



VILLAGE OF ANGOLA

41 Commercial Street • Angola, NY 14006

(716) 549-1126

(716) 549-1180

Fax: (716) 549-5130

www.villageofangola.org

TDD 1-800-662-1220

APPLICATION FOR TEMPORARY USE PERMIT

Please return 30 days prior event to receive Village Board approval

Date Application Filed: _____

Please type or print legibly

Name of Organization _____

Is Organization a: not-for-profit Charitable/Service Business School Government

Name & Address of Individual Responsible _____

Phone Number _____ E-mail _____

Event Name _____

Date(s) of Event _____ Time(s) of Event _____ Estimated # of People _____

Please describe activity/purpose of this event _____

Location (include all areas of the event) _____

(attach map)

Will this event be held entirely in the Village of Angola? Yes No

If no, specify: _____

Will the event include more than one vendor/organization? Yes No

(if yes, attach list of vendors/participants)

Will the event involve a **street, sidewalk or parking lot closure/usage**? Yes No If yes, please note:

Road/Lot Name(s) _____

Date(s) of Closure _____ Time(s) _____

Will the event include:

Parade or motorcade Yes No (**Attach Map of route**)

Walk or Run Yes No (**Attach Map of route**)

Will there be outdoor **music**? Yes No

Time & Location _____ Live DJ Multiple/Mixed

Amplification Yes No

Will you be providing or selling alcohol? Yes No (additional permit required)

Village of Angola is an Equal Opportunity Provider and Employer. To file a complaint of Discrimination, write to:

USDA, Director, Office of Civil Rights, 1400 Independence Ave. SW, Washington DC 20250-9410

(800) 795-3272 (voice) or (202) 720-6382 (TDD)



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Will there be **Security Guards**? Yes No Volunteers Private Paid Entity

Please List Entity Name _____

Will there be temporary **food vendors**? Yes No

How many? _____

Food Truck? If yes, name of vendor: _____
(additional permit may be required)

Will tent or other structure be erected for event? Yes No Size _____

Date & Time to be installed _____ Date & Time to be removed _____

Will any prep work be done on/or before the event? Yes No

Please describe _____

Set up Date: _____ Time: _____ Clean up Date: _____ Time: _____

Will there be **portable lavatories**? Yes No How Many? _____

Location(s) _____

What is the source of **electric**, if applicable? _____

Will there be a need for Village Water (i.e., hydrant used)? Yes No (additional fees may apply)

Please list any extras e.g., Light show, loudspeakers, decorations, bounce houses, paints or dyes:

Police Services Requested: _____

(Additional Cost to the Town of Evans Police Department May Apply)

DPW Services Requested _____

(Additional Cost to the Village of Angola DPW May Apply)

Fire/Other _____

- Attach map or sketch showing the location of the event. Such map shall include:

Location of parking facilities, indicating number of parking spaces being provided; location of toilet facilities including the location of port-a-potties; location of public entrance(s) and exit(s) to the event site; location of vendor facilities (if applicable) including booths, tents, and food service facilities; explanation of steps being taken to control traffic and provide security (if applicable) and the number of security personnel that will be present.



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_____ *Requesting organization shall attach a completed Certificate of Insurance with minimum limits include public liability coverage of limits of \$1,000,000 each occurrence; property damage insurance with limits of \$1,000,000 each occurrence. Policy shall be endorsed to include Village of Angola as an additional named insured.*

_____ *Requesting organization shall attach Indemnification Agreement on organization letterhead, signed by authorized applicant or officer of company and duly notarized (sample included)*

“Applicant named herein is fully responsible for obtaining any & all licensing with regard to the presentation or playing of music, pursuant to music copyright laws. The Village of Angola assumes no liability in this regard”.

Applicant Signature

Date

Fee Collected: \$ _____

Approval by Village Board

Date: _____

Notified:

(After Village Board approval)

APPROVED

() Applicant

APPROVED AS NOTED

() Village DPW

DENIED (see attached)

() Town of Evans Police Dept

() Fire Dept

() File Copy to Clerk

Police Department: Conditions/Comments _____

Dept of Public Works: Conditions/Comments _____

Fire Dept/Disaster Coordinator: Conditions/Comments _____

Indemnification Agreement

To the fullest extent permitted by law, I/We shall indemnify and hold harmless the Village of Angola and its employees from and against claims, damages, losses and expenses, including but not limited to attorney's fees, arising out of or resulting from performance of our work under this contract, provided that such claim, damage, loss or expense is attributable to bodily injury, sickness, disease or death, or to injury to or destruction of tangible property, including loss of use resulting there from but only to the extent caused in whole or in part by negligent acts or omissions of our organization, anyone directly or indirectly employed by us or anyone for whose acts they may be liable, regardless of whether or not such claim, damage, loss or expense is caused in part by a party indemnified hereunder. Such obligation shall not be construed to otherwise exist as to a party or person described in this paragraph.

Authorized Applicant or Officer

Subscribed and sworn to before me this _____ day of _____, 20__

_____ Notary Public