

**2017 SPECIAL USE PERMIT  
SPECIAL EVENT APPLICATION INSTRUCTIONS**

Thank you for considering the Town of Braintree for your event! Completing this form is the first step in your application process. **This is not your permit.** Due to the numerous requests we receive, completing and submitting this application does not confirm your date nor signify any intention by the Town to approve this application.

**Applying for a Permit**

**STEP #1** Complete **ALL** fields on the Special Event application. Please attach all event information including route maps, site set up diagrams, list of vendors and any additional information relevant to your event. If you are a non-profit organization, please submit a copy of your 501C3 non-profit determination. (Please note a certificate of liability insurance is still required for non-profit organization.) Submit the completed application **at least 45 days prior** to the actual event date, and retain a copy for your records.

**STEP #2** Return completed Special Event application with a check or money order for the \$25.00 application fee at least 45 days prior to the actual event date. Money orders or checks should be made payable to the Town of Braintree. Credit cards and cash are not accepted.

**STEP #3** Mail/drop off applications with fee to:

**Mayor's Office/Special Events  
Town of Braintree  
One JFK Memorial Drive  
Braintree, MA 02184**

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**What happens next?**

1. Your application will be reviewed to determine whether the requested location is available. Permits are granted on a first-come first-serve basis.
2. Applicable fees may apply to cover expenses incurred for facility custodial services and utility expenses. Charges will be determined by the Town and payment rendered prior to receipt of permit. A minimum fee of \$100.00 is charged per 2 hour period. A fee of \$45.00 is charged per additional hour. For events occurring outside of Town Hall hours, additional staffing costs will apply. Costs for police and/or fire details may also be assessed depending on the nature of your event.
3. If you are scheduling a large and/or complicated event, you may be required to obtain approval from several Town Departments (Building, Board of Health, Police and Fire) as well as one day alcohol and/or entertainment licensing. You will be notified as to which approvals are necessary depending on the size/scope of your event. These approvals must be obtained prior to the date of your event.
4. **You must secure and submit a certificate of Liability Insurance** to the Town of Braintree **14 days** prior to your event. The Town of Braintree must be named as additional insured for the date and location of your event with a minimum amount of 1 million dollars (\$1,000,000) in liability. This is required for **all** special use permits and your permit will not be issued without the certificate
5. Your special event permit will be mailed, emailed and/or faxed to you. Due to the many changing components of an event, Special Event Permits are often issued only a few days in advance of your event.

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**Important Information**

- All event publicity, printed materials and communications with your participants shall state Town of Braintree in the title when referring to your event location. (Example: "Braintree Town Hall")
- **Alcohol Policy:** **NO** alcohol is allowed without approval from the Town Licensing Board. If seeking Licensing Board approval, this form must be submitted with the application for a one day special alcohol license.
- **All non-profit organizations must submit a copy of your 501C3 non-profit determination letter.**
- The Town reserves the right to deny requests due to prior disrespect of facilities, property, equipment, personnel and/or rules and regulations.

**TOWN OF BRAINTREE  
SPECIAL EVENT APPLICATION**

<b>For office use only:</b> Permit No. _____ Check No. _____
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**2017 SPECIAL EVENT APPLICATION**

<b>Application fee \$25</b> Complete ALL fields Below
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EVENT DATE(S): \_\_\_\_\_

EVENT LOCATION: \_\_\_\_\_

Name of Event: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Event Website: \_\_\_\_\_

Email Address (Required): \_\_\_\_\_

**TYPE OF EVENT (CHECK ALL THAT APPLY):**

Run _____	Banquet _____	Festival _____	Reunion _____
Walk _____	Movie Night _____	Concert _____	Fundraiser _____
Recital _____	Meeting _____	Theatre _____	Other _____

**FACILITY REQUESTED:**

TOWN HALL AUDITORIUM \_\_\_\_\_ SUNSET LAKE \_\_\_\_\_ FRENCH'S COMMON \_\_\_\_\_ SMITH BEACH \_\_\_\_\_  
 TOWN PARK/FIELD (SPECIFY) \_\_\_\_\_ TOWN BUILDING (SPECIFY) \_\_\_\_\_

	Date(s)	Start time (am/pm)	End Time (am/pm)
Event Set Up:			
Event:			
Clean Up:			

