



**TOWN OF EAST LONGMEADOW**

60 Center Square  
East Longmeadow, MA 01028  
413-525-5400 [www.eastlongmeadowma.gov](http://www.eastlongmeadowma.gov)

**Fee \$50.00**

**ONE DAY ENTERTAINMENT APPLICATION**

*You may apply for a One Day Entertainment License from the Town Clerk's Office at least 30 days prior to the event.*

Applicant Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Applicant E-Mail Address: \_\_\_\_\_

Address: \_\_\_\_\_

Organization: \_\_\_\_\_

Organization Address: \_\_\_\_\_

Type of Event/Purpose: \_\_\_\_\_

Event Address: \_\_\_\_\_

Is event a fundraiser? Yes  No  *If yes, proceeds are for:* \_\_\_\_\_

Will the event be held under a tent greater than 400 square feet (permit required, see below)?  Yes  No

Event Date: \_\_\_\_\_ Approximate # of Persons: \_\_\_\_\_ Hours to/from: \_\_\_\_\_

**DESCRIPTION OF ENTERTAINMENT**

**In the space below, please describe in detail the type of entertainment planned for your event. The Town Council reserves the right to limit types of entertainment which they may deem to be unsafe or have a negative impact on the surrounding community.**

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~Cost is **\$50.00**, due with application. Make check payable to: *Town of East Longmeadow*~

**It is required that you include a copy of your Certificate of Insurance Liability with this application.**

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Date*

**Information regarding other requirements**

- **FOOD:** If you will be serving food, and don't already have a food service permit, you must contact the Health Department to apply for a permit.
- **PROPANE:** If you are using propane at your function, you must contact the Fire Department to apply for a permit.
- **TENT:** If you are erecting a tent greater than 400 square feet on the premises for your event, you must contact the Building Department (413-525-5400 ext. 1150) to apply for a permit far enough in advance to allow the permit to be issued and a field inspection completed.

# TOWN DEPARTMENT APPROVALS

*For Office Use Only*

## For Police Department Official Use Only

Approval Recommended  
 Approval Not Recommended  
Police Officer Required:  Yes  No  Other  
Comments/Conditions: \_\_\_\_\_  
\_\_\_\_\_

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

Police Chief Signature:  
\_\_\_\_\_

## For Fire Department Official Use Only

Approval Recommended  
 Approval Not Recommended  
Comments/Conditions: \_\_\_\_\_  
\_\_\_\_\_

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

Fire Chief Signature:  
\_\_\_\_\_

## For Building Department Official Use Only

Approval Recommended  
 Approval Not Recommended  
Comments/Conditions: \_\_\_\_\_  
\_\_\_\_\_

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

Building Commissioner Signature:  
\_\_\_\_\_

## For Health Department Official Use Only

Approval Recommended  
 Approval Not Recommended  
Comments/Conditions: \_\_\_\_\_  
\_\_\_\_\_

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

Health Director Signature:  
\_\_\_\_\_

## TOWN COUNCIL OFFICIAL USE ONLY

- Approved  
 Denied  
 Approved with Restrictions\*

\*Restrictions: \_\_\_\_\_  
\_\_\_\_\_

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

Town Council President Signature:  
\_\_\_\_\_