

# TOWN OF LANCASTER

## APPLICATION FOR USE OF TOWN GREEN/GAZEBO

(Submit to: Executive Assistant, Town of Lancaster, 701 Main Street, Suite 1, Lancaster, MA 01523)

\_\_\_\_\_  
Date

To the Licensing Authorities:

The undersigned hereby applies for a License/Permit in accordance with the provisions of the Statutes of the Commonwealth of Massachusetts and/or Bylaws of the Town of Lancaster relating thereto:

Date of Activity: \_\_\_\_\_  
Time: \_\_\_\_\_ Start: \_\_\_\_\_ End: \_\_\_\_\_  
Name & Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Emergency Contact & Phone: \_\_\_\_\_  
Business Name (If applicable): \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Number of People Attending: \_\_\_\_\_  
Provisions for Parking: \_\_\_\_\_  
Partial or full road closure? \_\_\_\_\_  
Structures? \_\_\_\_\_  
Tents with sides? \_\_\_\_\_  
Cooking? \_\_\_\_\_  
Food/Refreshments? \_\_\_\_\_  
Porta Potty? \_\_\_\_\_  
Portable Sink Unit? \_\_\_\_\_  
Email address: \_\_\_\_\_  
Clearly explain the purpose for requesting the use of the Town Green/Gazebo:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**A Refundable Deposit of \$100 is required of anyone requesting the use of the Gazebo/Town Common.**

### Wedding Fees

<b>Residents:</b>	No Charge for Weddings, Rehearsals or Photographs
<b>Non-Residents:</b>	Weddings - \$50
	Rehearsals - \$25
	Photographs - \$25

I certify under the penalties of perjury that, to the best of my knowledge and belief, I am in compliance with all laws of the Commonwealth and the Town of Lancaster relating to the filing and payment of taxes.

\_\_\_\_\_  
Signature of Individual or Corporate Officer

\_\_\_\_\_  
Company Name or Individual Name

\_\_\_\_\_  
Social Security Number or Federal  
Identification Number\*

\* Your Identifying Number will be furnished to the Massachusetts Department of Revenue to determine whether or not you have any tax filing or tax payment obligations. Providers who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of Chapter 62C, Section 49A, of the Massachusetts General Laws and the Bylaws of the Town of Lancaster.

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~~Office Use Only~~

<b>Department</b>	<b>Approval Signature</b>	<b>Date</b>
Board of Health		
Fire Department		
Police Department		
Building Department		
Board of Selectmen		

Certificate of Insurance Received:

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

Deposit Received:

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

Additional Fees Received:

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