

Large Gathering

Organization: American Legion Post 35

Event: Car Show

Type: Car Show

May 7, 2016 (Saturday)

PERMIT APPLICATION		
Name of Applicant: <i>AMERICAN LEGION Post 35</i>		Organization (if applicable):
Mailing Address <i>69 HIGH ST HAMPTON NH. 03842</i>		
Contact Person: <i>JOHN BRIEVENIK</i>	Contact Person who will be present at Event ¹ : <i>JOHN BRIEVENIK</i>	
Contact Person Phone Number: <i>603-964-5491 HOME</i>	Contact Person will be present at Event Phone Number: <i>YES</i>	
Contact Person Cell Number: <i>603-918-1640</i>	Contact Person will be present at Event Cell Number: <i>YES</i>	
Description of Event (Please Attach Additional Sheets of Paper if description cannot fit in the space provided): <i>CAR SHOW</i>		
Location of Event: <i>HAMPTON AIRFIELD 9A LAFAYETTE RD NO HAMPTON NH. 03842</i>		
Date(s) of Event: <i>MAY 7 2016</i>	Hours: From: <i>7 AM</i> End: <i>4 PM</i>	
Estimated Attendance: <i>150</i>	Minimum No.: <i>75</i>	Maximum No.: <i>200</i>
Types of Alcohol to be served: <i>NONE</i>		

¹ Applicant must be reachable during the entire event at a moment's notice.

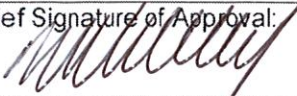
The following facilities will be available for the event:

Sanitation:	No. of Units:	Male:	Female:
PORTABLE TOILETS	2	1	1
Water supply from:			
BOTTLED WATER FROM LEGION POST 35			
Food will be served from and/or by:			
AMERICAN LEGION			
Beverages will be served from and/or by:			
AMERICAN LEGION SODA + COFFEE			
Illumination after dark will be provided by			
IVA			
Medical and First Aid Provided by:			
CALL 911			
Traffic Control Provided by:		No. of officers: PEOPLE	
HAMPTON AIRFIELD + LEGION		16	
Parking for 100 is planned.			
<input type="checkbox"/> Attach plan of exact parking location and exact route to be kept open for emergency vehicles			
<input checked="" type="checkbox"/> Not applicable. Explain:			
PARKING ON AIRFIELD DESIGNATED AREAS			

Name of Promoter or Applicant: <u>AMERICAN LEGION Post 35</u>	
Mailing Address: <u>69 HIGH ST</u> <u>HAMPTON, NH. 03842</u>	Phone: <u>603-929-4695</u>
Email: <u>CSMJWB@COMCAST.NET</u>	Cellular Phone: <u>603-918-1540</u>
<p>I <u>JOHN BARVENIK</u>, do here by accept all responsibility for the above-described event. I agree to adhere to all laws and regulations of the Town of North Hampton and the State of New Hampshire. I do hereby consent to the entry, at any time, in the course of his/her duties, any official of the Town in the performance of their official duties, including but not limited to inspection. I also agree to provide surety that the Town deems necessary. Under the penalty of perjury, I do here by certify that the above is true.</p>	
<p>Signature: <u>[Signature]</u> <u>FINANCE OFFICER</u> Date: <u>2/17/16</u></p>	
Name of Property Owner (The following MUST BE completed by the owner of the property involved): <u>HAMPTON TUBS LLC (GARRETT MILLER)</u>	
Mailing Address: <u>953 Eastgate St Portsmouth NH 03801</u>	Phone Number: <u>603-817-6617</u>
Email: <u>Garrett@HamptonAirefield.com</u>	Cell Phone Number: <u>603-811-6617</u>
<p>I <u>Garrett Miller</u>, have thoroughly discussed the above event with the Promoter and am in agreement with him/her in all areas. I do hereby give my consent to use my property for this even. I do hereby consent to the entry, at any time, in the course of his/her duties, any town officer in the performance of his/her duties, including but not limited to inspection. I agree to adhere to all laws and regulations of the Town of North Hampton and the State of New Hampshire. Under the penalty of perjury I do hereby certify that the above application is true.</p>	
<p>Signature: <u>[Signature]</u> Date: <u>2/20/2016</u></p>	

DO NOT WRITE BELOW THIS SPACE. FOR TOWN USE ONLY**Departmental Approvals:** Please attach any comments or special requirements to this application

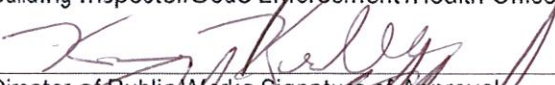
Fire Chief Signature of Approval:



Date:

3/30/16

Building Inspector/Code Enforcement/Health Officer Signature of Approval:



Date:

03/30/16

Director of Public Works Signature of Approval:



Date:

3/30/16

Police Chief Signature of Approval:



Date:

03/30/16

Department comments or additional conditions:

- Traffic Control mentioned is not on public ways, it is on private property. M. Maddocks

Applicant: I do hereby agree to the additional requirements:

Applicant's Signature:

Date:

PERMIT☐ **Denied** Reason:

Michael E. Maddocks

Chief of Police

Date:

☒ **Approved**

Michael E. Maddocks

Chief of Police

Date:

03/31/16

Select Board Signatures: (If Required under Ordinance amended 3/11/2014)

Date: