

SOUTH PORTLAND CITY COUNCIL

POSITION PAPER OF THE CITY CLERK

SUBJECT:

ORDER #193-16/17 - Granting street closure of Broadway from Southern Maine Community College parking lot to the Veteran's Monument from 10:00am to 11:30am for a parade on Monday, May 29, 2017. Passage requires majority vote.

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.

A handwritten signature in black ink, appearing to read "Emp. of Salley", is positioned on the right side of the page.

REQUESTED ACTION:

Passage of ORDER #193-16/17.



CITY OF SOUTH PORTLAND

PATRICIA SMITH
Mayor

SCOTT MORELLI
City Manager

EMILY F. SCULLY
City Clerk

SALLY J. DAGGETT
Jensen Baird Gardner & Henry

**In City Council
Order
#193-16/17**

District One
CLAUDE V.Z. MORGAN

District Two
PATRICIA SMITH

District Three
EBEN ROSE

District Four
LINDA C. COHEN

District Five
BRAD FOX

At Large
MAXINE BEECHER

At Large
SUSAN HENDERSON

ORDERED, a street closure of Broadway from Southern Maine Community College parking lot to the Veteran's Monument from 10:00am to 11:30am for the South Portland War Memorial Association's Memorial Day Parade on Monday, May 29, 2017. Passage requires majority vote.

Dated: May 15, 2017



City of South Portland Event Application

Application must be turned in 30 days prior to the event

Application Date February 27th 2017

ORGANIZATION INFORMATION

Name of Organization: South Portland War Memorial Association [VFW Post 832 & American Legion 35]

Contact Person for Event: Sam Flint Title: Past Post Commander VFW 832

Contact Name and Phone number during the Event: Sam Flint cell 807-5254

Mailing Address: 15 George St So Portland, Me 04106

Telephone: [Home] 207-767-3894 Cell Phone: 807-5254

Email Address: sflint@maine.rr.com Web site: _____

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

Non-Profit Number: N/A

EVENT INFORMATION

Name of Event: Memorial Day Parade

Location of Event: From SMCC parking lot on Broadway to the Veteran's Monunment on Broadway

Date of Event: Monday May 29th Rain Date: NONE

Time of Event: Start Time: 10:30 AM Ending Time: 11:30 AM

Does the Sponsoring Organization own the property? Yes No Estimated Attendance: ?
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
<input type="checkbox"/>	Amplified Sound	Complete Neighbor Notification	\$10.00 per event	
<input type="checkbox"/>	Burn Permit/Bonfire	Must complete additional paperwork with the Fire Department	No Fee	
<input type="checkbox"/>	Carnival	Proof of Insurance is required	\$125.00 a day	
<input type="checkbox"/>	Circus	Proof of Insurance is required	\$300.00 a day	
<input type="checkbox"/>	Electrical Permit	Must complete additional paperwork with Code Enforcement	\$60.00 paid to Code Enforcement	
<input type="checkbox"/>	Fireworks	Proof of Insurance is required. Site Plan approval from Fire Marshall Required (call 207-624-8744)	No Fee	
<input type="checkbox"/>	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	
<input type="checkbox"/>	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	
<input type="checkbox"/>	Off Premise Alcohol	State Application is required	\$20.00	
<input type="checkbox"/>	Off premise Signs	Must complete additional paperwork with Code Enforcement	\$25.00 Minimum paid to Code Enforcement	
<input checked="" type="checkbox"/>	Parade	Please provide Parade route.	No Fee	
<input type="checkbox"/>	Parking Accommodations are needed	Please provide any maps or diagrams relating to this event.	No Fee	
<input checked="" type="checkbox"/>	Road/Intersection Closure Time of Closure: Start: <u>10 AM</u> Finish: <u>11:30 AM</u>	Please provide any maps or diagrams relating to this event. Council Approval is required.	No Fee	
<input type="checkbox"/>	Run/Walk/Cycle/Swim	Please provide any maps or diagrams relating to this event.	No Fee	
<input type="checkbox"/>	Tent Permits	Must complete additional paperwork with Code Enforcement	\$25.00 paid to Code Enforcement	
<input type="checkbox"/>	Tidal Waters to be used	Please provide a map	No fee	
<input type="checkbox"/>	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 for each street on Broadway

If Yes, How many barricades ? Cones N/A

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


WASTE DISPOSAL

	<u>Amount at Event</u>	<u>Location</u>
RECYCLING CONTAINERS	_____	_____
Types of recycling containers: _____		

WASTE CONTAINERS	_____	_____
Types of waste containers: _____		

DESCRIPTION OF EVENT

This is our yearly Memorial Day Parade honoring our fallen Veteran's. It will include several Color Guards, three Bands, Scouts, [Boys, Girls, Brownies] Antique cars and trucks, Fire trucks, ambulances, civilians, a van and bus with Veteran's from the Scarborough Veteran's Home.



Signature of Applicant

February 27th 2017

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**
Attn: Amanda Brousseau
25 Cottage Road
South Portland, Maine 04106
207-767-7628
abrousseau@southportland.org

City of South Portland Event Application – Signoff

****FOR STAFF USE****

DEPARTMENT COMMENTS AND RECOMMENDATIONS:

City Clerk Comments/Recommendation: Print Name: _____

Code Officer/Health Comments/Recommendation: Print Name: Derrick Stephens

Fire Department Comments/Recommendation: Print Name: Chief Wilson

Parks & Recreation Department Comments/Recommendation: Print Name: Kevin Adams

Police Department Comments/Recommendation: Print Name: Chief Grogins

Public Works Department Comments/Recommendation: Print Name: Doug Howard

Transportation Department Comments/Recommendation: Print Name: Rich Sargent

Council Public Hearing Date: _____

Approved/Denied: _____

Date applicant notified: _____