

Robert C. LaBarge, Jr.
Chief of Police



Telephone: 603-964-8621
Emergency: 911

Town of North Hampton
Police Department
233 Atlantic Avenue
North Hampton, NH 03862

November 13, 2023

RE: Large Gathering Application for the Experience Hampton Christmas Parade on December 2, 2023

The Large Gathering Application for the Experience Hampton Christmas Parade on December 2, 2023 is approved based on the following conditions:

1. One detail officer with cruiser, from the North Hampton Police Department, or one of the Mutual Aid Communities to be positioned at the intersection of Lafayette Road (Route 1) and Cedar Road where a detour is established. The Detail Officer will be on post at 1230 hours and remain until the parade has concluded. Applicant must contact the North Hampton Police Department no later than two weeks prior to the event to schedule the detail officer.
2. Certificate of Insurance naming the Town of North Hampton as an additional insured must be submitted to the Chief of Police prior to the event.
3. The applicant must make notification and seek permission for the event through the NH Department of Transportation for activities on the state roads. Approval needs to be provided to the police department prior to the event.

Robert C. LaBarge, Jr.
Chief of Police

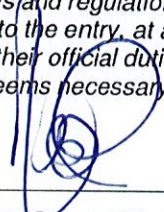
PERMIT APPLICATION

Name of Applicant: Dean Merrill		Organization (if applicable): Experience Hampton Inc	
Mailing Address PO Box 444, Hampton NH 03843			
Contact Person: Dean Merrill		Contact Person who will be present at Event ¹ : Dean Merrill	
Contact Person Phone Number: 603-926-7655		Contact Person will be present at Event Phone Number: 603-926-7655	
Contact Person Cell Number: 603-770-4101		Contact Person will be present at Event Cell Number: 603-770-4101	
Description of Event (Please Attach Additional Sheets of Paper if description cannot fit in the space provided): Experience Hampton Holiday Parade on Saturday Dec. 2, 2023, on Route 1, North Hampton to Hampton			
Location of Event: Assemble in Parking Lot, Route 1			
Date(s) of Event: 12/2/2023		Hours: From: 12:30PM End: 3PM	
Estimated Attendance:		Minimum No.:	Maximum No.:
Types of Alcohol to be served: None			

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

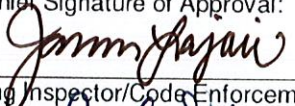

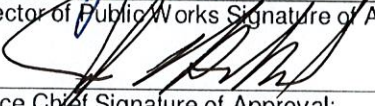
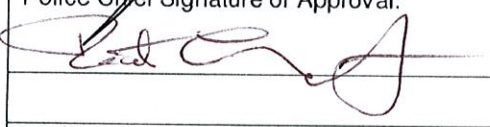
The following facilities will be available for the event:

Sanitation: N/A	No. of Units: N/A	Male: N/A	Female: N/A
Water supply from: N/A			
Food will be served from and/or by: N/A			
Beverages will be served from and/or by: N/A			
Illumination after dark will be provided by N/A			
Medical and First Aid Provided by: North Hampton FD - upon request			
Traffic Control Provided by: North Hampton PD		No. of officers: 1	
Parking for _____ 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 will be in lots that marchers will assemble in .			

Name of Promoter or Applicant: Experience Hampton Inc.	
Mailing Address: PO Box 444, Hampton NH 03843	Phone: 603-926-7655
Email: clean@tobeymerrill.com	Cellular Phone: 603-770-4101
<p>I _____, 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: 10/11/2023
Name of Property Owner (The following MUST BE completed by the owner of the property involved) :	
Mailing Address:	Phone Number:
Email:	Cell Phone Number:
<p>I _____, 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:	Date:

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: 10/26/2023
Building Inspector/Code Enforcement Officer Signature of Approval: 	Date: 11/1/23
Director of Public Works Signature of Approval: 	Date: 11/2/23
Police Chief Signature of Approval: 	Date: 11/16/2023

