## SANDYSTON TOWNSHIP OUTDOOR ENTERTAINMENT LICENSE APPLICATION

Name & Address of Applicant:  If Corporation, name & address of responsible corporate officer:		
Description of land & premises to be licensed, namely: Block Lot		
Property owner, or consent of owner and/or copy of lease agreement:		
Date performance to be conducted:		
*Rain Date (if applicable)		
Type of exhibition, show or performance:		
Approximate number of persons expected to attend the event:		
Hours of performance:		
Will there be amplified or nonamplified music or singing:		
<ul> <li>Number of security personnel to be employed together with their names and addresses</li> </ul>		
<ul> <li>Attach list of performers, schedule or program for the event</li> </ul>		
Have the person(s) conducting the event or the officers of the organization sponsoring the event been convicted of any crimes other than minor traffic offenses?		
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<ul> <li>Attach list of performers, schedule or program for the event</li> </ul>	
Is the person(s) conducting the event or the officers of the organization sponsoring the event over of age?	er 18 years
Have the person(s) conducting the event or the officers of the organization sponsoring the event convicted of any crimes other than minor traffic offenses?	been
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Purpose of exhibition:	
stAn Affidavit shall be provided to the Municipal Clerk upon successful notification of property within 500 feet of the property.	owners
*Provide the township with a Certificate of Insurance naming Sandyston Township, 133 Route 645, S	1 1 4

Please return the following to the Municipal Clerk:

• This completed application with \$100 fee/\$25 500 foot list = \$125.00

NJ 07826 as additional insured with limits of not less than \$1,000,000 per occurrence if on public property.

- Sketch of property
- Affidavit of mailing with list of property owners (upon completion)
- Certificate of Insurance naming Sandyston Township as Additional Insured (before event)
- Rain Dates (please consider including rain dates)

## **Applicant Certification**:

I hereby certify that the foregoing statements and attack	hments are correct to the best of my knowledge.
Signature of applicant:	Date:
Printed Name of Application:	
Date Received by Clerk:	
Clerk's signature for receipt of application:	
Approval of Township Committee:	
License #	