CITY OF ASBURY PARK

SPECIAL EVENT APPLICATION FORM

Please complete the following information as required by City Ordinance 2021-6 General Licensing: 4-10

All applications and appropriate application fees are to be received by the Asbury Park Special Events Department no less than 30 days prior to the event for which the permit is being requested. Application fees are non-refundable. Applications should be emailed to: Leesha.floyd@cityofasburypark.com (732-502-5759) or mailed to the Department of Special Events 1 Municipal Plaza Asbury Park, NJ 07712 Attn: Leesha Floyd.

- All applications must be reviewed by the Special Events Committee. This may require the organizer/applicant to attend one or more special event meetings.
- Applications must be formally approved by the City Council after initial approval from the Special Events Committee.
- A **refundable** $500.00 deposit may be required in connection with events held on City property in case of damage.
- A certificate of insurance naming the City of Asbury Park (1 Municipal Plaza Asbury Park, NJ 07712) its officers, employees, contractors, agents and representatives harmless from and against any and all liability. Minimum liability coverage of one million dollars (for some events more coverage will be required) must be provided 10 days prior to event. The applicant name/organization on insurance must match the applicant name/organization completing the application.

All fees and certificate of insurance must be submitted 10 days prior to the event. Failure to do so can result in the termination of your event.

Date of Event:________________________  Rain Date:_________________

Time of Event:____________to___________  Setup time:_________  Break-down time:_________

Name of Event:________________________________________________

Location of Event:___________________________________

Type of Event (check all that apply):
- Festival
- Wedding*
- Bike Ride/Race
- Rally/Demonstration
- Parade
- Beach Event
- Triathlon
- Swim Event
- Foot Race
- Concert
- Multi Day Event
- Other:___________________

*Wedding applicants only need to complete page 6.
APPLICANT INFORMATION

1. Name of Applicant/Organization: _______________________________________________
2. Address of Applicant: ___________________________________________________________
3. Telephone #:_____________ Cell Phone #:_________________ E-mail:________________
4. Is your organization non-profit? __ If so, please provide Tax ID# __________________
   Please attach a copy of your non-profit certificate to the application
5. Describe in detail the type of event you want to stage: _____________________________
   ___________________________________________________________________________
   ___________________________________________________________________________
   ___________________________________________________________________________
   ___________________________________________________________________________
6. Estimated attendance: _________
7. ☐ YES ☐ NO Will drones be a part of your event?
8. ☐ YES ☐ NO Will there be music or amplified sound associated with your event?
   If Yes, please explain what type of amplification will be used: _______________________
   ___________________________________________________________________________
   ___________________________________________________________________________
   (speakers must be pointed towards the ocean, away from residential housing. No amplified music after 10pm.)
9. ☐ YES ☐ NO Will alcohol be served, sold, distributed or consumed at this event?
   If yes, applicant will need to apply for a social affairs permit or catering permit through the State. This should be done at least 15 business days prior to the event. City of AP off duty police officers will be required to be hired. Please include a detailed site plan of the alcohol service area.
10. ☐ YES ☐ NO Is there an admission charge? If yes, how much? _______
11. ☐ YES ☐ NO Is there a vendor charge? If yes, how much? _______
12. ☐ YES ☐ NO Has this event been held in the past?
   If Yes, please answer the following questions:
   • Date of last event? __________
   • Location________________________
   • Contact person:__________________
   • Email__________________________ Phone #________________________
13. □YES □NO  Will you be hiring a licensed professional security company?

If Yes, please complete:

Company Name:_____________________________ Contact name:____________________
Phone #:_____________________________ Cell #:_____________________________
Email address:_____________________________

The Asbury Park Police Department will review all security plans. Plans must meet city, state and Homeland Security guidelines and policies. SORA(Security Officer’s Registration Act) license required for all security companies. A copy the of the security company’s contract may be requested.

14. □YES □ NO  Do you intend to hire Asbury Park Officers for your event?

If yes, how many? ________ AP Police Department will review application and determine if and how many officers need to be hired.

15. □YES □NO  Will you have sponsors for your event? If so, Please list below them:

<table>
<thead>
<tr>
<th>Sponsors</th>
<th>Contact</th>
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Photos of sponsor advertisement will need to be provided

16. □YES □ NO  Will food be provided? All food vendors should contact the Fire Department to determine if any fire permits are required. The Monmouth County Health Department will be on site to inspect all food vendors to ensure proper protocols are in place and being followed. (See attached form from Monmouth County Health Dept)

17. □YES □ NO  Will you be hiring EMTS? AP Fire Department will review application and determine if and how many EMTS need to be hired.

