

## Application for Use of Public Property Checklist

### **Please consider the following rules for requests, outlined in Resolution No. 2021-23 before submitting your request:**

Council considers the requests for the use of parks, streets, or other city-owned properties under the jurisdiction of the City Council in the following order of precedence:

1. Individual Resident
2. Resident Businesses
3. Resident Nonprofits
4. Nonresident Individual
5. Nonresident Nonprofit

### **For organizations located within the City of Lock Haven, the following tasks must be completed to receive a permit for use of public property:**

- Contact the City of Lock Haven Director of Community Life at 570-893-5612 or [kcampbell@lockhavenpa.gov](mailto:kcampbell@lockhavenpa.gov), eight (8) weeks prior to the event to notify City Council and City staff of your intent to hold an event on public property. Please describe the dates and general nature of the event.
- Eight (8) weeks prior to event, submit a completed “Application for Use of Public Property (Special Event) Form” including the following items
  - A Certificate of Insurance showing (a) public liability insurance for bodily injury and property damage in the amount of one million dollars (\$1,000,000) per person and one million dollars (\$1,000,000) per occurrence to cover any loss that might occur as a result of the permitted use of that might otherwise arise out of or be connected with the event;(b) occurrence-based coverage; and (c) The City of Lock Haven named as additional insured
    - If event is taking place at Zindel Park or on the levee, Certificate of Insurance must also list the following as additional insured:
      - Lock Haven City Authority
      - The Nature Conservancy (only necessary for Zindel Park)
  - A map of the area to be used for the event with the area/order of route listed and highlighted

### **For individuals, businesses, and nonprofits not meeting the criteria for individual resident, resident business, or resident nonprofit as defined in the Resolution, the following rules apply to requests to City Council:**

- Applicant must show that the municipality to which the applicant is a resident has received the same application for service or permit request, and that the municipality to which the applicant is a resident has denied the request from the applicant.
- The applicant must show that the request serves a county-wide purpose by gaining endorsement from the majority of Clinton County Commissioners at a regular or special meeting of the board of commissioners and provide a letter from the Chief Clerk of Clinton County notifying the city of the commissioners’ endorsement of the request
- If approval is granted for the use of a park, street, or other city owned property and a cost is incurred by the city, then the applicant must provide written assurance of its intent to cover all costs to make the city taxpayers whole upon being invoiced for those costs.



City of Lock Haven
Application for Use of Public Property

Applicant's Name: \_\_\_\_\_ Applicant's Organization: \_\_\_\_\_

Applicant/Organization Address: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Other Contacts: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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

Date of Activity: \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Rain Date (if applicable) \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Type of Activity: \_\_\_\_\_ No. of Participants Expected: \_\_\_\_\_

Location Requested: \_\_\_\_\_

Please describe your proposed activity in detail: (add additional sheets if necessary)

\_\_\_\_\_
\_\_\_\_\_

Will you need barricades and/or signs? [ ] No [ ] Yes

Are you planning to use/close sidewalks? [ ] No [ ] Yes

PLEASE NOTE: Sponsor is held responsible for the replacement value of and/or repairs of missing cones, barricades, signs, or other city owned property if damaged or stolen.

Will this event require use of other services? [ ] No [ ] Yes (i.e., electricity, public works, police, parking, fire)

If yes, please describe what additional services are required:

\_\_\_\_\_
\_\_\_\_\_

PLEASE NOTE: Sponsor may be asked to reimburse the city for the cost of extra utility services.

Will you be providing food or drink to the public? [ ] No [ ] Yes

Will this event require Open-Container Approval? [ ] No [ ] Yes

If yes, applicant will also need to submit the following with this application:

- [ ] Open-Container Permit Application (attached)
[ ] Name of Caterer that has off-site PLCB license: \_\_\_\_\_
[ ] Copy of license from Caterer
[ ] Copy of Sidewalk Café permit (if applicable)

Will this event be taking place on City Authority property?  No  Yes  
(Zindel Park, Corman Amphitheater, or Riverwalk)

If yes, applicant will need to submit the following with this application:

- Signed liability waiver
- Certificate of Liability Insurance with additional insured listed accordingly:

For the Corman Amphitheater or Riverwalk:

- City of Lock Haven
- Lock Haven Area Flood Protection Authority (LHAFPA)

For Zindel Park:

- City of Lock Haven
- Lock Haven City Authority
- The Nature Conservancy

Applicant recognizes and agrees that the use of area designated will be strictly limited to the dates and hours requested. The applicant agrees to hold the City of Lock Haven harmless from and indemnify the City against any loss or damage of any kind including costs and attorney fees incident to or resulting in any way from any claim, action, demand, or judgement brought against the City or recovered against the City by any and all persons on account of any damages or injuries, either personal or property damage, without limitation, caused directly or indirectly as a result of the said site. All requests are on a first come, first served basis.

NOTE: Proof of insurance may be required, depending on size and type of activity.

Applicant's Signature: \_\_\_\_\_

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

Additional information (if needed):

**OFFICE USE ONLY:**

Date of Council Action: \_\_\_\_\_

Additional Materials Required? \_\_\_\_\_ Received? \_\_\_\_\_

Certificate of Insurance lists all additional insured? \_\_\_\_\_

**ROUTING FOR APPROVAL:**

Police Chief: \_\_\_\_\_ Director of Public Works: \_\_\_\_\_ Code Enforcement: \_\_\_\_\_ Council: \_\_\_\_\_

Conditions (if any) are as follows: \_\_\_\_\_  
\_\_\_\_\_

Applicant notified of Approval on: \_\_\_\_\_