

City of New York/Parks & Recreation
Special Event Permit Application



Michael R. Bloomberg, Mayor
Adrian Benepe, Commissioner

USA
9/29/07

PERMIT NUMBER 07-90474609

APPLICANT INFORMATION

Applicant Jeff Thomas
 NAME JACKSON HEIGHTS NY E-MAIL ADDRESS _____
 ADDRESS _____ ZIP CODE 11372 TELEPHONE NUMBER _____
 Date of Application _____ Borough: Bx Bk Qs SI (circle one) Sponsor _____
 Organization (if applicable) _____ TELEPHONE NUMBER _____

Names, Addresses, and Daytime Telephone Numbers of Two Organization Officers Besides Applicant (If applicable)
 1. _____
 2. _____
 List any previous Park events organized by applicant/organization (include locations and dates) _____

EVENT INFORMATION

Type of Event MUSICAL PERFORMANCE Date of Event 9/29/07 Raindate 9/30/07
 Name of Park UNION SQUARE Location in Park SOUTH END ALONG 19th ST.
 (If appropriate) Start Location _____ Finish Location SEAMAN PIER
 Route through Park _____
 Number of Participants 4 Number of Spectators 50-100 (REGULAR PARK TRAFFIC)
 Set-Up Begins 11 AM Clean-Up Ends 4 PM
 Time Event Begins 2 PM Time Event Ends 3:30 PM
 * Will participants or spectators be charged? YES NO _____ If so, how much? _____
 * Will there be vendors at the event? YES NO _____ If so, what is the vendor permit fee? _____
 * Will there be merchandise available for sale YES NO _____ If so, provide a list of items and prices. _____

If the answer to any of the above questions is yes, please see section 2-08 (l) on reverse and contact Parks' revenue division at 212-360-1397 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.) MUSICAL PERFORMANCE BY 4-PIECE

FOLK-ROCK GROUP

Will the event be advertised? YES NO _____ If so, describe advertising plan including dates and media outlets. _____
 Will any pamphlets, handbills, or advertising matter of any kind be distributed at the event? 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 (ELECTRICAL ONLY)
 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? MUSIC-PRO (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.

As the applicant, I hereby certify that the information I have provided on the 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 Rules & Regulations 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.

SIGNATURE OF APPLICANT

THIS FORM IS NOT A PERMIT
THERE IS A \$25 NON-REFUNDABLE ADMINISTRATIVE PROCESSING FEE
CHECKS OR MONEY ORDERS SHALL BE PAYABLE TO:
CITY OF NEW YORK/PARKS & RECREATION