



CITY OF BUFFALO
65 Niagara Sq. 226 City Hall Buffalo, NY 14202

SPECIAL EVENT
2019 Application

Byron W. Brown
Mayor

Contact Information	
Coordinators	Kerron Johnson & Danielle Rizzo
Location	Room 612
Phone	(716) 851-4004
Fax	(716) 851-4080
Email:	kjohnson@city-buffalo.com drizzo@city-buffalo.com

Name of Event North Buffalo Farmers Market Today's Date 5/10/19
 Nature of Activity Community Farmers Market Year event began 2014
 Sponsoring Organization North Buffalo Organization Inc.
 Organization Address 2 Wallace Avenue Buffalo NY 14214
 Date(s) of Event June, July, August, Sept October SEE NEXT PAGE!!
 Opening date _____ from _____ to _____ Day of week _____
 Closing date _____ from _____ to _____ Day of week _____
 Set-up date _____ from _____ to _____ Day of week _____
 Breakdown _____ from _____ to _____ Day of week _____

Contacts
 1. Executive Director Joann Steinmetz phone (716) 430-8351
 2. Financial Contact same phone same
 3. Event Chairperson same phone _____
 Email (required) joann@northbuffalo.org
 Phone # during event (716) 430-5351

Location of Event A detailed site-map describing name & address of facility, property, streets or areas that are part of event venue must be attached to application.
 Name of Facility/Property North Park Community School
 Address 780 Parkside Ave Buffalo NY 14216
Street City Zip

Handicapped Accessibility yes no

Last Year's Event
 Actual attendance #10,000 Average daily attendance # 500 Approx. peak attendance # 700
 Total expenses \$10,000 Total revenues \$11,000

This Year's Event
 Estimate attendance #12,000 Estimate daily attendance # 500 Estimate. peak attendance # 700
 Estimate expenses \$10,000 Estimate revenues \$11,000
 Volunteers/workers # 7 Entry fee for event yes no

Insurance
 All events must obtain liability insurance policy in the amount of one million dollars (\$1,000,000.00), or a larger amount in the discretion of the City, with the City of Buffalo named as an additional insured.
 1. Insurance Provider of Insured Philadelphia
 2. Insurance Agency Houck Seaman Phone #: 835-2525
 3. Amt of Insurance Coverage \$1,000,000 Alcohol Insurance Coverage \$ _____

Application Processing Fee: \$200 payable to the 'City of Buffalo', plus additional labor fees if applicable.

INFORMATION ABOUT THE PROPERTY FOR THE SPECIAL EVENT.

1. Property owner Buffalo Public Schools, City of Buffalo
2. Event on public property yes no
3. Event on private property yes no
4. Event will be held indoors yes no Certificate of Inspection (COI) license # _____
 If indoors, give full address of building _____

YOUR EVENT MAY REQUIRE LICENSES, PERMITS, OR OTHER SUPPORT SERVICES.

If YES, submit required permit application and/or fees.			
1	Fireworks	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Need permit: Bureau of Fire Prevention Room 321
2	Tent permit	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Need permit: Bureau of Fire Prevention Room 321
3	Alcohol served/sold	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Need Erie Co Dept of Health Permit if alcohol is served or sold. Need SLA approved license. Alcohol insurance also required.
4	Temporary food stands selling food - # of vendors # _____ distribution only - # of vendors # _____	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	All food vendors need Erie Co Dept of Health Permit. Includes mobile units, food trucks, push carts. If selling food, need Temporary Stand license. Room 301
5	Non-food items for sale	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	Exhibitor Stand if merchandise for sale. Room 301
6	Legalized gambling	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Need permit. Charitable gaming. Room 301
7	Amusement rides	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Need permit: Office of Licenses Room 301
8	Garbage totes	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Need permit: Dept of Public Works Room 113
9	Recycling totes	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Need permit: Dept of Public Works Room 113
10	Dumpsters	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Event producer must rent from service provider.
11	Portable lavatories handicap accessible <input type="checkbox"/> yes <input type="checkbox"/> no number provided # _____	<input checked="" type="checkbox"/> no <input type="checkbox"/> no	Name of service provider: _____ Attach map of lavatory locations.
12	Barricades	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Event producer must rent from service provider. If renting from City of Buffalo. Organizer is responsible for pick up and delivery.
13	Snow fencing	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Event producer must rent from service provider.
14	Park Permit Playing field <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Band wagon (mobile stage) <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Need permit. City of Buffalo Parks Dept Room 505 Contact Arlene 851-9670/amustafa@city-buffalo.com
15	Security Private <input type="checkbox"/> yes <input type="checkbox"/> no Volunteers <input type="checkbox"/> yes <input type="checkbox"/> no City <input type="checkbox"/> yes <input type="checkbox"/> no Other <input type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> no <input type="checkbox"/> no <input type="checkbox"/> no <input type="checkbox"/> no <input type="checkbox"/> no <input type="checkbox"/> no <input type="checkbox"/> no <input type="checkbox"/> no	For any YES: Notify Police district(s) near event. Attach correspondence. Attach copy of event security arrangements including vendor contact information. Within contract include a detailed security plan reflecting number of personnel, hours and locations. Organizer is responsible for BPD manpower hours if required.-See Fee Schedule
16	Parking Provisions 'No Standing Signs' <input type="checkbox"/> yes <input type="checkbox"/> no Parking enforcement/Towing <input type="checkbox"/> yes <input type="checkbox"/> no Valet services provided <input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no	Need permit for 'no standing signs'. Parking arrangements: Use attachment to describe use of ramps/lots for other designated parking.

