

Prepared By:
Town Of Warwick
132 Kings Highway
Warwick, NY 10990

Permit #: _____
Date of Event: _____
Hours of Event: _____
From: _____
To: _____

Special Event Permit

***Applicants are required to meet with Town Board members to discuss details of Special Event before Town can grant approval.**

Chapter 115. Public Assemblies and Entertainment

Article II. Conditions Pertaining to Temporary Outdoor Public Gatherings. § 115-10 Permit fee.

The applicant shall pay to the Town at the time the application is submitted a fee of \$25 per day for each day of operation.

To: Town Board
Town of Warwick
Warwick, NY 10990

Application is hereby made for a Special Event Permit for access to road(s) in the Town of Warwick.

A. Applicant: _____

Telephone #: _____ Email Address: _____

Evening #: _____ Emergency #: _____

B. Address: _____

C. Name of Road(s) (Attach map of Route):

D. Nature and Purpose of Permit:

(Continue to next page)

If Permit is granted, I hereby agree to conform to all the conditions and restrictions forming a part of this Permit and to conform to all local ordinances, if any, and to conform to the provisions as set forth in the M.U.T.C.D. (Manual of Uniform Traffic Control Devices).

Applicant's Signature

Title

Date

Address

Conditions and Restrictions

1. This Permit shall not be assigned or transferred except with the written consent of the Town Board.
2. Notice shall be given by said applicant at least 48 hours prior to a Regular Meeting of the Town Board held on the 2nd or 4th Thursday of each month.
3. The Applicant hereby agrees to indemnify and save harmless the Town of Warwick from all suits, actions or damages of every kind whatsoever which may arise from or on account of the event under this Permit. General Liability Insurance for the protection of the Applicant and the Town of Warwick will be maintained in such an amount and in such company and in such case as the Town Board may require. Be sure to attach a Certificate of Insurance naming the Town of Warwick, 132 Kings Highway, Warwick, NY 10990 as additional insured.
4. The Town Board reserves the right to revoke or cancel this Permit at any time should the Applicant fail to comply with the terms and conditions herein prescribed.
5. Applicant's approved copy of this Permit shall be in possession of the parties actually involved.
6. This Permit application is subject to such other consents as are required by Law.
7. Arrangements shall be made with the Town of Warwick Police Chief to provide, during the period of such Special Event, for the handling of pedestrian and motor vehicle traffic, the re-routing of traffic, caring for emergencies and other related needs.
8. Applicant will be charged a fee for police personal services (payroll/labor) if additional police officers are required at this event. Additional personnel and amount to be determined by the Police Chief.

(Continue to next page)

9. The Applicant hereby agrees to clean up any debris along the Town of Warwick Roads in the vicinity of the specified locations arising out of or as a result of the activity under this Permit.

I Herewith agree to the "Conditions and Restrictions".

Applicant's Signature

Date

Witness's Signature

Date

Permission is hereby granted to applicant.

A Certificate of General Liability (bodily injury/property damage) Insurance must be on file at the Office of the Town Clerk, Town of Warwick.

Town Clerk (Signature)

Date

Approved by Town Board on _____
Date

*****Note*****As per following the Town Board Resolution. If additional police personal are required for this Special Event, Police Chief will bill you for services provided.

#R96-69 POLICE CHARGE FOR SPECIAL EVENTS

Motion Councilwoman Gamache, seconded Councilman Lust to adopt a resolution charging the sponsor of special events in the Town of Warwick for police services provided by the Town of Warwick Police. The amount of the charge is to be determined by the Town of Warwick Police Chief, and is to be equal to the additional personal services (payroll/labor) cost resulting from the police services provided for the special event. Motion Carried (5 ayes)

**PLEASE FILL OUT THE ATTACHED
POLICE AGREEMENT**

cc: Fire Department, Ambulance Department

revised 01-16-2024

AGREEMENT
FOR
POLICE SERVICES

This agreement dated _____,
between, _____ with offices at
_____ and the Town of Warwick, a New
York Municipality, with offices at 132 Kings Highway, Warwick, NY 10990, (Town) for
services to be provided to _____ by the Town.

