

Demonstration  
USO - South End  
12/11 12/8  
12/15 12/22  
12/29

City of New York Parks & Recreation  
Special Event Permit Application



Michael R. Bloomberg, Mayor  
Adrian Beaupre, Commissioner

PERMIT NUMBER 07-4050117

APPLICANT INFORMATION  
Applicant Edwin Krales EdwinKrales@hotmail.com  
NAME Edwin Krales E-MAIL ADDRESS  
207 E 10th ST #8A NY 10003 ADDRESS ZIP CODE  
212, 777-3430 TELEPHONE NUMBER

Date of Application 1/3/07 Borough: Bx Man Qs SI (circle one) Sponsor  
Organization (if applicable) Palestine Action Union Square East TELEPHONE NUMBER 212-777-343

Names, Addresses, and Daytime Telephone Numbers of Two Organization Officers Besides Applicant (if applicable)  
1. Edwin Krales 212-777-3430  
2. Bruce Angone 347-563-0694

List any previous Park events organized by applicant/organization (include locations and dates)

EVENT INFORMATION, December, 2007

Type of Event DEMONSTRATION Date of Event 1, 8, 15, 22, 29 same  
Name of Park Union Square Location in Park South East Triangle  
(If appropriate) Start Location \_\_\_\_\_ Finish Location \_\_\_\_\_

Run through Park \_\_\_\_\_  
Number of Participants 20 Number of Spectators 10  
Set-Up Begins 3:00 Clean-Up Ends 6:00  
Time Event Begins 3:00 Time Event Ends 6:00

• Will participants or spectators be charged? YES  NO  
• Will there be vendors at the event? YES  NO  
• Will there be merchandise available for sale? YES  NO

If the answer to any of the above questions is yes, please see section 2-08 (l) on reverse and contact Parks' revenue division 212-360-197 to apply for a Temporary Use Authorization vending permit.

Describe in detail activities planned. List all items to be distributed. (Sale or distribution of food, products, promotional material, celebrities, speeches, ceremonies, etc.) DISCUSSIONS: PARTICIPANTS  
holding placards

Will the event be advertised? YES  NO  
If so, describe advertising plan including dates and media outlets  
leaflets + word of mouth

Will any pamphlets, handbills, or advertising matter of any kind be distributed at the event? YES  NO  
Do you plan to drive vehicles onto Parkland (vehicle permits are required as per section 2-08 (n) on reverse) YES  NO  
Will you need water or electrical connections? (See section 2-08 (o) on reverse) YES  NO  
Have you made any provision for on-site medical services? YES  NO  
Have you made any provision for on-site security? YES  NO  
Do you have insurance? YES  NO  
If so, with whom? \_\_\_\_\_ (See section 2-08 (q) on reverse)  
Do you plan to have amplified sound at your event? (See section 1-05 (d) on reverse) YES  NO  
A permit from the local police precinct is required for all amplified sound.

8/25  
CL# 102  
8/31/07

Mrs. Krales

As the applicant, I hereby certify that the information I have provided on this form is complete and accurate to the best of my knowledge. I agree to abide by the terms set forth in this application, and the Parks & Recreation of the City of New York Parks & Recreation. I understand that failure to do so may lead to the cancellation of the event, the denial of future permit applications, or other legal action by Parks.

Edwin S. Krales  
SIGNATURE OF APPLICANT