17	Street Closing	yes	<input checked="" type="checkbox"/> no	See application for Police Department approval. Attach detailed map of proposed closings. Requires a minimum of 30 days to process.
18	Traffic Control	yes	<input checked="" type="checkbox"/> no	See Motorcade/Parade Application. Attach map of proposed race route. -- Manpower hours are \$65.00 hour at a minimum of 4 hours-See fee schedule Waterfront routes subject to pre-approval (Erie St, Erie Basin Marina, Marine Dr, Lakefront Blvd) Usage - contact special events @ 851-6508. Written Notification to area business and residences required after route approval 60-90 days before event execution.
	Road race/run/walk	yes	<input type="checkbox"/> no	
	Parade or march	yes	<input type="checkbox"/> no	
	Motorcade	yes	<input type="checkbox"/> no	
19	NFTA notice	yes	<input checked="" type="checkbox"/> no	Attach copy of correspondence to NFTA
20	Banner Signage (over street)	yes	<input checked="" type="checkbox"/> no	Need permit (includes hanging banners overhead). Prior to installation, anything attached to a lamppost needs approval by the City of Buffalo Street Lighting Dept. Call 851-5362.
	Flags installed on lampposts	yes	<input checked="" type="checkbox"/> no	
21	City Furnished Utilities	yes	<input checked="" type="checkbox"/> no	Contact Dept of Public Works Room 502
	electric	yes	<input type="checkbox"/> no	
	water/hydrants	yes	<input type="checkbox"/> no	
	lighting in parks	yes	<input type="checkbox"/> no	
	other (specify)	yes	<input type="checkbox"/> no	
22	Emergency Services Plan – list provider:			Events over 1500 attendance require a contract with licensed emergency services provider. Also, alert fire department (716.851.5333x 319) for recommendation of emergency protocols. Attach a copy of event emergency arrangements. Include vendor contact information & copy of contract outlining detailed transport plan reflecting number of personnel, hours and locations.
	EMT's licensed by City/Buffalo	yes	<input checked="" type="checkbox"/> no	
	Vehicles licensed by City/Buffalo	yes	<input checked="" type="checkbox"/> no	
23	NYS Health Dept Public Gathering Permit Part 18	yes	<input checked="" type="checkbox"/> no	Provide application & permit when received. For gatherings of 5,000+ persons at any one time.
24	Other ex. skydiving, balloon rides, etc.	yes	<input checked="" type="checkbox"/> no	Specify need

Fire Department Data

List names and addresses of event committee members.

List names, addresses and contacts of all corporate and other sponsors.

1. Closed streets and location of barricades. Provide map. (City of Buffalo does not provide barricades)
Streets closed between N/A

2. Hydrants They may not be blocked by any vehicle or concession.

Location: N/A

Location: N/A

3. Concessions using cooking facilities. Fuel containers must be approved of type.

Location N/A

type of fuel

4. Request for Fire Apparatus: In case of emergency, fire apparatus may respond within the barricade area.

Apparatus N/A

location _____

time _____

Tent date(s): N/A

location(s): _____

Posted



CITY OF BUFFALO 2019 SPECIAL EVENTS WEBSITE CALENDAR

Byron W. Brown
Mayor

Contact Information	
Coordinators	Kerron Johnson & Danielle Rizzo
Location	Room 612
Phone	(716) 851-6508
Fax	(716) 851-4080
Email:	kjohnson@city-buffalo.com drizzo@city-buffalo.com

Please complete and return this form along with your application. Completion of this form will publicize your event that has been submitted to the Special Events Advisory Committee and assist others to avoid your date and/or site. Your event will be posted after approved by the S.E.A.C.

E-mail, mail or fax to:
 Office of Special Events
 65 Niagara Square Room 612
 Buffalo, NY 14202
 Fax: 716-851-4080
 kjohnson@city-buffalo.com
 drizzo@city-buffalo.com

- Name of Event: North Buffalo Farmers Market
- Purpose of Event: Community Farmers Market
- Sponsoring Organization: North Buffalo Organization Inc.
- Location of Event: 780 Parkside Ave Buffalo, NY 14216
- Participants expected #: 500/day
- Date(s) of Event: _____
 Date _____ start time _____ close time _____
 Date _____ start time _____ close time _____
 Date _____ start time _____ close time _____
 Date _____ start time _____ close time _____

- Contact Person: Joann Steinmetz
- Phone: (716) 430-8351
- Fax: _____
- Email: joann@northbuffalo.org

Comments: _____

I understand and agree completion of this application gives permission to the City of Buffalo to publicize the above event information on the City of Buffalo website.

Applicant Signature Joann L. Steinmetz Date 5/10/19

**City of Buffalo
SPECIAL EVENT
2019 Application Submitted May 10, 2019**

ADDENDUM FOR NORTH BUFFALO FARMERS MARKET EVENT DATES

June, July, August – Every Thursday – 4:00 – 7:00 PM EXCEPT JULY 4TH
Starts June 20th and ends August 29th

September & October – Every Saturday – 9:00 AM – Noon
Starts September 7th and ends October 26th

Set-up and breakdown are on the same days as the events, 30 minutes prior and 30 minutes after.

Contact:

Joann Steinmetz
joann@northbuffalo.org
(716) 430-8351