

# **BATTERY PARK**



**Battery Park Committee** 

# PLANNING TIMELINE

Item	Submitted to:	Deadline
Battery Park Event Request Form	PARK	Schools: 72 hours in advance*
Battery Park Event Request Form & Fees	PARK	Small event: 30 days prior **
Battery Park Event Request Form & Fees	PARK	Large event: 90 days prior
Parade & Assembly Permit & Fee(s)	CITY	30 days prior to event***
General Liability Certificate of Insurance	PARK/CITY	30 days prior to event
Workman's Compensation Insurance	PARK/CITY	30 days prior to event
Automobile Liability Insurance (if req'd)	PARK/CITY	30 days prior to event
Liquor Liability Insurance (if required)	PARK/CITY	30 days prior to event
DE ABC Gathering License (if required)	PARK/CITY	30 days prior to event
Completed Event Status Report	PARK	30 days prior to event
Complete Vendor list	PARK	30 days prior to event
Event layout	PARK	30 days prior to event
Security Deposit(s)	PARK/CITY	30 days prior to event
Park Use Fees/City Special Use Fees	PARK/CITY	14 days prior to event
Electrical access fee (if applicable)	CITY/MSC	14 days prior to event

Failure to adhere to these deadlines may result in the City of New Castle or the Battery Park Committee exercising their right to terminate permit (s) and use of Battery Park.

Battery Park Event Request Form & Fees required for events involving 25 or more people. Payment of fees and/or issuance of permit do not guarantee exclusive use of Park.

\* School sponsored educational/recreational events require notification of Battery Park 72 hours in advance and supervision by proper school authorities. Bus drop-off location for unloading students to participate in activities in Battery Park is on W. 4th Street at corner of South Street across from Good Will Fire Company. Buses must park at Broad Dyke Parking Lot at Fourth and Chestnut Streets.

\*\*Small event: low impact events such as picnics, weddings, or commercial photography

**\*\*\***City Parade & Assembly Permit required for all events involving 25 or more participants on public lands. Permit not required for school-sponsored educational/recreational activities. The City Administrator may waive the minimum 30 day filing period requirement after due consideration of the nature of the event. For more information and to obtain a permit, please call 302-322-9801.



**BATTERY PARK** 



**Battery Park Committee** 

# **EVENT REQUEST FORM**

Date of Request:				PLEASE PRINT
<b>Contact Information</b> Name of Organization:				
Contact Name:				
Address:				
Phone:				Fax:
Cell Phone:				E-mail:
(Please provide a copy of you	ur IRS I	Letter d	lesignati	D Number: <i>Ing your organization as a 501(c)(3) non-profit</i> )
Event Coordinator Cell Phon	e:			
				_Event time:
Anticipated attendance:				# of Event Supervisors:
Will there be a charge?	YES	NO		If YES, how much?
Is this a gated event?	YES	NO		IF YES, describe:
Will you use tents?	YES	NO		If YES, name of vendor:
Will you utilize electricity?	YES	NO		If YES, please see guidelines and fees for usage.
Will you use staging?	YES	NO		If YES, please see guidelines and fees for usage.
Will you supply additional trash receptacles?			s?	YES NO
Will portable toilets be used? YES NO			NO	If YES, name of vendor:

#### Will any of the following be sold at the event?

Food	YES	NO	If yes, vendors must obtain a State of Delaware Health permit.	
Alcohol	YES	NO	If yes, by law, you will need proof of your organization's non-profit status and must provide a copy of your gathering license from the Alcohol Beverage Control Commission. You will also need a permit from the City.	
Other	YES	NO	If yes, please specify:	
			See guidelines. Some items are prohibited from sale.	
Do you have event liability insurance?				
YES	If YES, please attach a copy of the policy. Please see the insurance requirements on the event guidelines for organizations that must be listed as additional insured.			
NO	If NO, you <b>MUST</b> obtain this insurance <b>PRIOR TO</b> submitting this form. Events are <b>NOT</b> permitted without proof of insurance.			
Sponsor/Organization Incorporated YES NO If YES, Date of Incorporation:				
Corporate Officer Information: Name:NAme:NAme:NAme:NAme:				
Title:			Title:	
Address:			Address:	
City/State:			City/State:	
Zip:			Zip:	
Phone:			Phone:	

I understand that Battery Park is a Carry-In/Carry Out Park, and agree that it is my responsibility to collect any trash produced by this event, and arrange for proper disposal. Failure to do so will result in Park maintenance/trash pick up fees being deducted from deposit. I have read and accept Battery Park Guidelines and Rules. I understand and agree that it is my responsibility to ensure all participants comply with all permit directions and conditions and with all applicable laws and ordinances. Both the organization listed above and I accept all risk and liability for, and agree to hold The Trustees of the New Castle Common and City of New Castle harmless from any and all claims, suits or actions, arising out of any claims for property damage or personal injury sustained as a result of the permitted event.

Signature of Applicant:	Date:
Print:	

## PLEASE COMPLETE FORM IN ITS ENTIRETY NOTING NOT APPLICABLE (N/A) AND PROVIDE ATTACHMENTS AS APPLICABLE.

#### INCOMPLETE OR ILLEGIBLE FORMS WILL BE RETURNED TO SENDER.

# **RETURN FORM TO THE BATTERY PARK COMMITTEE:**

#### **BY EMAIL:** trusteesnnc@comcast.net

#### BY FAX: 302-322-0301

### BY MAIL: PO BOX 453 NEW CASTLE, DELAWARE 19720

# **IN PERSON: 201 DELAWARE STREET, NEW CASTLE, DELAWARE 19720**

#### **OFFICIAL USE ONLY:**

#### **DATE RECEIVED**

Battery Park Event Request Form	PARK	
Event Request Fee	PARK	\$
Parade & Assembly Permit & Fee	CITY	\$
General Liability Certificate of Insurance	PARK/CITY	
Workman's Compensation Insurance	PARK/CITY	
Automobile Liability Insurance (if required)	PARK/CITY	
Liquor Liability Insurance (if required)	PARK/CITY	
Event layout	PARK	
Security Deposit (if required)	PARK	\$
Grounds Repair Fee (if required)	PARK	\$
Park/Facility Use Fee	PARK	\$
Electrical access fee (if applicable)	CITY/MSC	\$

APPROVED: \_\_\_\_\_

DATE:	
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#### **BATTERY PARK COMMITTEE**

APPLICANT NOTIFIED BY: \_\_\_\_\_ DATE: \_\_\_\_