Department comments or additional conditions:

* please see attached

Applicant: I do hereby agree to the additional requirements:

Applicant's Signature:

Date:

PERMIT

Denied Reason:

Approved

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

Date:



North Hampton Building Department
233 Atlantic Avenue
North Hampton, NH 03862

Glen Bosworth
Building Inspector

Large Gathering Permit Tent / Temporary Structure Inspections

Good Day,

Please be aware that if a tent or other type of temporary structure will be used for the large gathering event, a Temporary Structure Permit application must be submitted to and approved by the Building Department prior to the event. The submission should include all relevant information and fees indicated on the application form.

It is the responsibility of the applicant to contact the Building Department to schedule an inspection of the tent or other type of temporary structure during the installation process prior to the event.

Sincerely,

A handwritten signature in black ink, appearing to read "Glen Bosworth".

Glen Bosworth
Building Inspector
603-964-8650
gbosworth@northhampton-nh.gov



TOWN OF NORTH HAMPTON
Temporary Structure Application
Zoning Ordinance Article V, Section 505

Name: _____

Address: _____

Email/Phone Number: _____

Location of Proposed Temporary Structure: _____

Period of Time for Temporary Structure: _____

Proposed Use of Temporary Structure: None

Applicant Signature _____ Date _____

Property Owner Signature _____ Date _____

Please attach the following information with this application:

- Temporary structure details including:
 - a. type of temporary structure
 - b. size of temporary structure with length, width, and height measurements
 - c. manner of attachment to fixed location
 - d. if applicable, construction plans
- Site sketch showing lot dimensions and proximity of temporary structure to boundary lines using precise measurements
- Letter of authorization from property owner if property owner signature not on application (including permission to use bathroom facilities, if applicable)
- If applicable, copy of approved State of NH inspections and licenses and/or Town of North Hampton Hawkers & Peddler's license
- Copy of insurance policy

Application Fee: \$50.00

Date Received _____ Check # or Cash _____ Initials _____

All temporary structures must receive Fire Department and Building Department approvals prior to occupancy or commencement of activities.

Fire Department Signature _____ Date _____

Building Inspector Signature _____ Date _____

STATE OF NEW HAMPSHIRE
Application for Parade Permit or Other
Activity Conducted on State Highway System

Today's Date 10/11/2023

To: Department of Transportation
Transportation Management Center
PO Box 483, 110 Smokey Bear Blvd
Concord, New Hampshire 03302-0483
Phone (603) 271-6862
E-mail: Bureau56@dot.nh.gov Subject line: Permit Application

Under provisions of RSA 286:2 and RSA 236:1, application is made for a parade / activity on the state highway system.

Indicative data is shown below:

Type of activity?

If so, what type (foot, bike, etc.)?

Will event affect highway safety?

Will highway traffic be delayed?

If so, how long?

Will highway traffic be detoured?

Name of sponsoring organization:

Mail or E-mail permit to:

Phone no. where I may be reached:

Purpose of activity:

Name of Municipality:

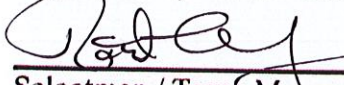
Date of activity:

Starting and ending times:

State route(s) to be traveled:

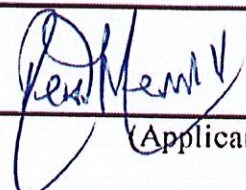
Traffic control provided by:

Approved by Town Officials



Selectmen / Town Manager / Police Chief
(circle one)

