



Facility Use Permit Application

Parks and Recreation Department

Kristen M. Doulos
Town Parks Director

6 Newtown Road • Hampton Bays, NY 11946

Tel (631) 728-8585 Fax (631) 728-8525

www.southamptontownny.gov/parksrec

Receipt of the application is not a guarantee of facility use. Application will not be finalized until approved and executed by the Parks and Recreation Town Parks Director or designee. **Submit application form to: Town of Southampton Parks & Recreation Department, 6 Newtown Rd., Hampton Bays, NY 11946**
Fax: (631) 728-8525 or via Email: ParksAndRec@southamptontownny.gov.

Today's Date _____

Type of Facility Requested ☐ Park ☐ Activity Center ☐ Field ☐ Beach

Name of Facility _____

Name of Resident/Applicant _____

Organization (if applicable) _____

All paperwork, including any refunds, will be made out in the organization's name.

Is your Organization: 501 (C), Not for Profit, or Non-Profit? ☐ Yes ☐ No If yes, please attach a copy.

Address _____

City _____ State _____ Zip Code _____

Phone numbers: Home _____ Cell _____

Work _____ Fax _____

Email Address _____

Secondary Contact _____ Phone _____

Event Details

Name of Event _____ Expected Attendance _____

Type of Event _____ Estimated # of Vehicles _____

Description of Event/Activities _____ #of Parking waivers if needed _____

If use of facility requires any special setup, traffic control, etc., please complete Special Requests Section below.

Special Requests

Event Dates and Times

Day(s) of Week	Date(s) (mm/dd/yy) Please include all setup & takedown time	Start Time	End Time

Further details regarding times

Additional Information

Please answer all questions correctly. Unanswered questions may delay your request.

1. Is this event open or advertised to the public? * Yes ☐ No ☐
2. Is this a fundraising/revenue producing event? * Yes ☐ No ☐
3. Will there be soliciting or selling of any kind? * Yes ☐ No ☐
4. Will you be serving beer or wine? **ONLY PERMITTED AT BEACHES & TIANA BEACH ACTIVITY CENTER**
If yes, Complete Alcohol Permit Application Yes ☐ No ☐
5. Will you be charging a fee for this event? If yes, how much? _____ Yes ☐ No ☐
6. Will you be using a caterer? If yes, please fill out information below: Yes ☐ No ☐

Contact Person _____
 Business Name _____
 Address _____
 City _____ State _____ Zip _____
 Contact Phone# _____ 4x4 Permit# _____
7. Will you be using an Event Planner? If yes, please fill out information below: Yes ☐ No ☐

Contact Person _____
 Contact Phone# _____ 4x4 Permit# _____
8. Will this event be having some type of music? **NOTE: AMPLIFIED MUSIC IS PROHIBITED AT ALL SOUTHAMPTON TOWN BEACHES & PARKS.** Yes ☐ No ☐
☐ If yes, what type? _____
9. Will you be requesting a contained fire? If yes, describe container _____ Yes ☐ No ☐
10. Will there be any type of display or advertising at the event? Yes ☐ No ☐

***IF YOU ANSWERED YES ON QUESTIONS 1, 2 OR 3, PLEASE CONTACT THE SOUTHAMPTON TOWN FIRE MARSHAL'S OFFICE FOR A SPECIAL EVENT APPLICATION (631-702-2919)**

IMPORTANT CONSIDERATIONS:

1. Consumption, sale or distribution of alcoholic beverages requires approval from Town Board and a Special Occasion Liquor License which can be obtained through the New York Business Express.
2. A Business License may be required for the sale of any items on public property.
3. Request for a road closure or parking restrictions requires approval from Southampton Town Police Department.
4. Discharge of fireworks or other explosives is **prohibited without** a Fireworks Permit from the Town Fire Marshal's office and specialized State and Federal licensing.
5. Flying of unmanned air vehicles (UAVs) or "drones" may require a special operations certificate. Check out the official FAA for state and federal laws.
6. Should any assistance be provided by the Town, the applicant is required to pay these costs.

REQUIREMENTS:

1. Applicant is required to pay facility fee upon submission of permit (unless otherwise directed).
2. Applicant is required to provide the Town with a refundable damage deposit depending on size and type of event upon approval of permit (if applicable).
3. Applicant is required to provide proof of insurance (**\$1,000,000 LIABILITY** w/ Town as Add'l Insured) prior to the event indemnifying the Town of Southampton of any liability OR applicant is required to purchase a user group insurance policy through the Town, if applicable. **NOTE:** Certificate Holder **MUST** be addressed to: **Town of Southampton, 116 Hampton Road, Southampton, NY 11968.**
4. No costs are to be incurred by the Town. All costs, direct or indirect, associated with the event are the responsibility of the applicant.
5. Applicants are required to ensure all Town regulations and applicable bylaws are followed.

RULES/REGULATIONS/INDEMNIFICATION

Please **READ CAREFULLY**. Complete and/or initial on the following important policies, rules and regulations:

- a. For proof of residency, please attach a copy of your **VALID** driver's license (*MUST be 18 & over for Facility Permits & 21 & over for Beach Gatherings*) and a current, 6 month & 1 year ago of electric/cable bills or a Southampton Town Tax Bill. All applications are approved on a case by case basis, subject to certain restrictions and availability of facility and staff.
- b. Set-up/clean-up/removal of decorations will be the responsibility of the group. Please include this in your requested time. **You will not be given access prior to the time scheduled on your permit.** Non-compliance of this policy will cause forfeiture of the refundable security deposit. The deposit will be refunded to the applicant if the facility is left clean and free of damage.
- c. If group is an organization, issue refundable deposit to: _____ **Allow at least 14 working days**
- d. **Consumption of alcohol is only permitted on Southampton Town Beaches.** Violation of this regulation will mean forfeiture of the refundable security deposit and cancellation of your event at time of infraction.
- e. Parking is only permitted in designated areas. No parking on grass or walkways.
- f. Gambling is not allowed on Southampton Town properties.
- g. Other permits may be required depending on the type of event (i.e. Special Events, Fundraisers, Films/Photoshoots.)
- h. Law Enforcement intervention due to violation of rules and regulations will mean cancellation of event and may incur additional charges, affect future use and forfeiture of any remaining fees and security deposit paid.
- i. **Submission of the completed form does not guarantee you the site or date.** You will be notified if the site is available or not.
- j. If booking Red Creek Park Activity Center or Tiana Beach Activity Center, submit the completed application form along with the full payment and refundable security deposit. If facility or any other alternative is unavailable, your payment and security deposit fee will be refunded to you within 7-14 business days.
- k. **Cancellation Policy:** Facility Use Permits are **NON-REFUNDABLE. NO EXCEPTIONS.** Rain dates are allowed for Beach Gatherings (**Only after inclement weather has occurred**).
- l. Changes made to the dates, times, number of attendees, etc. after the permit has been processed will be assessed a permit revision fee or may result in **new permit fees** (case by case basis).____(initial)
- m. Any cost incurred due to damage to the facility/grounds or due to law enforcement intervention arising from the group's event will be billed to the group.
- n. Payments may be in the form of **cash, check or credit card (We Accept All Major Credit Cards)**. All deposits and fees **must** be paid in full no less than two weeks prior to being issued a valid Facility Use Permit. Checks **must** be payable to the "Town of Southampton". In the event of a bounce check, fees will be applied.

*If the applicant provides false information such as: purpose of event, names & addresses of event holder(s), number of persons in attendance, etc., the event may be cancelled prior or during the event at the discretion of the Town Staff and may result in forfeiture of fees and deposits and/or denial of current and future applications for use of Department facilities and may incur additional Town charges.

*I certify that I have read and understand all the rules and regulations governing the use of the parks and facilities. I, the undersigned, do hereby agree that we will abide by the policies governing the use of the parks and will be responsible for any damages to the parks, facility, furniture, or equipment caused by our occupancy of the property. I understand that any false information provided or violation of any rules and policies will result in immediate cancellation of our event and will cause forfeiture of all fees and deposits.____(initial)

TOWN OF SOUTHAMPTON PARKS & RECREATION INDEMNIFICATION FOR USE OF FACILITIES & PROPERTY

I hereby certify that I am authorized to issue contracts on my own behalf or that of the organization listed which I represent. I further certify that I have read the rules, regulations, conditions and terms of the Southampton Town Parks & Recreation application for a Facility Use Permit. In consideration for my or my organization's use of the facilities and/or property owned or operated by the Town as listed, I hereby agree on behalf of myself and my organization, if any, as follows:

1. That I and my organization will abide by all rules and regulations of the Town and all other directives of the Town.
2. That I and my organization will indemnify and hold harmless the Town, its officers, agents, representatives and/or liability, including legal costs and attorneys' fees, that may result from any death or injury to persons or damage to property that may result from my or my organization's use of the facilities and/or property, whether such death or injury or damage to property is caused by the passive or active negligent act or omission of the Town except that this indemnification shall not apply to any loss rising solely from the intentional or willful misconduct of the Town.
3. That neither myself nor any one of my organization shall make any claim against the Town, its officers, agents, representatives and/or employees for any injury or liability which I have indemnified the Town.
4. That New York State Public Health Law Section 3000-f requires any sports program that has five or more teams to establish an automated external defibrillator implementation plan.
☐ I acknowledge that I have read, understand, and agree to comply with the policies and procedure in effect for the New York State Public Health Law Article 30 (Emergency Medical Services) as of this date. _____ (initial)
5. That I personally and on behalf of my organization will conduct a reasonable safety inspection of the Town facilities and/or property and all grounds, structures or buildings used by me and/or my organization immediately prior to use of the facilities and/or property, and will bring any conditions creating any hazard to the attention of appropriate Town representatives. **My signature below signifies my agreement to the rules, regulations, policies and Town Indemnification.**

Signature of Applicant: _____

Date: _____

NO REFUNDS!!!

FOR OFFICE USE ONLY

PERMIT NO. _____

☐ APPROVED ☐ DENIED (If so, REASON): _____

PAYMENT TYPE:

☐ SECURITY DEPOSIT / TYPE: _____

CHECK NO. _____

CREDIT CARD _____

CASH _____

FEE REQUIRED: _____ FEE PAID: _____

INSURANCE REQUIRED ☐ YES ☐ NO AMOUNT (\$1,000,000 LIABILITY W/TOWN AS ADD'L INSURED) ☐ CERT. RECEIVED

COMMENTS _____

☐ INVOICE ATTACHED

☐ SEE DETAIL SHEET ATTACHED

STAFF SIGNATURE / DATE

CC:

☐ MAINTENANCE
☐ BEACH MANAGER
☐ OTHER _____

☐ PUBLIC SAFETY
☐ POLICE

☐ PARK SUPERVISOR
☐ TOWN CLERK

MAINT. INSTRUCTIONS _____