

SOUTH PORTLAND CITY COUNCIL

POSITION PAPER OF THE CITY CLERK

SUBJECT:

STREET CLOSURE

JOHN MALONEY, 37 ARBUTUS AVENUE, IS REQUESTING THE CLOSURE OF ARBUTUS AVENUE FROM 30 ARBUTUS AVENUE TO 39 ARBUTUS AVENUE FOR A NEIGHBORHOOD BLOCK PARTY. THE BLOCK PARTY IS SCHEDULED FOR SEPTEMBER 14, 2013 FROM 2:00PM TO 8:00PM.

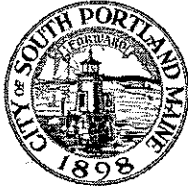
POSITION:

Code Enforcement, Fire, Parks & Recreation, Police, Public Works and the Transportation Department have been notified and there are no objections. The request with details is attached.

REQUESTED ACTION:

Council approval for the Street closure.


CITY CLERK



City of South Portland Event Application

Application must be turned in 30 days prior to the event

Application Date August 5, 2013

ORGANIZATION INFORMATION

Name of Organization: _____

Contact Person for Event: JOHN MALONEY

Title of Contact Person: _____

Contact Name and Phone number during the Event: JOHN MALONEY 899-5925

Mailing Address: 37 ARBUTUS AVE

Telephone: _____

Cell Phone: 207-899-5925

Email Address: JOHN.MALONEY@INLANDSEAFOOD.COM

Is your organization incorporated as a non-profit organization? _____ Yes No

Non-Profit Number: _____

EVENT INFORMATION

Name of Event: ARBUTUSFEST (NEIGHBORHOOD BLOCK PARTY)

Location of Event: 30 ARBUTUS - 39 ARBUTUS AVE

Date of Event: SAT SEPT 14

Rain Date: NO RAIN DATE

Time of Event: Start Time: 2PM Ending Time: 8PM

Estimated Attendance: 50-60 PEOPLE

Does the Sponsoring Organization own the property? _____
If not, please attach a letter from the property owner authorizing this event.

Does the Applicant have insurance for this event? _____ Yes _____ No

Please check off all events that will occur

Check off	Type of Event	Additional Information	Fee	Total
	Amplified Sound	Complete Neighbor Notification	\$10.00 per event	
	Burn Permit/Bonfire	Must complete Additional paperwork with the Fire Department	No Fee	
	Carnival	Proof of Insurance is required	\$125.00 a day	
	Circus	Proof of Insurance is required	\$300.00 a day	
	Electrical Permit	Must complete additional paperwork with Code Enforcement	\$60.00 paid to Code Enforcement	
	Fireworks	Proof of Insurance is required. Site Plan approval from Fire Marshall Required (call 207-624-8744)	No Fee	
	Food	Please Provide a list (Include: Name of organization, contact, address, phone, and food items that will be sold or given away)	\$35.00 per event per Food Vendor	
	Non Food Items	Please Provide a list (Include: Name of individual, date of birth, address, phone, and items that will be sold or given away)	\$60.00	
	Off Premise Alcohol	State Application is required	\$20.00	
	Off premise Signs	Must complete additional paperwork with Code Enforcement	\$25.00 Minimum paid to Code Enforcement	
	Parade	Please provide Parade route.	No Fee	
	Parking Accommodations are needed	Please provide any maps or diagrams relating to this event.	No Fee	
X	Road/Intersection Closure	Please provide any maps or diagrams relating to this event. Council Approval is required.	No Fee	
	Run/Walk/Cycle/Swim	Please provide any maps or diagrams relating to this event.	No Fee	
	Tent Permits	Must complete additional paperwork with Code Enforcement	\$25.00 paid to Code Enforcement	
	Trailer Permits	Must complete additional paperwork with Code Enforcement	\$25.00 paid to Code Enforcement	
			Processing Fee	\$20.00
			Total	

Fees are waived for Non Profits

Will Barricade and/or cones be needed? BARRICADES

Is Yes, How many barricades 4 Cones _____

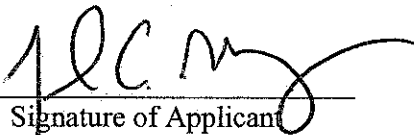
SANITARY FACILITIES

Please state if the following items will be available at your event, the number of items available and the proximity of the item to your event:

<u>Sanitary Requirement</u>	<u>Amount at Event</u>	<u>Location</u>
TOILETS	_____	_____
WASTE DISPOSAL	_____	_____
HAND WASHING FACILITIES	_____	_____
PORTABLE WATER	_____	_____
FIRST AID FACILITIES	_____	_____

DESCRIPTION OF EVENT

OUR FOURTH ANNUAL NEIGHBORHOOD BLOCK PARTY. THIS WILL
 BE OUR FOURTH YEAR HAVING A NEIGHBORHOOD BLOCK PARTY.
 WE RENT A MOONBOUNCE FOR THE KIDS, PLAY YARD GAMES
 COOK BURGERS & DOGS



 Signature of Applicant

Aug 5, 2013

 Date Submitted

Please note that you will be contacted by City Staff if you require additional permitting.

Please return this application to: **City Clerks Office**
Att: Jessica Hanscombe
25 Cottage Road
South Portland, Maine 04106
207-767-7628
jhanscombe@southportland.org

ADDITIONAL INFORMATION

Neighbor Notification

By signing below, I am acknowledging that I have been advised of the details of an event to be hosted by my neighbor, which includes the need for an *Amplifying License/Street Closing*.

