



APPLICATION FOR A SPECIAL EVENT PERMIT

Date of Application: 1 Aug 2019

Event Title or Type: Dorchester Goes Purple

Location of Event: _____

Date(s) of Event: Aug 28 - Sept 12

Hours of Event (Actual): _____

Name of Applicant: _____ Title: _____

If representing an organization or company, name(s): Dorchester Chamber of Commerce

Signature of Applicant: _____

If application is presented on or behalf of 1 or 2 businesses only, list names of business(es):

Address of Applicant: _____

Telephone: 410 228-3575 Email: bill@dorchesterchamber.org

Expected attendance: _____

Is a street closing being requested? Yes (show on map) No

If yes, what street(s) _____

If yes, indicate street closure & reopen times
(include set up and breakdown time): _____

Is staging or a platform required? Yes (show on map) No Amplification: Yes No

If event is on private property, name of Property Owner: NO

Will trash barrels & pick-up be provided by event holder? Yes No

Will portable toilets be provided? Yes (show on map) No

Will Tent be erected? Yes (show on map) No

Will food be prepared on the premises? Yes No

Will _____ be present? (list names on back of form) Yes No

Will alcohol be served? Yes No



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ROAD RACE, WALK-A-THON, ETC.

On Roadway? Yes No

On Sidewalk? Yes No

Will temporary signs be posted? Yes No

*****Signs must be removed by the following business day; no paint is allowed on streets or sidewalks.*****

Specific Route:

This is a REQUEST to have a banner
hung across Race Street from Aug 28 - Sept 12
"DORCHESTER GOES PURPLE"

- I attached a map showing locations of street closures, vehicles and temporary structures.
- For new events, I have attached documentation of notification of the application to all affected businesses and residents, and attest that a majority have supported and/or not objected to this event.
- I have read & agree to the City's Street Closures Policy.

FOR OFFICE USE ONLY

Conditions of Special Event Permission: _____

Police Costs: \$ _____ DPW Costs: \$ _____ Other Costs: \$ _____

TOTAL COSTS REQUIRED BY CITY COUNCIL: \$ _____

Recommendations:

Cambridge Police Department Approval Denial Alak J
Signature

Rescue Fire Department Approval Denial _____
Signature

Public Works Department Approval Denial Edw. Wheeler
Signature