**CERTIFICATE OF LIABILITY INSURANCE REQUIRED.** The certificate **must name** the Town of Braintree as additionally insured for the date and location of your event. Your certificate must be submitted at least **14 days prior to your event for your permit to be issued.**

DESCRIBE YOUR EVENT IN DETAIL. IF APPLICABLE, ATTACH **CURRENT** SITE SET-UP MAPS, WALK AND RUN ROUTE MAPS WITH WATER STOPS/ CHECK POINTS AND DESCRIPTIONS, ROAD AND LANE CLOSURE PLAN

**Please indicate whether the following items pertain to your event:**

- YES NO Does your event require electricity?  
If yes, are you bringing a generator? \_\_\_\_\_  
If yes, are you requesting a Town power source? \_\_\_\_\_  
(may require additional Town of Braintree staffing charge)  
If yes, what is the electricity for? \_\_\_\_\_
- YES NO Are you placing portable toilets? (requires Board of Health Approval)  
Set up Date/Time \_\_\_\_\_ Removal Date/Time \_\_\_\_\_
- YES NO Are you using Town Hall after normal business hours?  
(If yes, may require additional Town of Braintree staffing charge)
- YES NO Are you placing any tents or other structures at your event? Are the tents heated? \_\_\_\_\_  
(may require Building and Fire Dept Approval)  
Set up Date/Time \_\_\_\_\_ Removal Date/Time \_\_\_\_\_
- YES NO Are you setting up any stages? (all stages require Building Insp. Approval)  
Set up Date/Time \_\_\_\_\_ Removal Date/Time \_\_\_\_\_
- YES NO Are you requesting to have mechanical rides or inflatables (jumpy houses, etc.)?
- YES NO Are you serving any refreshments/ food? (may require Fire and/or Health Dept. Approval)  
If yes, what are you serving \_\_\_\_\_  
Does this require the use of propane tanks? \_\_\_\_\_ (Fire Detail and extinguisher required)
- YES NO Are you requesting any vendors? (food, fire, health permits required)  
Provide a list of vendors and items for sale on a separate sheet
- YES NO Are you serving alcohol? (requires one day special alcohol license MGL c. 183, Sec. 14)
- YES NO Are you providing entertainment, i.e. music, DJ, movie?  
(may require entertainment license MGL c. 140, sec. 183)
- YES NO Are you requesting table and chair set up? Tables needed \_\_\_\_\_ Chairs needed \_\_\_\_\_
- YES NO Is this for a Braintree Youth Program?
- YES NO For a walk/run, will you have any waterstops/checkpoints?  
If yes – must include a map with the locations
- YES NO Are you requesting a road closure? Location: \_\_\_\_\_
- YES NO Are you providing recycling and/or waste clean up services?

**\*\* NOTE: ALL "REQUESTS" must have Town of Braintree approval and may require additional charges.**

Permittee accepts complete liability and responsibility for Permittee's use of the property and its actions and the actions of its members, guests, invitees, agents and employees upon the site, and an agreement that the Permittee will indemnify, defend and hold harmless the Town of Braintree against any and all claims that may arise.

**SIGNATURE OF APPLICANT:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

## Special Event Permit

Applicant: \_\_\_\_\_ Event Date: \_\_\_\_\_

Event Type: \_\_\_\_\_

To be completed by the Chief of Staff and Operations or his designee.

Approved: \_\_\_\_\_

Chief of Staff

To be completed by the Chief of Police or his designee (if police detail required)

No. of officers to be assigned: \_\_\_\_\_ Approved: \_\_\_\_\_

Duty Hours: \_\_\_\_

Police Chief

To be completed by the Fire Chief or his designee (if fire detail required)

No. of officers to be assigned: \_\_\_\_\_ Approved: \_\_\_\_\_

Duty Hours: \_\_\_\_

Fire Chief

To be completed by Town Clerk (if Lottery, license is required)

Approved: \_\_\_\_\_

Town Clerk

To be completed by the Building Inspector (if event includes staging or tents)

Approved: \_\_\_\_\_

Building Inspector

To be completed by the Health Department (if event includes food or drink, and/or Restroom Facilities)

Approved: \_\_\_\_\_

Health Department

To be completed by the Licensing Board (if event requires one day license for entertainment and/or alcohol)

Approved: \_\_\_\_\_

Licensing Board