



Daniel P. Losquadro
Superintendent of Highways

Ecology Site / Building Use Permit Application

Application Rates

Residents: \$50
Non-Residents: \$125

**Alcohol is NOT Permitted
on Town Property**

Non-Profit Groups Meeting Rates

Monday – Friday between the hours of 8:00am & 3:30 pm: \$15 per meeting up to 2 ½ hours;
plus \$15 per hour or part thereof, over the first 2 ½ hours
Monday - Friday between the hours of 3:30pm & 9:00 pm: \$30 per meeting up to 2 ½ hours;
plus \$35 per hour or part thereof, over the first 2 ½ hours
Saturday & Sunday 9:00am – 4:30pm: \$40 per meeting up to 2 ½ hours;
plus \$45 per hour or part thereof, over the first 2 ½ hours

Parties, Wedding & Special Occasions Social Activities Rates

All rates are a Maximum 5 hours (includes ½ hr. set-up and ½ hr. break down), unless otherwise noted.

Building Rental, Monday – Thursday: \$325
Building Rental, Friday – Sunday: \$375
Fundraising & Non-Profits: \$375
plus \$60 per hour or part thereof, over the first 5 hours
Photos – Greenhouse # 1: \$50 per hour or part thereof
Damage Deposit: \$100 **CASH** deposit

Fees must accompany all applications and are not refundable. In the event of a cancellation, fees may be transferred to another date, subject to availability.

*Payments may be made via check, money order, cash or credit card.
Credit card transactions are charged a service fee of 2.35% of the transaction amount. The minimum service fee is \$1.50 on all transactions.*

*Payment is made to the Town of Brookhaven Highway Department.
For further information, please call 631-758-9664 x 10.*

Mailing Address:
1140 Old Town Road
Coram, NY 11727

**HOLTSVILLE ECOLOGY SITE &
ANIMAL PRESERVE**
631-758-9664

Physical Address:
249 Buckley Road
Holtsville, NY 11742

Meeting Type: _____

Brief Description: _____

Meeting Room # 1 (max 30 ppl) Meeting Room # 2 (max 100 ppl)
Green House #1 (max 100 ppl) Other (specify) _____

Date(s) of Event: _____

No. of Guests: _____ Start Time: _____ End Time: _____
(Note: The allotted hours must include time for set-up and clean-up)

Organization: _____
(if 501(C), attach a copy of official designation)

Applicant's Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

E-Mail: _____

Applicant's Signature _____ Date: _____

In the event of a cancellation, please contact _____

Please Print Name

Phone Number

Release and Hold Harmless

The undersigned is being granted a permit for the use of Town property and/or Town facilities and hereby agrees to assume responsibility and all risk of loss and shall be responsible for the supervision and welfare of all persons arriving on and / or using Town property and/or facilities in connection with permit issued. The undersigned further hereby releases the Town of Brookhaven, its officers, employees, servants, agents and enumerated volunteers from any liability for any injuries sustained or damages incurred, and to reimburse the Town for any damages arising out of directly or indirectly relating to the undersigned's use of the Town property and / or facilities. The undersigned hereby further agrees that (he/she) will indemnify and hold harmless the Town of Brookhaven, its officers, employees, servants, agents and enumerated volunteers harmless from any liability or claims that may result from the use of the Town property and/or facilities arising out of said permit.

Applicant's Signature _____ Date: _____

Fee calculation:

Application fee			\$
Meeting fee (first 2 1/2 hrs.)	\$	x # mtgs	\$
Meeting fee (additional hrs.)	\$	x # mtgs	\$
Social Activity fee (first 5 hrs.)			\$
Social Activity fee (additional hrs.)	\$	x # hrs	\$
Photos (# hours x \$50)	\$	# hrs	\$
Total Fee			\$
Damage Deposit (If paying the above fee by check or credit card, this portion of the payment MUST be made in cash.)			Refundable Cash Deposit \$100

<i>Official Use Only</i>	Permit#: _____
Received by: _____	Approved By: _____
Check #: _____	Amount: \$ _____
	CC authorization # _____



Daniel P. Losquadro
Superintendent of Highways

Permit Holder Responsibilities

*Damage deposit is required for all applications. Deposit must be made in cash.
Refunds are issued upon approval by the facility manager.*

Permit # _____

1. Alcoholic beverages are NOT permitted on Town property.
2. Smoking is not permitted on the Ecology Site Property.
3. Tables and floors must be cleaned at the end of your event / meeting.
4. Wipe down kitchen counters and sink, if used for your event / meeting.
5. Clean oven, microwave and refrigerator, if used for your event / meeting.
6. Return table and chairs to their original location. DO NOT lean tables and chairs up against the walls!
7. Decorations MAY NOT be placed on the walls. Do not use tape or tack on the walls.
8. Group must remain in their designated area.

Permit Holder Signature

Date

Facility Manager Signature

Date

Official Use Only

Cash Deposit Received by: _____ Cash Amount: _____

Official Use Only – Facility has been inspected and is approved for damage deposit refund.

Facility staff signature: _____ Date: _____

Deposit Return Date: _____

Permit Holder Signature

Facility Staff Signature

Mailing Address:
1140 Old Town Road
Coram, NY 11727

**HOLTSVILLE ECOLOGY SITE &
ANIMAL PRESERVE**
631-758-9664

Physical Address:
249 Buckley Road
Holtsville, NY 11742