



## Township of Lower Merion

75 E. Lancaster Avenue  
 Ardmore, PA 19003  
 Phone: 610-645-6199  
 Fax: 610-649-0777  
 Website: [www.lowermerion.org](http://www.lowermerion.org)

## SPECIAL EVENT PERMIT

**APPLICATION:** Complete all questions, indicating N/A where not applicable. Return application form, all required/supplemental attachments to Lori Jennings including the \$25 application fee, checks made payable to Treasurer, Township of Lower Merion. Applications for events must be submitted at least 30 days in advance and 5k's and Runs at least 6 months in advance. A \$25 late fee applies for late submission and may be denied a permit.

### SECTION 1: APPLICANT INFORMATION

The Primary Contact is the person who is to be contacted regarding the application or event.

Primary Contact Name:		
Primary Contact Address:		
City:	State:	Zip:
Primary Contact Phone:		Primary Contact Cell:
Primary Contact Email:		
Purpose of Event:		Type of Event:
Are you representing a Host Organization? <input type="checkbox"/> No <input type="checkbox"/> Yes, if so list information below		Is this organization non-profit? <input type="checkbox"/> Yes <input type="checkbox"/> No Is this organization private? <input type="checkbox"/> Yes <input type="checkbox"/> No
Organization's Name		
Organization's Address:		
Organization's Contact Person:		Email:
Organization's Phone:		Cell:

### SECTION 2: GENERAL EVENT INFORMATION

Township Facilities require a security/damage deposit of \$250 that will be returned if facility is left clean and undamaged. Check made out to: Township of Lower Merion

Township Facility Requested: _____						
Offsite Location: _____						
Event Type:	<input type="checkbox"/> Walk	<input type="checkbox"/> Bike Tour	<input type="checkbox"/> Sporting Event	<input type="checkbox"/> Wedding	<input type="checkbox"/> Concert	<input type="checkbox"/> Festival/Fair
	<input type="checkbox"/> Run	<input type="checkbox"/> Bike Race	<input type="checkbox"/> Rally/Demonstration	<input type="checkbox"/> Parade	<input type="checkbox"/> 5K	<input type="checkbox"/> Fundraiser
	<input type="checkbox"/> Other (describe)					
Date of Event:			Rain Date:			
Event Duration:	Starting Date:		Ending Date:			

**SECTION 2: GENERAL EVENT INFORMATION (CON'T)**

Attendance: Include event organizers, staff, volunteers, participants and spectators.		Hours of Operation: This represents actual event hours. If event last more than three days, attach additional hours of operation with application.		
Total Attendance Estimate:			Start Time	End Time
Peak Attendance Estimate		Day 1		
Anticipated Vehicles:		Day 2		
Parking Shuttle	<input type="checkbox"/> Yes <input type="checkbox"/> No	Day 3		
Site Preparation: This is the time it will take to prepare the site. The start time represents arrival on the site. If it is the same time as the actual event, enter starting date and time of event.		Starting Date:		Starting Time:
Dismantling & Cleanup: This is the time it will take to dismantle and clean up the event site. If same time as event, enter ending time of event.		Ending Date:		Ending Time:
Will a registration/entry fee be charged? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how much: \$ _____	Is the Event: <input type="checkbox"/> Charitable <input type="checkbox"/> For Profit <input type="checkbox"/> Private		

**SECTION 3: EVENT DESCRIPTION**

Is this a <input type="checkbox"/> fixed or <input type="checkbox"/> moving event (i.e. run, bike ride, etc.)?
Event Description (activities, entertainers, vendors, facilities, etc): _____ _____ _____ _____ _____ _____ _____ _____
List of Vendors: (May be required to provide insurance naming the Township as additional insured) _____ _____ _____ _____

## SECTION 4: SITE PLAN

All events require a site map of affected area.  Fixed – show placement of the following features as applicable.  Moving – show placement of the following features as applicable. Must show full route/course and start/finish points, road closures require highway permits.