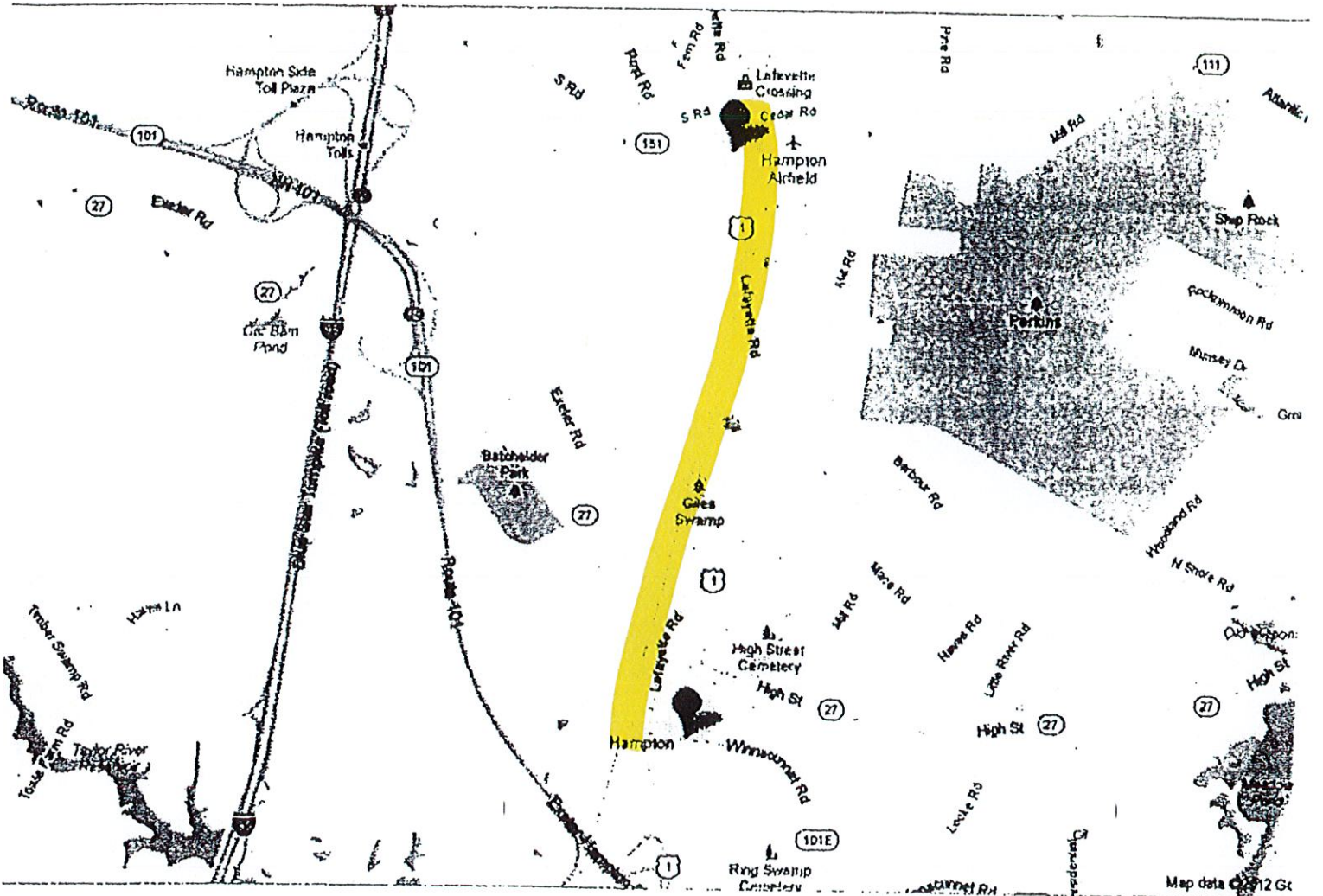
Parade
Foot/Vehicles
yes
yes
3 1/2 hours
yes
Experience Hampton Inc.
PO Box 444
Hampton NH 03843
603-770-4101
Holiday Parade
Town of Hampton
12/2/2023
1 PM to 4:30 PM
Route 1
North Hampton - Hampton
Hampton & North Hampton Police

Signed by  - President
(Applicant) E.H.

Please attach a simple map or sketch plotting the start, finish, route(s) of travel, detour(s),
and parking area(s) if provided.

Recommended:

District Engineer



Map data © 2012 Gc

