



TOWN OF FRAMINGHAM
DEPARTMENT OF CAPITAL PROJECTS & FACILITIES MANAGEMENT

RENTAL APPLICATION FOR THE USE OF THE CENTRE COMMON

(Please submit at least 2 weeks prior to event.)

I. APPLICANT INFORMATION

Event Name: _____

Name of Applicant: _____ Name of Organization: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Telephone: _____

Is your organization non-profit? Y N If yes, proof of status as defined by IRS code section 501(c)(3) **MUST** be included.

II. EVENT INFORMATION

Date of Event: _____ Day of Week: _____ Expected Attendance (Including Staff): _____

Set-Up Time: _____ Event Start Time: _____ Event End Time: _____ Clean-Up End Time: _____

Please give a **detailed description** of the event you are planning, including any activities, raffles, inflatables, tents, and equipment that may be brought in: _____

Will you need access to the electrical boxes? Y N If yes, please list all electrical requirements: _____

Will food or beverages be served at the event? Y N If yes, will beverages be: Free For purchase

If yes, will food be: Free For purchase Cooked/prepared onsite Cooked over an open flame

Will food trucks be at the event? Y N If yes, how many? _____

Please list any and all vendors that will be participating at the event: _____

Will there be any entertainment/music at the event? Y N If yes, please list what it is: _____

If yes, is the entertainment/music: Amplified sound/speaker Live music Other _____

Will there be a parade or march? Y N If yes, please specify assembly point, beginning and end points: _____

Will restroom facilities be brought to the event site? Y N If yes, how many? _____

Please remember that there should be at least 1 fully accessible unisex restroom for the event.



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III. POLICY & PERMIT INFORMATION

Initial here to confirm you understand you are required to obtain a \$1,000,000 Certificate of Liability Insurance stating that "The Town of Framingham is included as additional insured as respects to the General Liability policy per written agreement/contract." _____

Initial here to confirm you understand and agree that **NO VEHICLES ARE PERMITTED TO PARK ON THE CENTRE COMMON.** _____

Initial here to confirm that you understand you may be required to hire a Police Detail(s) and/or Fire Detail(s) for your event based on any safety concerns as determined by the Police and Fire Departments. _____

Initial here to confirm that you understand that Centre Common is a smoke free environment and the consumption of alcoholic beverages is prohibited on Town Property. _____

Initial here to confirm that you understand that clean-up of the event area immediately following the event is the responsibility of the applicant and that the Centre Common is to be left in the same condition it was found, free from litter and debris. _____

Initial here to confirm you understand you are required to obtain the right **PERMITS** and **LICENSES** when holding an event on the Centre Common. _____

IMPORTANT EVENT CONTACTS

Please contact any of the following departments regarding your event.

- Food Permits - Contact Board of Health for required permits 508- 532-5470
- Fire Details & Permits - Contact Fire Department to schedule details and for required permits 508-532-5930
- Police Details - Contact Police Department to schedule details - Detail Officer - 508-532-5907
- Entertainment License - Contact License Administrator for required permits 508-532-5402
- Tents-Wiring-Signage Permits - Contact Inspectional Services for required permits 508-532-5500

**All fees are payable in advance: permits, police, fire, etc. **

I have read, understand and will comply with all guidelines written in the Policy for the use of Centre Common. Applicant hereby agrees to indemnify, defend, and hold harmless Town, and its officers, attorneys, employees, attorneys, and agents from and against any and all claims, demands, suits, actions, liabilities, damages, penalties, judgments, and costs and expenses, including without limitation the costs and expenses of litigation and attorney's fees, of or by anyone that in any way is caused by, arises out of, or is occasioned by, the acts or omissions of applicant in connection with this event, or any activities, operations, conducts, negligence, or omissions of applicant or its guests or agents, regardless of whether same is caused in part by Town or any third party.

Signature of Applicant

Date



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FOR DEPARTMENT USE ONLY

Approved:

TOWN MANAGER _____ Date _____

FACILITIES MANAGEMENT _____ Date _____

FIRE DEPARTMENT _____ Date _____

POLICE DEPARTMENT _____ Date _____

Certificate of Insurance Received Y N N/A _____

Proof of Non-Profit Received Y N N/A _____

Board of Health Permit Y N N/A _____

Inspectional Services Permit Y N N/A _____

Fire Detail(s) Y N N/A _____

Police Detail(s) Y N N/A _____