<ul style="list-style-type: none"> <li>• Check-in/Gate or Entrance</li> <li>• Comfort Stations or Portable Toilets</li> <li>• Stages or other performance areas</li> <li>• Dumpsters, trash and recycling containers</li> <li>• Tents and/or Trailers</li> </ul>	<ul style="list-style-type: none"> <li>• Command Center</li> <li>• Vendor booths</li> <li>• Food &amp; Beverage Concessions</li> <li>• Street Crossings and Barricades</li> <li>• Security/Emergency</li> <li>• First Aid/Medical Stations(s)</li> </ul>	<ul style="list-style-type: none"> <li>• Sign/Banner Placement</li> <li>• Other event components not listed</li> </ul>
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Other (specify):

Route (if applicable):

Please provide a detailed route description from start to finish and attach to this application.

## SECTION 5: EVENT FEATURES

<input type="checkbox"/> Twp Park Facilities (1)	<input type="checkbox"/> Temporary Signs (2)	<input type="checkbox"/> Amplified Sound (2, 5)
<input type="checkbox"/> Road Closure/Crossing (4,5)	<input type="checkbox"/> Portable Toilets (1,2)	<input type="checkbox"/> Temp Electric/Generator (2,3)
<input type="checkbox"/> Emer. Med Service (5)	<input type="checkbox"/> Fireworks, Pyrotechnics, Bonfires (3)	<input type="checkbox"/> Tents (2,3)
<input type="checkbox"/> Security (5)	<input type="checkbox"/> Inflatables/Moon Bounce (1,2)	<input type="checkbox"/> Food Concessions (7)
<input type="checkbox"/> Staging/platforms (2)	<input type="checkbox"/> Carnival Rides/Games (2)(3)	<input type="checkbox"/> Raffles (8)
<input type="checkbox"/> Other(specify)	<input type="checkbox"/> Other(specify)	<input type="checkbox"/> Parking Lots (6)

Event Features Key-**Must Follow up with:**

1-Parks and Recreation    2- Building and Planning    3-Fire Department    4- Public Works  
 5 – Police Department    6 – Parking Department    7 – Montgomery County Health Department  
 8- Montgomery County

## SECTION 6: TENTS/TEMPORARY STRUCTURES

**Tents and/or temporary structures must be shown on all site plans. Flame retardant certification is required for all temporary structures (tents, inflatable's, etc.)**

Number of Tents: \_\_\_\_\_ Dimensions of Tents: \_\_\_\_\_

Number of Temp. Structures: \_\_\_\_\_ Dimensions of Temp. Structures: \_\_\_\_\_

Name/Address of Supplier: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Will this event use a stage or platform?  Yes  No

Prefabricated  Constructed on Site

If constructed on site, Architect/Engineer sealed plans and a building permit are required.

**SECTION 7: COMFORT STATIONS/PORT-A-POTTIES**

- The applicant is responsible for addressing the needs for their individual events.
- All events held on Township property will require a minimum of one (1) ADA Accessible unit/facility for every 100 people. Park system restrooms are intended to meet the needs of general park users and are not intended to serve as supplemental facilities.

# of Units: \_\_\_ Delivery on Site (date/time): \_\_\_\_\_ Removal (date/time): \_\_\_\_\_

Cleaning Schedule (if multiple days): \_\_\_\_\_

Name/Address of Supplier \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Notes:

**SECTION 8: ELECTRICAL SERVICE**

If the event requires electrical power or occurs during darkness or in a dark structure, lighting, emergency lighting and illuminated exit signage will be required.

Electrical permit application required for 120v circuits and generators.

Show location of generators and fixtures.

Indicate type of fixture on plan, i.e. Exit sign, emergency illumination, power to vendor’s tents.

All electrical installations to comply with the PA UCC, NEC 2008 and must be inspected.

Temporary lighting that affects neighboring properties is to be shielded.

How will electrical service be supplied: Generator Public Utility Both

Power and Lighting Plan: - A written description of the proposed power sources and lighting details must be indicated on the site plan.

**SECTION 9: FOOD/HEALTH SAFETY**

The applicant may allow concessionaires to be present in conjunction with the event. The applicant will be responsible for obtaining permits for food vending from the Montgomery County Health Department, 610-278-5117, if required. Insurance Certificates for all vendors must be submitted to the Township.

**SECTION 10: EMERGENCY MEDICAL PLAN**

At a minimum, local emergency services must be notified of your event and a copy of the notice provided to the Township. Contact Narberth Ambulance 610-645-7770 to notify them of the dates and times of the event so that they are aware of its scope.

On-site Emergency Medical Services may be required to be in attendance at the event. The Police and/or Fire Department will advise if on-site emergency medical service is needed.

On-Site Emergency Medical Service:  Yes  No N/A Standby Notified \_\_\_\_\_

If yes, Agency \_\_\_\_\_ Agency Phone: \_\_\_\_\_

**SECTION 11: FIRE & MEDICAL SAFETY**

**The Township may require staffing of uniformed/non-uniformed fire officers to be on-duty throughout the event. The applicant will be responsible for the cost(s) incurred for these services.**

The Fire Marshal for the Township of Lower Merion must review and approve plans for: use of an open flame, use of fireworks and pyrotechnics, handling of vehicle fuel, location of power sources, availability and location of on-site fire suppression equipment, the use of tents, canopies or any fabric shelters. Indicate all required features on site plan. A permit from the Fire Department is needed when fireworks, bon fire or pyrotechnics are utilized.

At a minimum, extinguishers are to be located at each exit of a structure and in close proximity to each open flame location.

No Smoking signs to be posted in all structures.

Indicate Fire Hydrant locations on the plan.

Indicate emergency vehicle access to site, access road around site to be 20 feet wide.

If any emergency vehicles are to be on site for the event, indicate location of vehicles on the site plan.

**SECTION 12: EVENT SAFETY AND SECURITY**

**The Township may require staffing of uniformed/non-uniformed police officers to be on-duty throughout the event. The applicant will be responsible for the cost incurred for these services.**

Event Organizers are required to provide a safe and secure environment for the event. A detailed plan for crowd control and security is required as part of the Special Event Application.

Who is in charge at the event? Provide contact information for the Event Director. All employees and volunteers assisting with the event must be fully aware of the procedure, and have the ability to contact the Event Director as well as notify all three municipal emergency services agencies: Fire, Police and Ambulance. Give details of the training to be provided to the event staff.

Give details of the emergency evacuation plan.

Please describe your Event Safety/Security Plan. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SECTION 13: PARKING AND TRAFFIC CONTROL**

Patron parking at Township facilities shall be limited to areas designated for parking only. In situations where sufficient parking is not available, the event organizer is required to provide a plan to transport/shuttle participants from an off-site area to the event.

Event organizers will be required to provide adequate volunteers (wearing proper safety equipment) for the purpose of directing patron parking.

Event organizers shall be required to submit a parking plan for all vehicles associated with the event and participant parking.

Use of Township Municipal lots or metered street spaces require pre-payment for spaces reserved, if the event occurs during enforcement days and times.

**SECTION 14: TRASH AND RECYCLING**

The applicant shall be responsible for leaving the facility in an “as good or better condition” than the site was found prior to the start of the event.

The applicant is responsible for the removal of all trash, litter, debris, etc. associated with the event. The applicant must make arrangements to supply an adequate number of trash and recycling receptacles and to remove trash and other event debris from the facility immediately upon conclusion of the event.

Failure to perform adequate clean up and/or should damage occur to Township property, the applicant will be billed at full cost recovery rates for supplies, cleanup and repair.

Placement of all dumpsters must be approved by the Township prior to placement.

Please describe your plan for cleanup and removal of waste during and after your event:

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We will provide:

\_\_ Number of Trash Receptacles \_\_Number of Dumpsters \_\_Number of Recycling Containers

Sanitation Service  Yes No

Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Equipment Setup: Date:\_\_\_\_\_ Time: \_\_\_\_\_ Pickup: Date:\_\_\_\_\_ Time: \_\_\_\_\_

**SECTION 15: MITIGATION OF IMPACT**

**Neighborhood Impact:**

The event organizers are required to include mitigation measures for negative consequences imposed on others by the event. Mitigation may include local press releases to community newspapers, radio, television and flyers to those residents who will be affected by the event delivered two weeks prior to the event. Notices must reflect the date(s), day(s), time(s), location(s) and types of activities taking place at the event. The notice must give detour or alternate route information if normal access is affected. A draft sample of the notice and proposed list of recipients must be attached to the application.

No event should unduly impact the surrounding neighbors for an extended period of time.

Acceptance of the Special Event Application by the Township is NOT a guarantee of event approval or date and location of the event.

Formal Approval of the event must be received from the Township prior to start of any promotion or advertisement of the event.

Describe your marketing/media plan: \_\_\_\_\_

Describe your notification plan for neighboring residential properties: \_\_\_\_\_

A copy of the notification letter/flyer must accompany this application.

**SECTION 16: WEATHER**

Provide a brief description of your rain policy relative to this event: \_\_\_\_\_

Rain dates may be requested for Township Park use but are not guaranteed. Dates can only be held as long as no other application is received.

The applicant is responsible to notify all applicable township officials, vendors, contractors, etc. of cancellation/postponement. If Township personnel and/or equipment is dispatched due to lack of notification, the applicant will be held responsible for all costs.

**SECTION 17: SUPPORT STAFF**

**You may request and/or the Township may require staffing of uniformed /non-uniformed staff to be on-duty throughout the event. The applicant will be responsible for cost incurred for these services. Cancellation of requested services must be made in writing prior to the event. Failure to provide written notice may result in the applicant being required to reimburse the Township for the agreed upon services.**

No Staff support is requested however, it is understood and acknowledged that support staff may be required and that cost will be at the applicant’s expense.

I am requesting Township support staff:

Describe: \_\_\_\_\_

I am requesting Police support staff:

Describe: \_\_\_\_\_

**SECTION 18: INSURANCE**

Insurance must be submitted no later than 14 days before the event.

Before final permit approval, the applicant must provide a current certificate of insurance according to the Insurance Requirements (see attached Insurance Requirements)

**SECTION 19: FEES AND CHARGES**

Application fee -\$25, and if applicable, \$25 late fee, are due at time of application submission  
All fees must be paid in full before a Special Event Permit will be issued.

**SECTION 20: SUBMISSION CHECKLIST**

Application Fee

Security Plan

Site Plan

Insurance Certificate

Parking Plan

Other Fees

Security Deposit

**SECTION 21: AFFIDAVIT OF APPLICANT**

I certify that the information contained in the foregoing application is true and correct to the best of my knowledge. By signing and submitting this Special Event Permit Application, the Applicant agrees to indemnify, defend and hold harmless the Township of Lower Merion and its officers, employees and agents from and against any and all losses, costs, (including, but not limited to litigation and settlement costs and counsel fees), claims, suits, actions, damages, liability and expenses, occasioned wholly or in part by the Sponsor's act or omission or negligence or fault or the act or omission or negligence or fault of Sponsors agents, subcontractors, suppliers, employees or servants in connection with the Permit, except for any claims, liability, demands, suits or loss arising from the willful or grossly negligent acts of the Township of Lower Merion, its elected and appointed officials, agents, employees and authorized volunteers. The Applicant agrees to comply with all other requirements of the Township, County, State, Federal Government, and any other applicable entity.

I agree to abide by these rules and further certify that I on behalf of the Host Organization am also authorized to commit that organization, and therefore agree to be financially responsible for any costs and fees that may be incurred by or on behalf of/to the Event to the Township of Lower Merion.

\_\_\_\_\_  
Print Name of Applicant

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**Township Use Only**

Permit Application Fee Received?	Staff Signature	If no fee received, reason.
<input type="checkbox"/> Yes, Amount _____ <input type="checkbox"/> Cash <input type="checkbox"/> Check # _____ <input type="checkbox"/> No, see box 3		<input type="checkbox"/> Non Profit <input type="checkbox"/> Other Charitable Event <input type="checkbox"/> _____

Date Security Deposit Received	Amount Received	Staff Signature	Security Deposit Returned-If not, explanation below	Staff Signature

Explanation of why Security Deposit was not returned:

\_\_\_\_\_



**Township of Lower Merion**  
**TV, Film, Video Production and Special Event Permit**  
**Insurance Requirements**

**Indemnification**

To the fullest extent permitted by law, Sponsor agrees to defend, indemnify, pay on behalf of, and save harmless the Township of Lower Merion, its elected and appointment officials, agents, employees, and authorized volunteers against any and all claims, liability, demands, suits or loss, including attorneys' fees and all other costs connected therewith, arising out of or connected to the Sponsor's proposed use or to occupancy of the premises of the Township of Lower Merion except for any claims, liability, demands, suits or loss arising from the willful or grossly negligent acts of the Township of Lower Merion, its elected and appointed officials, agents, employees and authorized volunteers.

**Insurance** – Compliance with the terms of this section is:

      X       Required               Suggested               Waived

1. The Sponsor shall purchase and maintain through the term of this agreement or its use or occupancy of Township of Lower Merion premises commercial general liability insurance or is equivalent with minimum of:

\$1,000,000    each occurrence;  
\$1,000,000    personal and advertising injury;  
\$2,000,000    general aggregate; and  
\$1,000,000    products/completed operations aggregate

2. This commercial general liability insurance or its equivalent shall include coverage for all of the following:

- a) Liability arising from premises and operations;
- b) Liability arising from products and completed operations;
- c) Contractual liability including protection for the Sponsor from bodily injury and property damage claims arising out of liability assumed under this agreement;
- d) Liability arising from the explosion, collapse, or underground (XCU) hazards;
- e) Liability arising from athletic or sports participation; and
- f) Liability arising from bodily injury to spectators.

3. The Township of Lower Merion and its elected and appointed officials, officers, agents employees and authorized volunteers shall be named as additional insured on the commercial general liability insurance policy as respects to Sponsor's use or occupancy of the premises of the Township of Lower Merion. The following manuscript wording must be utilized on the additional insured endorsement issued by the general liability insurer and shown on the insurance certificate submitted by the Sponsor to evidence its purchase of commercial general liability insurance:

The policy is amended to include as additional insured the Township of Lower Merion and its elected and appointment officials, officers, agents, employees and authorized volunteers, but only for liability arising out of your operations on, at or adjacent to premises of the Township of Lower Merion, "your product" or "your work."

4. If the Sponsor has any owned autos, the Sponsor shall purchase and maintain through the term of this agreement or its use or occupancy of the Township of Lower Merion premises business auto liability insurance or its equivalent with a minimum limit of \$1,000,000 per accident and including coverage for liability arising out of the ownership, maintenance or use of any auto and for automobile contractual liability.

**Township of Lower Merion  
TV, Film, Video Production and Special Event Permit  
Insurance Requirements**

5. If the Sponsor has any employees, the Sponsor shall purchase and maintain throughout the term of this agreement or its use or occupancy of the Township of Lower Merion premises worker compensation insurance or its equivalent with statutory benefits as required by any state or Federal Law, including standard "other states" coverage, and employers liability insurance or its equivalent with minimum limits of:
- \$100,000 each accident for bodily injury or accident;
  - \$100,000 each employee for bodily injury by disease; and
  - \$500,000 policy limit for bodily injury by disease
6. The Sponsor shall purchase and maintain throughout the term of this agreement or its use or occupancy of Township of Lower Merion premises umbrella excess liability or excess liability insurance or its equivalent with minimum limits of:
- \$5,000,000 per occurrence;
  - \$5,000,000 aggregate for other than products/completed operations and auto liability;
  - and
  - \$5,000,000 products/completed operations aggregate

and including all of the following coverages on the applicable schedule of underlying insurance:

- a. Commercial general liability;
- b. Business Auto liability; and
- c. Employers Liability.

**Waiver of Subrogation**

To the fullest extent permitted by law, the Sponsor and its employees, officials, volunteers, agents and representatives waive any right of recovery against the Township of Lower Merion and its elected and appointed officials, officers, volunteers, consultants, agents and employees for any and all claims, liability, loss, damage, costs or expense (including attorneys' fees) arising out of the Sponsor's proposed use or to occupancy of the premises of the Township of Lower Merion or arising out of Sponsor's operations on, at or adjacent to any premises of Township of Lower Merion. The Sponsor shall advise its insurers of the foregoing and such waiver shall be provided under the Sponsor's commercial property and liability insurance policies and the Sponsor's workers compensation insurance policy, if any.

**Damage to property of the Sponsor and its Invitees**

The Sponsor and its employees, officials, volunteers, and agents shall be solely responsible for any loss or damage to property of the Sponsor or its invitees, employees, officials, volunteers, agents and representatives while such property is on, at or adjacent to the premises of the Township of Lower Merion.

Please fax required documents to:

Mark Santoleri, Insurance Administrator  
Fax No.: 610-645-6202 or 610-649-2529