18. □YES □ NO  Will you be hiring lifeguards? AP Beach Safety Supervisor will determine if and how many lifeguards will need to be hired.

19. □YES □ NO  Does your event have any tents or canopies?

• □ Tents  □ Canopies
• If yes, how many? _____ Sizes(sq ft)____________________________________

All events utilizing tents and/or canopies should contact the Fire Department to determine if any fire permits are required.
20.  □ YES  □ NO  Will street closures be required?  If yes, please identify what streets and the times the closure required

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

AP City ordinance requires the hiring of an off duty officers if a street is closed. Additional charges will include barricades and street blocking fee (see fee schedule)

21.  □ YES  □ NO  Will electricity be needed?  If yes, explain how will this be provided:

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

Generators require a permit from the Construction department

22.  □ YES  □ NO  Will this event have staging or platforms?  If Yes, please provide the following:

- Size and Height of stage or platform
- Name of stage provider

Depending on the size of the stage our construction department may require engineering reports & permits

23.  □ YES  □ NO  Will you require reserved parking spaces for your event?  If yes, how many:__________ and where________________________________________

Please visit www.cityofasburypark.com to purchase reserved parking spaces.

24.  □ YES  □ NO  Will any area be fenced off? Please explain___________________________

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

Name of Fence Provider:___________________________________________________

Be sure to request a sprinkler head map for City parks.

25.  □ YES  □ NO  Do you plan to provide portable restrooms? If yes, how many?_____

Number of ADA restrooms______, Please indicate on your site plan where these restrooms will be located.  Estimated # of units: up to 500 people-5 units; 1000 people- 8 units; 2500 people-15 units

Restroom Provider:_________________________  ____________________________

26.  □ YES  □ NO  Will you have your own cleanup crew? #_____

If trash, food debris or anything else is left behind from your event, security deposit will be forfeited

27.  □ YES  □ NO  Will you hire DPW staff to cleanup? See fee schedule for fees. Depending on the event, The City reserves the right to require DPW staff be hired. Certain venues require the hiring of DPW staff

28.  □ YES  □ NO  Will you require use of the City’s trash cans? If yes, how many?_____

□ YES  □ NO  Recyclable cans?______ If yes, how many?_____

Recycling is required at all events. Failure to do so may result in State and local fines
29.  ☐ YES  ☐ NO  Will you be renting a dumpster? If yes, what size:_______________
      How many:______ Delivery Date:_________  Pickup Date:_________  Please indicate
      on your site plan where dumpsters will be located.
      ➤ Name of Company providing dumpster:___________________________________

30. Please explain how you will provide cleanup, disposal and removal of trash and debris
    associated your event:

    ____________________________________________________________________________
    ____________________________________________________________________________
    ____________________________________________________________________________
    ____________________________________________________________________________

As mentioned on page 1, a $500 refundable deposit (refunds will take at least 4 weeks to receive) will
required for all events held on City property. Deposit is forfeited if debris, trash, recyclables etc. are
not removed. The applicant is responsible for all cleanup of any items associated with your event.
The City will provide trash and recyclable containers for your use.

All fees and are estimated only may be adjusted as needed.

The City reserves the right to revoke the permit for the following reasons including but not limited
to:  the nature of the event changes or expands without consent of the City; if State or Federal
Executive Orders prohibits events from occurring; public safety or health are called into question;
proper permits are not obtained by applicant; if all fees are not paid in full and insurance is not
provided 10 days prior to the event.

_________________________ ___________________
Signature of Applicant                      Date

_________________________ ___________________
Printed Name of Applicant                  Title
Wedding Ceremony Application

Park/Beach Rental Fee (nonrefundable): $500.00 (for up to 3 hours of use) $700.00 (for 3-8 hours of use)
Make checks payable to "The City of Asbury Park " 1 Municipal Plaza AP, NJ 07712 Attn: Leesha Floyd

Between Memorial Day and Labor Day, 6pm is the earliest ceremonies can begin on any beach.

