



**Donna Lent, Town Clerk**

Patricia Ryan-Correa, Deputy Town Clerk  
One Independence Hill, Farmingville, NY 11738  
(631) 451-9101 FAX: 451-9264

**APPLICATION MUST BE FILED IN TRIPLICATE**

Application is hereby made to the Town Clerk of the Town of Brookhaven for issuance of a permit as hereinafter specified. In the event that this application is granted, we do hereby agree to comply with the Ordinance as adopted by the Town of Brookhaven and to read as follows:

**ARTICLE III - PARADES AND PROCESSIONS**

**§ 4-11. Permit required, exceptions:**

No person, firm, corporation or other entity shall organize, conduct or take part in any parade upon any town highway, public street or any other public place in the Town of Brookhaven without a permit issued therefor by the Town Clerk. Such permit shall not be required for any funeral procession for the actual burial of the dead and processions to and from a place of worship in connection with a religious service there celebrated. The discharge of firearms or fireworks and the making of other unreasonable noise during funeral processions are prohibited.

**§ 4-12. Permit application:**

All applications for permits issued pursuant to this Article shall be in writing, stating the purpose thereof, and shall be signed by an officer of such organization. Such application shall be submitted to the Town Clerk at least fifteen (15) days prior to the date such parade is to be held.

**§ 4-13. Permit restrictions, revocation:**

Any parade held pursuant to a permit issued by the Town Clerk shall only take place upon those highways and parts of highways or public streets as shall be specified by the Town Clerk in the permit. The Town Clerk may revoke such permit upon the recommendation of the Highway Department, Department of Traffic Safety, Department of Public Safety of the Town of Brookhaven, the local Fire Department or the Suffolk County Police Department.

**§ 4-14. Penalties for offenses:**

Any person taking part in or causing to conduct a parade without permit issued therefor pursuant to this Article shall be guilty of a misdemeanor punishable by a fine not to exceed five hundred dollars (\$500.00) or by imprisonment not to exceed ninety (90) days, or by both.

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**ALL ROUTES MUST CONTAIN POINTS OF INGRESS AND EGRESS FOR RESIDENTIAL AREAS.**

**RESIDENTS ALONG THE ROUTE MUST BE NOTIFIED AT LEAST TWO WEEKS PRIOR TO THE EVENT.**

A copy of the Waiver/Liability Release and Hold Harmless must be signed and notarized by the applicant AND by any person, entity or organization coordinating, managing or operating the event.

Please feel free to contact the Town Clerk's Office at 451-9124 if you need any assistance in completing this application.



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1. Date:	2. Exact Name of Organization:	3. By:
4. Name of Organization or Institution Applying for Permit:		
5. Address of Said Organization: Number and Street, Town, State Zip		
6. Is the organization a local religious, fraternal, educational, political, civic, veterans, firefighters, non-profit or charitable organization? <span style="float:right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>		
7. Set forth exact dates and time for said event for which permit is sought: Date(s): _____ Begin time: _____ End time: _____		
8. Set forth name, address & phone numbers of Chairperson or Manager to be in control of the said event for which permit is sought: Name: _____ Home Telephone: _____ Business Telephone: _____ Address: _____		
9. Set forth detailed description of the entertainment features and each of the activities of such event for which permit is sought: Number of bands: _____ Number of marching units: _____ Number of floats: _____ Number of vehicles: _____ Total number of participants (approximate): _____ Other: _____ Comments: _____		
10. Set forth purpose for which permit is sought:		
11. Will the equipment to be used for such event be solely in the ownership and control of the applicant organization? <span style="float:right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>		
12. If the answer to the preceding question is "No", state the name(s) and address(es) of the owner(s) and lessor(s) of such equipment and the arrangements under which such equipment is to be used (hired, leased, loaned):		
13. Is there a school, library, church, hospital, firehouse, etc. that will be affected by the participants? If yes, kindly notify the appropriate authority at the location at least one month prior to the event. <span style="float:right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>		
14. Has your organization held this event in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when:		
15. Set forth detailed description of the street or streets and in what area such event will take place: Street(s): _____ Area: _____ "Form up" will be at (location): _____		



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16. Describe the exact route event will follow from the starting place to the ending place, including streets and highways. All routes must contain points of ingress and egress for residential roads. Complete diagram of the route the event will follow (see below):

Four horizontal lines for describing the route.