Whereas, _____ desires to have
the Town provide specific police services
to _____ at the
_____, and;

Whereas, The Town is willing and able to provide such services as outlined below
at a cost set forth below, _____ and the Town hereby agree as
follows:

1. The Town will provide police presence in the form of up to one police cruiser and officer up to _____ as requested. The officer(s) provided will be regular Town of Warwick Police officers assigned at the discretion of the Town of Warwick Police Chief or his designated agent.
2. The Town hereby certifies that it maintains General Liability insurance including law enforcement activities in a base amount of \$1,000,000 together with an umbrella policy for \$10,000,000 for all underlying occurrences. The Town also maintains the statutory Workmen's Compensation insurance as required by New York State. Copies of said policies shall be made available to _____ upon request.
3. It is further understood and agreed by and between the parties hereto that the Town shall only be required to make its best efforts to provide the manpower and equipment as noted above. The parties recognize that there may be emergency or other circumstances under which the officers or equipment assigned to the _____ details may be required for public safety to be positioned elsewhere. Such reassignment shall not be regarded as a breach of this contract if such should occur.
4. The period of time covered by this agreement shall run from _____ until _____, unless extended by mutual agreement of the parties hereto.

5. The cost to _____ for the above services shall be as follows:

a. A charge of \$180.00/hour/officer will be due and payable prior to filming/Special Event.

$$\frac{\text{_____}}{\text{\# of Police}} \times \$180.00 = \frac{\text{_____}}{\text{Total}} \times \frac{\text{_____}}{\text{\# of Hours}} = \frac{\text{_____}}{\text{Total Police}}$$

b. In addition, a charge of \$40.00/hour for each car assigned shall be computed and billed to compensate for wear and tear, fuel, etc.

$$\frac{\text{_____}}{\text{\# of Cars}} \times \$40.00 = \frac{\text{_____}}{\text{Total}} \times \frac{\text{_____}}{\text{\# of Hours}} = \frac{\text{_____}}{\text{Total Cars}}$$

c. Cost of miscellaneous safety equipment deemed necessary or desirable by the Town shall be billed to _____ at a cost basis. Such items might include but not necessarily be limited to flares, cones, etc.

$$\frac{\text{_____}}{\text{Total Police}} + \frac{\text{_____}}{\text{Total Cars}} + \frac{\text{_____}}{\text{Miscellaneous}} = \frac{\text{_____}}{\text{Total Amount Due}}$$

6. If the final cost exceeds the total amount due, the applicant will be responsible for any additional costs which will be reflected on a final bill.

Applicant's Name (PRINT)

Applicant's Signature

Town of Warwick

By: _____
John Rader,
Chief of Police

By: _____
Jesse Dwyer,
Town Supervisor

*updated January 1, 2025



CERTIFICATE OF LIABILITY INSURANCE

OP ID:

DATE (MM/DD/YYYY)

03/15/11

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICY BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME:	
	PHONE (A/C, No, Ext):	FAX (A/C, No):
INSURED	E-MAIL:	
	ADDRESS:	
	PRODUCER:	
	CUSTOMER ID:	
	INSURER(S) AFFORDING COVERAGE	
	NAIC #	
	INSURER A:	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY	X			09/01/10	09/01/11	EACH OCCURRENCE \$ 1,000,
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 5,
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY \$ 1,000,
	<input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						GENERAL AGGREGATE \$ 2,000,
							PRODUCTS - COMP/OP AGE \$ 2,000,
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS						PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS						
	<input type="checkbox"/> NON-OWNED AUTOS						
	UMBRELLA LIAB						EACH OCCURRENCE \$
	EXCESS LIAB						AGGREGATE \$
	<input type="checkbox"/> OCCUR						
	<input type="checkbox"/> CLAIMS-MADE						
	DEDUCTIBLE						
	RETENTION \$						
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATUTORY LIMITS
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N					OTH-ER
	If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Certificate Holder is included as Additional Insured:

CERTIFICATE HOLDER

CANCELLATION

WARWI-1

Town of Warwick
132 Kings Highway
Warwick, NY 10990

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE