

APPLICATION FOR USE OF TOWN OF OGUNQUIT PUBLIC PLACE

OGUNQUIT PARKS & RECREATION DEPARTMENT

23 SCHOOL STREET, PO BOX 875

OGUNQUIT, MAINE 03907

PHONE: 207-646-5139 * FAX: 207-646-5920

Please Print or Type

Name & Address of Organization: _____

Non-profit Organization Federal ID#: _____ Private/Commercial Organization

Name of Public Place: _____

Facility Desired: _____

Date or Dates Desired (List separately. If application is for a weekly function, please state the beginning and ending dates)

Purpose of Use: _____ Number of Persons Expected: _____

Types of Activities to be conducted (Please be complete & specific as each activity requires separate approval)

Time Activity Will Start: _____ Time Activity Will End: _____

Building to be opened at: _____ Building to be closed at: _____

Will you be Charging Admission? Yes ___ No ___ If yes, proceeds will go to: _____

Any person issued a permit shall observe all rules, regulations and ordinances adopted by the Town of Ogunquit. Open fires are not permitted without prior written permission for the fire & burning material. The person to whom a permit is issued shall agree to be liable for any loss, damage or injury sustained by any person or property whatsoever by reason of negligence on the part of any person engaged in the activity being sponsored under the permit and shall agree to hold the town and any of its agents, servants and employees harmless from any and all losses caused by the permittee or any person engaged in activity being sponsored under the permit.

NAME OF APPLICANT: _____ DATE: _____

ADDRESS: _____

HOME PHONE: _____ WORK PHONE: _____

TITLE OF APPLICANT IN ORGANIZATION: _____

SIGNATURE OF APPLICANT: _____

OFFICE USE ONLY
Special Permit Yes ___ No ___
Approved Yes ___ No ___
Key Needed Yes ___ No ___
Certificate of Insurance Yes ___ No ___

Type of Permit

Director of Parks & Recreation Date

Town Manager Date

Site Inspection Required: _____

Facility Supervisor: _____