



## **Town of East Hampton Road Race Application**

Applicant Requirements: All portions of this form plus the attached Mass Gathering event registration form must be completed at least 6 weeks prior to the date of the event. Applications will not be processed unless all information is completed.

Approval Process: Upon receipt, the Parks and Recreation Department, East Hampton Police Department, and the Town Manager will review and approve or deny the request.

Insurance and Financial Responsibility: The Town of East Hampton does not provide participants' or spectators' medical, surgical, or hospital expenses arising out of proposed activity. Applicant may be required to submit a CERTIFICATE OF INSURANCE as a condition for the granting of approval. Said certificate, in the amount of \$1,000,000.00, will name the Town of East Hampton, its officers, agents, and employees as additional insured. If insurance has a deductible, the user shall be required to provide an additional security deposit in the amount of the deductible or a determined portion thereof. If there are damages, the applicant will be responsible for the cost of repairs. If insurance certificate is not required, it is understood that the applicant assumes financial responsibility for any damages to facility caused. Additional Town staff or police protection may be required at the cost of the applicant.

Hold Harmless: Applicant agrees that it will indemnify and hold harmless the Town of East Hampton and its respective officers, agents, and employees from any loss, cost, damages, expenses, judgments and liability whatsoever kind or nature howsoever the same may be caused resulting directly or indirectly by any act or omission of the applicant, any subcontractor, anyone directly related or indirectly employed by any of them or anyone for whose act any of them may be liable resulting in bodily injury including sickness or death, personal injury or damage to property directly or indirectly, including the loss of use resulting there from as permitted by law.

Today's Date: \_\_\_\_\_

Organization Sponsoring Race: \_\_\_\_\_

Name of Race: \_\_\_\_\_

Name of Timing Company: \_\_\_\_\_

Type of Organization: a. \_\_\_\_ Private Individual b. \_\_\_\_ Group, Unincorporated Individuals c. \_\_\_\_ Non-Profit Org.

d. \_\_\_\_ Business Corporation e. \_\_\_\_ Town Organization or Department

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Day of Race Leader/ how will they be identified: \_\_\_\_\_

Type of Race: a. \_\_\_\_ Running b. \_\_\_\_ Walking c. \_\_\_\_ Bicycling d. \_\_\_\_ Wheel Chair e. \_\_\_\_ Other

Date of Race: \_\_\_\_\_

Race Start Time: \_\_\_\_\_

Estimated Finish Time: \_\_\_\_\_

Starting Location: \_\_\_\_\_

Finish Line Location: \_\_\_\_\_

What Methods will be used to Control Crowds at the Start & Finish: \_\_\_\_\_

Please Outline the Proposed Route of the Road Race including Total Distance (include map): \_\_\_\_\_

\_\_\_\_\_

What type of Bathroom Facilities will be used: \_\_\_\_\_

Number of Staff and Volunteers \_\_\_\_\_

Estimated Number of Participants: \_\_\_\_\_

Parking Requirements: \_\_\_\_\_

Is Traffic Support Necessary: \_\_\_yes \_\_\_No

If Yes, where is support Necessary: (off duty officers may need to be hired. On duty officers are not an option

As we cannot assure they will be available) \_\_\_\_\_

Type and Location of Race Signage (all signage must be removed immediately after the event): \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Signatures for Approval:

Town Manager: \_\_\_\_\_

Parks and Recreation Department: \_\_\_\_\_

Police Department: \_\_\_\_\_

## Chapter 237. MASS GATHERINGS

[HISTORY: Adopted by the Board of Selectmen of the Town of East Hampton 10-8-1985 (Ord. No. 9.02). Amendments noted where applicable.]

### GENERAL REFERENCES

Use of Town parks — See Ch. 246, Art. I.

#### § 237-1. Notification of Fire Marshal required; inspections.

All persons and organizations conducting or making facilities available for events as defined herein shall notify the Fire Marshal, in writing, of the time

and place of the event at least five days prior to the date on which the event is to be held. The Fire Marshal may inspect the premises at which the event

is to be held for compliance with firesafety laws prior to the event. Inspection is to be made for all firesafety features, including but not limited to exits,

exitways, exit and emergency lights, interior finishes, capacity and temporary appliances such as lights and loudspeakers.

#### § 237-2. Definition of "event."

As used herein, "events" are public assemblies including but not limited to dances, fairs, craft shows, auctions, plays, concerts and sporting events at

which 50 or more people are expected to attend, not including, however, regular meetings of organizations open to members only.

#### § 237-3. Applicability.

This chapter shall apply to indoor or outdoor facilities used for such events, including but not limited to schools, colleges, churches and facilities of

fraternal organizations.

**§ 237-4. Assignment of fire fighters to event.**

Nothing in this chapter shall prevent the assignment of fire fighters for duty at an event at the expense of the person or organization sponsoring the

event.

**§ 237-5. Penalties for offenses.**

*Editor's Note: Added at time of adoption of Code (see Ch. 1, General Provisions, Art. I).* Any person who violates any provision of this chapter shall be fined

not more than \$100. Each day on which an event is held without notification to the Fire Marshal as required by this chapter shall be deemed a separate

offense.



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| <p><b>(Fire Marshal Use Only)</b><br/>EHFD Notification: Date:<br/>#FF Req:<br/>Initials:</p> |
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**Office of the Fire Marshal**  
**Town of East Hampton**  
**20 East High Street**  
**East Hampton, CT 06424**  
**860-267-0088**

**EVENT REGISTRATION FORM**

Name of Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Place of Event: (Specific location and area) \_\_\_\_\_

Date(s) of event: Time(s): \_\_\_\_\_

Type of Event :( Crafts, antiques, dance, etc...) \_\_\_\_\_

Expected Occupant Load: Special Needs Attendees: (Y/N) \_\_\_\_\_

Special Uses:

Cooking: \_\_\_\_\_ Location of Cooking: Displays: \_\_\_\_\_

If displays, combustible or non-combustible: \_\_\_\_\_

Any Hazardous Materials present: (Y/N) \_\_\_\_ Tents/Wall Coverings(Y/N) \_\_\_\_

If yes to Hazmat or tent../wall coverings type expected and quantity: \_\_\_\_\_

Necessary Electrical Requirements (Display lighting, sound systems, appliance receptacles, etc....)

PERMIT May Be Required: \_\_\_\_\_

If applicable, name of electrical contractor: \_\_\_\_\_

Address & Phone: \_\_\_\_\_

License and Classification: \_\_\_\_\_

APPLICANT: Submit a floor plan showing proposed location of activities, displays, placement, exits, tables and chairs, stages, etc.



The applicant acknowledges that the Fire Marshal in accordance with the Connecticut General Statutes may in his discretion; order the assignment through the Fire Chief of fire department personnel to provide fire protection services at this event. At the expense of the person or organization sponsoring the event.

The applicant further acknowledges that failure to notify the Fire Marshal, at 860-267-0088 of the cancellation of the event at least 48 hours prior to the date and time of the scheduled event.

I understand and agree with the above statements, and certify that all information contained within this application is true:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

**Fire Marshal Use  
Only**

Date Received: \_\_\_\_\_ Date Reviewed: \_\_\_\_\_

Accepted: Rejected: \_\_\_\_\_

Reason for rejection: \_\_\_\_\_

Alternatives ordered to submitted application: \_\_\_\_\_

Additional Requirements: \_\_\_\_\_

Fire Protection Required: \_\_\_\_\_

Number of Personnel: \_\_\_\_\_

Fire Marshal/Deputy Signature Date: \_\_\_\_\_