

Large Gathering

Organization: Hampton Airfield

Event: Car Show

Type: Car Show

September 11, 2016 (Sunday)

RECEIVED

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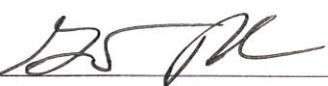

PERMIT APPLICATION		
Name of Applicant: <i>HAMPTON AIRFIELD (GARRETT MILLER)</i>		Organization (if applicable):
Mailing Address <i>9A LAFAYETTE RD Box 1 No. Hampton NH 03862</i>		
Contact Person: <i>GARRETT MILLER</i>	Contact Person who will be present at Event ¹ : <i>GARRETT MILLER</i>	
Contact Person Phone Number: <i>603 817 6617</i>	Contact Person will be present at Event Phone Number: <i>603-817-6617</i>	
Contact Person Cell Number: <i>Same</i>	Contact Person will be present at Event Cell Number: <i>SAME</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</i>		
Date(s) of Event: <i>Sept 11, 2016</i>	Hours:	
	From: <i>0700</i>	End: <i>1600</i>
Estimated Attendance: <i>300</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: <u>4 BS</u>	No. of Units: <u>3</u>	Male: <u>1</u>	Female: <u>1</u>
Water supply from: <u>RESTAURANT ON SITE + BOTTLED H₂O</u>			
Food will be served from and/or by: <u>ON SITE RESTAURANT</u>			
Beverages will be served from and/or by: <u>SAME AS ABOVE</u>			
Illumination after dark will be provided by <u>N/A</u>			
Medical and First Aid Provided by: <u>NORTH HAMPTON FIRE + RESCUE "911"</u>			
Traffic Control Provided by: <u>ON SITE STAFF.</u>		No. of officers: <u>1</u>	
Parking for <u>100</u> 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: <u>IN FIELD.</u>			

Handwritten signature

Name of Promoter or Applicant: HAMPTON AIRFIELD	
Mailing Address: 94 LAFAYETTE RD Box 1 No. Hampton NH 03862	Phone: 603-864-6749
Email: Garrett@HamptonAirfield.com	Cellular Phone: 603-817-6617
<p>I, <u>Garrett Miller</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>	
Signature: 	Date: 6/10/16
Name of Property Owner (The following MUST BE completed by the owner of the property involved): HAMPTON TCB LLC (GARRETT MILLER)	
Mailing Address: 953 Biddington St, Portsmouth NH 03801	Phone Number: 603-817-6617
Email: Garrett@HamptonAirfield.com	Cell Phone Number: Same
<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>	
Signature:  Manager	Date: 6/11/16

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:

[Signature]

7/21/16

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

Date:

[Signature]

7/21/2016

Administrator of Planning & Zoning Signature of Approval:

Date:

Richard Milner

7/21/16

Director of Public Works Signature of Approval:

Date:

[Signature]

7/21/16

Police Chief Signature of Approval:

Date:

[Signature]

07/19/16

Department comments or additional conditions:

• Previous car shows held at this location without problems.

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: 07/25/16

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

Date: