

Town of Andover

Permit for use of Town Property

Purpose of Event: _____	
Date: _____	Time: _____ Location: _____
Anticipated Attendance: _____	
Use of Town Property Requested: _____	
Name of Organization _____	Phone _____
Contact Person _____	Phone _____
Address _____	
City _____	State _____ Zip _____ Email _____

**** Alcohol allowed by special Permit**** Will Food or beverage be served _____

Health Permit _____

Are road closures anticipated? _____ Police officer required? _____

Will there be music? _____ Band? _____ Restroom access? _____

Will Fees or donations be collected? _____

Who will benefit from event? _____ Non-Profit(501C) _ . _ . _

In making this application, the organization agrees to comply with the rules and regulations of the Town of Andover, to take utmost care in the use of the facility, to reimburse the district for any damage to or loss from the use of the facility.

Permit approved _____	1 st Selectman _____	Date _____
Denied _____		Date _____
Reason. _____		
Health Department Signature if needed _____		Date _____
Alcohol Permit _____		Date _____
Insurance Company _____		Date _____
Limit of Liability _____	Insurance Certificate received _____	
Additional Fees: (Police, Public Works, etc.) _____		

Please NOTE: All requests must be submitted at least 14 days prior to the event.

Indemnity:

The organization or individual agrees to indemnify, save harmless and defend owner, its affiliates and its or their directors, officers, employees and property management agent, if any, from and against any and all claims, actions, damages, liability and expense in connection with personal injury and or damage to property arising from or out of any occurrence upon or at the property caused by the act or omission of the authorized parties in conducting the permitted activities. Any defense conducted by the organization or individual of any such claims, actions, damages, liability and expense will be conducted by attorneys chosen by the organization or inividual and the organization or individual will be liable for the payment of any and all court costs, expenses of litigation, reasonable attorney's fees and any judgement that may be entered therein.

Insurance:

The organization or individual agrees to maintain during the term of this agreement comprehensive general liability insurance insuring against the acts of omission of the authorized parties in conducting the permitted activities on the property and naming the Town of Andover as an additional insured with respect to such coverage. Minimum policy limits shall be \$1,000,000 each occurrence, bodily injury and property damage combined. The Organization or Individual agrees to provide a certificate of insurance evidencing such coverage
-_-to the town of Andover upon the. Execution of this agreement, and such additional certificate as shall be necessary to evidence such coverage with respect to the use of the Town of Andover facilities which are made subject to this agreement.

I am authorized to act on behalf of the above-named organization. I hereby make application on behalf of this organization to use the requested facility for the event describe herein. I agree to abide by all the rules and conditions for the use of the facility. I understand that it is my responsibility to provide proof of insurance prior to the event and that my failure to do so may result in cancelation of the event.

Signature

Date

Print Name