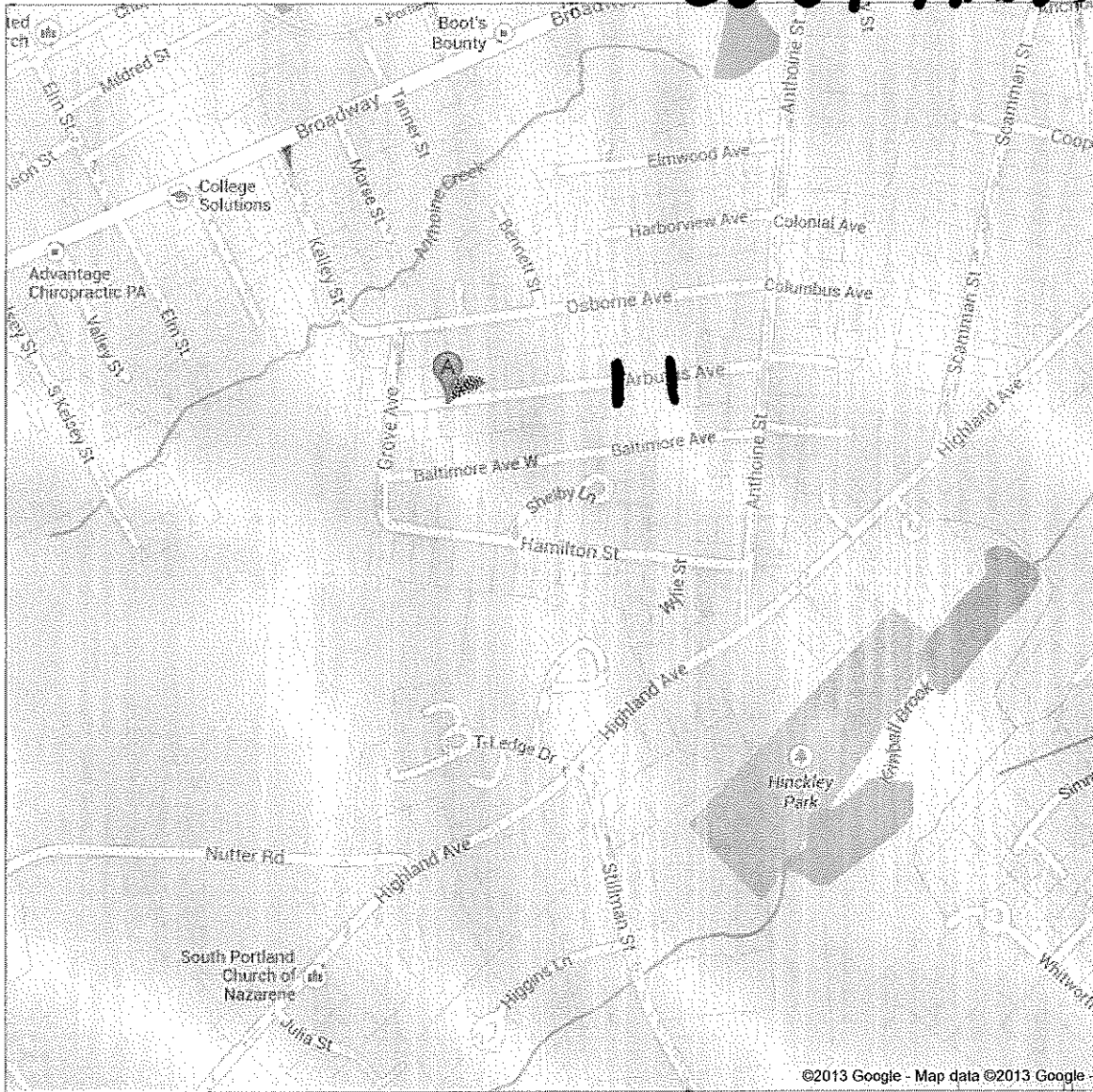
I understand that by signing below I am neither approving nor disapproving of the use of amplification equipment/Street Closing, but rather that I have been advised of the application. (The Police Chief will make a final decision as to whether the application is approved or denied.)

NAME	ADDRESS	SIGNATURE
John Maloney	37 ARBUTUS AVE	[Signature]
KIM J AGER	33 Arbutus Ave	[Signature]
MAUREEN PHILBRICK	33 ARBUTUS AVE	[Signature]
Terrance Hartford	34 Arbutus Ave	[Signature]
Sarah Hartford	34 Arbutus Ave.	[Signature]
Karen L Ham	30 Arbutus Ave	[Signature]
Cassie Borden	39 Arbutus Ave	[Signature]
Chris Borden	39 Arbutus Ave	[Signature]
John Harvey	30 Arbutus Ave	[Signature]
ED ZELLERS	42 ARBUTUS	[Signature]
Deborah Bassett	49 Arbutus	[Signature]
Ryq Bant	49 ARBUTUS AVE	[Signature]
Angela Stron	72 ARBUTUS AVE	[Signature]
SHAWN FINDLAY	55 Arbutus AVE	[Signature]
Kathleen Findlay	55 Arbutus Ave.	[Signature]
Ron Costigan	55 Arbutus Ave	[Signature]

Google

Address 30 Arbutus Ave
South Portland, ME 04106

30-39 Arbutus



******FOR STAFF USE******

DEPARTMENT COMMENTS AND RECOMMENDATIONS:

City Clerk Comments/Recommendation: _____

Code Officer/Health Comments/Recommendation: _____

Code Officer/Building Comments/Recommendation: _____

Fire Department Comments/Recommendation: _____

Parks & Recreation Department Comments/Recommendation: _____

Police Department Comments/Recommendation: _____

Public Works Department Comments/Recommendation: _____

Transportation Department Comments/Recommendation: _____

Council Public Hearing Date: _____

Approved/Denied: _____

Date applicant notified: _____