- A certificate of insurance naming the City of Asbury Park (1 Municipal Plaza Asbury Park, NJ 07712) as an additional insured in the amount of one million dollars. (If you are a homeowner, some insurance companies will allow you to add a one day rider to your home insurance policy or a one day policy can be purchased from any insurance company. Insurance policies must be provided 10 day prior to the ceremony)
- Alcohol is prohibited on City beaches
- Firework displays are prohibited w/o pre-approval from the City & proper documentation being provided to the City
- Applications and fees must be received by the Special Events Department 30 days prior to your event

Wedding Date: ________________  Ceremony start time: ___________  End time: ______________
Setup time: _______________ (breakdown and cleanup must be within 2 hours of the conclusion of the ceremony)
Location of Ceremony: ________________________________

☐ YES  ☐ NO  Will reserved parking spaces be requested? If so, how many spaces________ where_________________________. Please visit www.cityofasburypark.com to purchase parking spaces (waterfront spaces cannot be reserved between Memorial Day & Labor Day)

Applicant 1- Name & Address: ________________________________________________________________
______________________________________________________________
Contact #: ___________________  Email Address:______________________________________________

Applicant 2- Name & Address: ________________________________________________________________
______________________________________________________________
Contact #: ___________________  Email Address:______________________________________________

# of people in wedding party:_____  # of people attending wedding:_____

Will any of the following items be used (check all that apply):

☐ Pa system  ☐ Chairs
☐ Archway  ☐ Canopy/tent (if larger than 30x30, a permit is required)
☐ Other structures:

I understand and agree by applying for this permit I am responsible for the conduct of attendees, and that any violation of the rules can result in the immediate termination of your event. I also understand that I am responsible for the cleanup
of the area where my event is held and that no cooking or alcohol are allowed on the beach. If it becomes necessary for the City to care for the area, I am liable for all costs incurred. Lastly I understand all fees are non-refundable.

________________________________________________________________________

Name of race:________________________________________________________________________

Purpose of race:_______________________________________________________________________
_____________________________________________________________________________________

Entrance fee charged? □ Yes □ No   Amount?________

Beneficiary:________________________________________________________________________

Distance:_______________

Assembly area:___________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Route (include a map of the route):
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Disbanding area:___________________________________________________________

# of participants_________    # of volunteers_________    # of spectators_________

# of participants_________    # of volunteers_________    # of spectators_________
PARADES
Please use additional sheets (attached) of paper if necessary

Parade route: __________________________________________________________

____________________________________________________________________

____________________________________________________________________

Starting location: _________________________________________________________________________

____________________________________________________________________

____________________________________________________________________

Ending location: _________________________________________________________________________

____________________________________________________________________

____________________________________________________________________

Assembly area: _________________________________________________________________________

____________________________________________________________________

____________________________________________________________________

Disbanding area: _________________________________________________________________________

____________________________________________________________________

____________________________________________________________________

# of bands: ______ # of floats: _______ # of cars: ______ # of marchers_________

Other parade participants _____________________________________________________________

____________________________________________________________________

____________________________________________________________________

Describe how you plan to provide security for the event: _________________________________

____________________________________________________________________
Please include site plan and program schedule for your event

Event name:___________________________________________________

Location:_____________________________________________________

# of food vendors____  (fire permit required if cooking w open flame)  # of nonfood vendors_____
(Food vendors must meet the requirements of the Monmouth County Board of Health)

# of stages_____  Location of stages/performance areas:_____________________________

Description of stages/performance areas:

______________________________________________________________________________

Type of entertainment/music:______________________________________________

______________________________________________________________________________

Describe how you plan to provide security for your event:_______________________________

______________________________________________________________________________

Site plan attached: _____Yes   _____No. Application won’t be accepted w/o a site plan.
RALLY/DEMONSTRATION/VIGIL

Type of Event:
☐ Rally  ☐ Demonstration  ☐ Vigil

Date:___________________

Applicant/Organization Name:__________________________________________

Phone #______________________  Email Address:__________________________

Applicant Address:_______________________________________________________

Is the applicant also the person who will be in charge onsite? _____Yes _____No.

If different, please provide the following:
Name:__________________________________________
Address:_______________________________________________________
Email address:__________________________  Cell#:______________________

Date of Rally/Demonstration/Vigil:_____________________________________

# of estimated participants:___________  Start Time:_________  End Time:_________

Location of Event:_______________________________________________________

Is there a march associated w this event?  ______Yes  ______No  If yes, what is the
route:_____________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Time March Begins__________  Time March Ends__________
The obstruction of pedestrian and/or vehicular traffic is prohibited. Applicant will assume financial responsibility for any damage to public or private property as a result of this public event.

