide by the Rules and Regulations of the Board of Park Commissioners. Failure to comply with all policies and procedures may result in additional fees. | | | | |
| Signature of Applicant | olicantDate: | | | |
| If Damage Deposit Was Retained, Explain: | | | | |
| Park Department Authorized | Signature: | Preliminary Date Approved: | | |
| Park Department Authorized | Signature: | Final Date Approved: | | |