17. Does any part of this route enter an incorporated village? If yes, please list the streets that are within the village below.

Two horizontal lines for listing streets within a village.

Please note you will need to obtain authorization from the Village for this portion of the route.

17. Set forth detailed statement of any noise-making devices to be operated or maintained:

One horizontal line for noise-making devices.

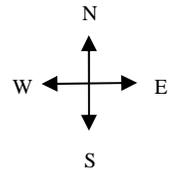
18. Include Certificate of Insurance showing your organization's coverage of not less than one million dollars (\$1,000,000.00). The Town of Brookhaven must be named on certificate.

19. What Fire Department(s) and Ambulance District(s) have jurisdiction over the area your parade will be marching in?

One horizontal line for jurisdiction information.

PARADE ROUTE DIAGRAM

Large empty box for the parade route diagram with a compass rose in the top right corner.





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I make this application under penalty of perjury and swear to the truth herein. Any representations and/or statement in this application that are found to be materially inaccurate may result in denial of permit or revocation of permit.

\_\_\_\_\_  
DATE

By: \_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
NAME OF APPLICANT

\_\_\_\_\_  
TITLE OF APPLICANT

\_\_\_\_\_  
NAME OF ORGANIZATION

Application having been made for the permit as above set forth and subject to the terms and expressed conditions and limitations contained therein, the above application for permit is granted as requested for the operation of the event specified above. It is expressly understood that this permit is issued subject to the provisions herein specified and may be revoked or cancelled without notice.

\_\_\_\_\_  
DATE

By: \_\_\_\_\_  
TOWN CLERK OF THE TOWN OF BROOKHAVEN



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TC-20 rev. 2/20

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**WAIVER/LIABILITY RELEASE AND HOLD HARMLESS**

(Name) \_\_\_\_\_, (address) \_\_\_\_\_, New

York, hereby assumes all liability and all risks in the performance of the (Name of Event)

\_\_\_\_\_ at (Location) \_\_\_\_\_

and undertakes complete responsibility for all acts undertaken by the undersigned in connection

with the event on the Town of Brookhaven premises/property located at

(Location) \_\_\_\_\_ New York, during the period, commencing on or

about (Date) \_\_\_\_\_ through \_\_\_\_\_.

The undersigned, its agents, servants, employees, invitees, volunteers and successors and assigns further agree to save harmless and forever indemnify the Town of Brookhaven, its officers, agents, servants, and employees, enumerated volunteers, from any and all liabilities, damages, claims, expenses, suits, arbitrations, judgments and/or executions plus attorney's fees and the costs of investigation for any bodily injury, personal injury, wrongful death and property damage arising out of or in any way connected to the event herein.

The undersigned, its agents, servants, employees, invitees, volunteers and successors and assigns further agree that it will indemnify and hold harmless the Town of Brookhaven, its officers, employees, agents and non-remunerated volunteers from any claims made by any person for any loss, damage or injury resulting from or arising out of any acts or omissions of the undersigned or any other persons acting on behalf of the undersigned, with regard to or in



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connection with the event. The undersigned's responsibility under this section shall not be limited to the required or available insurance coverage.

Dated: \_\_\_\_\_ Signed: \_\_\_\_\_

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

**Acknowledgement of Corporation**

STATE OF NEW YORK)  
SS.:  
COUNTY OF SUFFOLK)

On the \_\_\_\_\_ day of \_\_\_\_\_ in the year 20\_\_ before me personally came \_\_\_\_\_ to me known, who, being by me duly sworn, did depose and say that he/she/they reside(s) in \_\_\_\_\_ (if the place of residence is in a city, include the street and street number, if any, thereof); that he/she/they is (are) the \_\_\_\_\_ (president or other officer or director or attorney in fact duly appointed) of the (name of corporation), the corporation described in and which executed the above instrument; and that he/she/they signed his/her/their name(s) thereto by authority of the board of directors of said corporation.

\_\_\_\_\_  
Notary Public

**Acknowledgement of Individual**

STATE OF NEW YORK)  
SS.:  
COUNTY OF SUFFOLK)

On the \_\_\_\_\_ day of \_\_\_\_\_ in the year 20\_\_ before me, the undersigned, a Notary Public in and for said State, personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, and that by his/her signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

\_\_\_\_\_  
Notary Public