__________________________________________
Applicant Signature

__________________________________________
Print Name

Use of Indoor City Facilities Form

Which facility are you interested in using:

☐ Council Chambers  ☐ Transportation Center  ☐ Senior Center

• A $500 refundable deposit is required in case of damage. Refunds will given within 45 days of the event
• Use of venues requires the hiring of a public works employee and the hiring of at least one off duty police officer (no exceptions)
• Use of Senior Center kitchen or cooking of food in any venue is not permitted
• Senior Center events must events end and the building be cleared out by 9pm.

Date:___________________

Applicant/Organization Name:________________________________________________________

Phone #___________________________  Email Address:____________________________________

Applicant Address:_____________________________________________________________________

☐ YES  ☐ NO  Is the applicant also the person who will be in charge onsite?

If different, please provide the following:
Name:_____________________________________________________
Address:____________________________________________________________________________
Email address:_________________________  Cell#:___________________________

What is the purpose of the event:______________________________________________________
__________________________________________________________________________________
THIS SECTION FOR MULTIPLE DAY EVENTS ONLY

Will the event require equipment to remain in place onsite overnight or will the site be broken down each night? Explain:________________________________________
______________________________________________________________________
______________________________________________________________________

How will you provide overnight security for the event:_______________________
______________________________________________________________________
______________________________________________________________________

Private security (name, address and website):_______________________________
______________________________________________________________________

A copy of the security company’s SORA license must be provided

Hiring of off duty officers? ____yes ____no  If yes, how many?___________
Please utilize this page if additional space is needed to answer questions

________________________________________________________________________
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# Contact List

<table>
<thead>
<tr>
<th>Contact</th>
<th>Phone Number</th>
</tr>
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<tbody>
<tr>
<td>Asbury Park Police Dept</td>
<td>732-775-6548</td>
</tr>
<tr>
<td>Asbury Park Fire Dept</td>
<td>732-775-6300</td>
</tr>
<tr>
<td>Construction Office</td>
<td>732-502-5722</td>
</tr>
<tr>
<td>Department of Public Works</td>
<td>732-775-0900</td>
</tr>
<tr>
<td>Beach Office</td>
<td>732-775-8863</td>
</tr>
<tr>
<td>Parking</td>
<td>732-502-5762</td>
</tr>
<tr>
<td>Special Events</td>
<td>732-502-5759</td>
</tr>
<tr>
<td>Madison Marquette</td>
<td>732-897-6500</td>
</tr>
</tbody>
</table>
SPECIAL EVENT FEE SCHEDULE

**Application Fee (non-refundable)**
Application fee must be submitted with application

<table>
<thead>
<tr>
<th>Organization Type</th>
<th>Fee</th>
</tr>
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<tbody>
<tr>
<td>Non-profit organizations</td>
<td>$50.00</td>
</tr>
<tr>
<td>All other organizations/groups</td>
<td>$250.00</td>
</tr>
<tr>
<td>Events over 2,000</td>
<td>$1000.00</td>
</tr>
<tr>
<td>Events over 15,000</td>
<td>$5000.00</td>
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</tbody>
</table>

*non-profit is defined as an organization or entity which has been duly established and operates in accordance with the NJ Non Profit Corporation Act, NJSA 15A:1-1 or a similar entity which has been organized under the laws of a jurisdiction other than the State of New Jersey and which may have obtained federal tax exempt status under Section 501© of the Federal (IRS) Tax Code.

**Maintenance Personnel and Equipment fees:**

- Putting up barricades- 1 man, 1 hour $50.00
- Picking up barricades- 1 man, 1 hour $50.00
- Putting up banner- 2 men, 1 hour $100.00
- Taking down banner- 2 men, 1 hour $100.00
- Use of pickup truck, per hour $60.00*
- Use of dump truck $85.00*
- Use of sweeper, per hour $75.00*
- Use of front end loader, per hour $80.00*
- Use of dozer, per hour $100.00*
- Use of litter scooter, per hour $50.00*
- Use of garbage truck, per hour $90.00* (plus tipping fees)
- Use of bucket, per hour $75.00*
- Ambulance $250.00*
- Dumping fee $120.00 per ton
- Fire Engine or Rescue Truck $500.00 per day*
- Rack Body Flatbed Truck $65.00 per hour
- Mason Dump Truck $65.00 per hour
Items shown with an asterisk require an additional charge for the operator of the vehicle or equipment, which shall be at the rate of $50.00 per hour. The above fees include delivery and pick-up during regular working hours (7am-2pm). For any increments into the following hours, a one hour charge shall be incurred.

**Public Parks and other locations:**

- **Sunset**: $600.00 per day
- **St. John’s Island**: $500 per day
- **Bradley**: $2000.00 per day from one week prior to Memorial Day through two weeks after Labor Day
- **Bradley**: $750.00 per day any other time (off season)
- **Atlantic**: $2000.00 per day from one week prior to Memorial Day through two weeks after Labor Day
- **Atlantic Park**: $750.00 per day any other time (off season)
- **Library**: $600.00 per day
- **Kennedy**: $500.00 Monday-Friday (up to 8 hours); Saturday and Sunday $500 per day between 8am-4pm; $500 per day between 5pm-10p.
- **Springwood**: $100.00 per day

**Boardwalk fee**: daily fee of $250.00 per 4 hours of use

**Beaches**: Use of beaches for any event up to 3 hours of use-$500 per day per beach avenue (i.e First Avenue Beach); events lasting from 308 hours of use- $700 per day per beach avenue(i.e. First Avenue Beach). All participants on the beach will also be required to purchase a daily beach badge if the event occurs during the summer season when beach badges are required for access to the City’s public beaches

**Transportation Center**: $100.00 per day plus any maintenance fees

**Council Chambers**: $100.00 per day plus any maintenance fees

**Large Beach or Park Event**: any event that is projected for 500 participants or more will be subject to a different fee structure to cover added city expenses. The daily beach/park fee will vary according to the type of event: Beach Fee: $2,500.00  Park Fee: $2,500.00

In addition, a deposit will be required in the amount of $5,000 to cover any expenses incurred by the city that are not covered by special event fees
For any event with 500 or more participants, user fees and deposits will be set by the Asbury Park Special Events Committee and approved by the Asbury Park City Council. A separate contract approved by the City Council will govern the operation and fees of said event.

**Street Blocking, Closing and Hiring of off duty personnel:**

**Non-Metered Streets:** $250.00 daily fee per block for any non-metered street blocking or closing.

**Metered Streets:** The daily charge per block for street blocking or closing will be calculated by: taking the number of metered parking spaces in that block x the current hourly rate in that block (for the specific date of closure) x the daily number of hours the meters are in operation = the daily rate for that block. Either the daily block rate or a minimum of $250.00, whichever is greater, will be paid by the applicant.

**Off Duty Police Officers:** 8:00am-12:00am $75.00 per hour per officer/ 12:00am- 8:00am $85.00 per hour per officer

**EMT/Fire:** 8:00am-12:00am $75.00 per hour/12:00am-8:00am $85.00 per hour (Fire Inspector/Fire Official regular overtime receive rate)

**Lifeguards:** $65.00 per hour

**Utility fees:** Any and all fees for actual water and electric consumption shall be billed by the Director of Public Maintenance after the conclusion of the event.

**Electrician:** $60.00 per hour

**Returned Checks:** $25.00 fee in addition to the reimbursement of the original check amount.

All required fees must be paid in full at least 10 days prior to the event. All checks should be made payable to City of Asbury Park and mailed to 1 Municipal Plaza Asbury Park, NJ 07712 Attn: Leesha Floyd, Special Events Department

The City of Asbury Park is authorized to charge any additional and/or unanticipated fees or expenses which are deemed or become necessary prior to, during or after the special event, as a direct result of the event, from unforeseen circumstances or otherwise.
SPECIAL EVENTS APPROVAL PROCESS

APPLICATION W APPLICATION FEE IS SUBMITTED

APPLICATION IS REVIEWED BY SPECIAL EVENTS COMMITTEE (APPLICANT MAY BE REQUIRED TO MEET WITH COMMITTEE)

APPLICATION IS APPROVED BY THE CITY COUNCIL

LIABILITY INSURANCE, FEES, DEPOSITS ETC ARE TO BE PROVIDED BY APPLICANT AFTER APPROVAL

This is a general description. Each event is different, some are more complex than others. Therefore above process can and will vary from event to event. The earlier the application is submitted, the more time the City will have to work with you to ensure a safe and enjoyable event is planned.