



## MASS GATHERING PERMIT APPLICATION

Mass Gathering Permit fees assessed according to the Village of Fonda Fees and Deposits schedule.

**Event Name** \_\_\_\_\_ **Date(s)** \_\_\_\_\_

**Applicant's Name** \_\_\_\_\_

**Name of Organization** \_\_\_\_\_

**Address** \_\_\_\_\_

\_\_\_\_\_

**Phone** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

**Email** \_\_\_\_\_

### Contact Person(s) during the Event

**Name(s)** \_\_\_\_\_

**Phone** \_\_\_\_\_

### Please provide the following information

1. Number of people expected to attend the gathering-participants: \_\_\_\_\_

2. E911 Location of the gathering

\_\_\_\_\_

3. Description of the type of gathering to be held

\_\_\_\_\_

4. Dates and times the gathering will be held

\_\_\_\_\_

5. Estimated length of stay of attendees \_\_\_\_\_

6. Name of property owner \_\_\_\_\_

Address of property owner \_\_\_\_\_

Phone/Fax #/email of property owner \_\_\_\_\_

7. Name of the solid waste (garbage) haulers contracted \_\_\_\_\_
- How will garbage containers be monitored? \_\_\_\_\_
  - Who will be in charge of monitoring garbage containers \_\_\_\_\_  
Solid waste must be removed from the site within 24 hours of the end of the event.  
*An invoice will be sent to the above named applicant for any disposal fees and labor charges remaining after 24 hours, payable within 15 days, and all future permit applications will be denied.*
8. Liquid waste (portable toilets) haulers contracted: \_\_\_\_\_  
 (Toilets must be located 300 ft from spectator area)
- How many permanent toilets are located at the site? \_\_\_\_\_
  - How many portable toilets will be rented? (There must be at least 1 ADA accessible.) \_\_\_\_\_
  - How many hand wash stations will be rented? \_\_\_\_\_  
 (There must be 1 station for every 10 toilets & garbage can with a lid next to the station.)
  - Who will monitor and refill water, soap and paper towels at the hand wash station \_\_\_\_\_
9. Will alcohol be served at the event? \_\_\_\_\_  
 (Please provide the New York State Liquor Authority Application for Alcoholic Beverage Control Permits.  
 Restricted area for alcohol must be designated on the site plan map.)
10. Drinking water must be provided free of charge. How will this be done? \_\_\_\_\_  
 A garbage can must be provided next to the drinking station. Depending on the size of the event you may be required to provide additional stations.
11. First Aid Stations: The station must be accessible by ambulance and clearly marked. There must be 2 licensed medical personal at least 18 years old for events up to 2500 people. Two more are required for each additional 5000 attendees. The Montgomery County Health Department must be notified of any serious injuries or communicable diseases. You also may be required to provide a stand-by ambulance. A list of required equipment for first aid stations can be obtained from the Health Dept.
12. How many parking attendants and traffic control guards will be provided? \_\_\_\_\_
13. You must provide a plan for dangerous conditions during the gathering. This plan will include evacuation, cancellation or delay of the gathering, and provision for support facility. The plan will also address nuisances or health hazards associated with animals present at the gathering.
14. Attach a site plan delineating the area where the gathering is to be held including:
- Parking area available for patrons (Is there adequate parking at this location?)
  - Location of entrance, exit, and interior roadways and walks
  - Location of operator's headquarters at the gathering
  - Location of restroom facilities
  - Location of water stations
  - Location and number of food vendors, and types of food to be served (if known).
  - Location, number, type, and provider of solid waste containers
  - Location of the first aid station
  - Plan to provide lighting adequate to ensure the comfort and safety of attendees and staff
  - Signs must be provided that show where first aid, restroom, drinking facilities and exits are located. They must be large enough and high enough that attendees can easily see them
  - Plan for clean-up after the event
  - Plan for Security

15. All food vendors are required to have a valid NYS Department of Health Food Service Permit

Number of Food Vendors Expected \_\_\_\_\_

Have you notified all Food Vendors of required permits? \_\_\_\_\_

The Village of Fonda must be added on the Liability Policies; \$1 mil Occurrence/\$ 2 Mil Aggregate, all naming the Village of Fonda, 8 E. Main Street, P. O. Box 447, Fonda, New York 12068 as the Certificate Holder.

16. The Village of Fonda Board of Trustees must approve of this plan before any advertising for the event(s).

**RELEASE OF ALL CLAIMS AND AGREEMENT TO INDEMNIFY AND HOLD HARMLESS**

Date: \_\_\_\_\_

Inconsideration of the permission given by the Village of Fonda for the use of

\_\_\_\_\_ for

\_\_\_\_\_,  
(Activity)

on \_\_\_\_\_, I \_\_\_\_\_  
(Dates) (Name of applicant, organization)

hereby agree to indemnify and hold harmless the Village of Fonda and every agent, employee and official thereof against all liabilities, claims, suits, awards or judgments whatsoever which may arise directly or indirectly out of above activity in favor of, or which might be claimed by \_\_\_\_\_ or third parties.  
(Name of applicant, organization)

It is understood and agreed that this release of claims and agreement to indemnify and hold harmless is a condition precedent and an un-severable part of the permission given by the Village of Fonda, and the Village was induced to grant such permission by the promise of the undersigned to grant this release.

NAME \_\_\_\_\_  
(Please Print) Responsible Official of organization with authority to sign.

SIGNATURE \_\_\_\_\_

**NOTARY**

STATE OF \_\_\_\_\_ )

COUNTY OF \_\_\_\_\_ )

Today, \_\_\_\_\_, \_\_\_\_\_ appeared before me and signed the forgoing instrument.  
(Date) (Name)

\_\_\_\_\_  
Notary Signature

**MASS GATHERING CHECKLIST:**

**Application**

- \_\_\_\_\_ Event Permit Fee
- \_\_\_\_\_ Plan for directional and exit signs
- \_\_\_\_\_ Plan to address nuisances or health hazards, including those associated with animals present at the gathering
- \_\_\_\_\_ Number of EMS personnel and qualifications
- \_\_\_\_\_ Site clean up plan

**Site plan including the following (additional information may be required by County Health Department):**

- \_\_\_\_\_ Location
- \_\_\_\_\_ Parking area available for patrons - parking lots under operator's control
- \_\_\_\_\_ Location of entrance, exit and interior roadways and walks
- \_\_\_\_\_ Location and number of food stands & the types of food to be served if known; (a separate Temporary Event Food Booth Permit required for each vendor)
- \_\_\_\_\_ Location, number, type and provider of solid waste containers
- \_\_\_\_\_ Location of event gathering coordinators headquarters at the gathering
- \_\_\_\_\_ Location of all first aid stations and emergency medical services (must be approved by the EMS agency director)
- \_\_\_\_\_ Location, type and provider of restroom and sanitary facilities
- \_\_\_\_\_ Location and description of water stations

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**FOR OFFICE USE ONLY**

Completed By \_\_\_\_\_

Date rec'd \_\_\_\_\_

Insurance certificate rec'd \_\_\_\_\_

Complete Site Plan included \_\_\_\_\_

Application Fee \_\_\_\_\_ by cash, check, money order, other

Approved By \_\_\_\_\_

Date \_\_\_\_\_

Compliance \_\_\_\_\_