



# Borough of Lewistown

PENNSYLVANIA

2 EAST THIRD STREET – LEWISTOWN, PA 17044-1799 – 717- 248-1361  
www.lewistownborough.com

## Facility Use Request: **Mall/Plaza Areas**

This application must be submitted 30 days prior to the date requested and include a copy of your certificate of insurance.

**Name of event organizer:** \_\_\_\_\_

**Organization (If applicable):** \_\_\_\_\_

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

**Email Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Alternate:** \_\_\_\_\_

**Event Date(s):** \_\_\_\_\_

**Time(Start):** \_\_\_\_\_ **Time (End):** \_\_\_\_\_

### Fees

- Application Fee more than 30 days prior to the event \$40.00
- Application Fee less than 30 days prior to the event \$70.00
- One day event: \$25.00
- One Week Event (2-7 consecutive days): \$100.00
- Monthly Event (1-3 months): \$150.00 per month
- Seasonal Rental: \$300.00
- Parade/Street and Alley Closure Fee \$50.00
- Borough created event map with detour route \$50.00

### Special Services Requested

- Picnic Tables: \$5.00 per table x \_\_\_\_\_ = \$ \_\_\_\_\_
- Trash/Recycling Cans: \$10.00 per can x \_\_\_\_\_ = \$ \_\_\_\_\_
- Barricades: \$20.00 per lot x \_\_\_\_\_ = \$ \_\_\_\_\_
- Parking Control Signs: \$20.00
- Police Presence: \$50.00 per hour per officer requested.

**Number of Officers:** \_\_\_\_\_ x \$50.00= \$ \_\_\_\_\_ x \_\_\_\_\_ hours requested= \$ \_\_\_\_\_

**Total Fees: \$ \_\_\_\_\_ Total Special Services: \$ \_\_\_\_\_ Total Event Fee: \$ \_\_\_\_\_**

**Amount Collected: \$ \_\_\_\_\_ Date Collected: \_\_\_\_\_ Fees Collected by: \_\_\_\_\_**



# Borough of Lewistown

PENNSYLVANIA

2 EAST THIRD STREET – LEWISTOWN, PA 17044-1799 – 717- 248-1361  
www.lewistownborough.com

## **Request/Descriptions of Event**

### **Street/Alley Closure**

*If the street requested is a PennDOT street, a second certificate of insurance listing PennDOT, Engineering District 2-0 as an additional insured will be required.)*

*Please Specify what alley or street is to be closed and where:*

**\*\*\*A map or drawing of the area where the closure is requested/required. \*\*\***

**Describe the activity or function for which the Borough facility is proposed to be used. Please furnish a specific description in sufficient detail to describe with particularity the activity or function involved.**

**Describe any other matters which may require the attention of the Borough or the permission of the Borough.**

**This is a public parking lot. No cars will be asked to move, and no cars will be towed. If cars wish to leave the lot during your event every effort has to be made to allow them to vacate the lot.**



# Borough of Lewistown

PENNSYLVANIA

2 EAST THIRD STREET – LEWISTOWN, PA 17044-1799 – 717- 248-1361

www.lewistownborough.com

## **Exculpation and Indemnification**

*The Applicant hereby expressly agrees that if the Borough of Lewistown issues a Permit authorizing the Applicant to use the Borough facility described for the activity or function described, the Applicant shall be responsible for, shall relieve the Borough of Lewistown from, and shall hold harmless, defend and indemnify the Borough of Lewistown against, all demands, claims, actions, suits, judgment, or the like made or brought or entered against the Borough of Lewistown – and all losses, damages, costs, and expenses (including, but not limited to, attorneys’ fees and court costs) suffered or incurred by the Borough of Lewistown – which in any way arise out of or result from; (a) the Applicant’s use of the facility described, (b) the activity or function described, (c) any act, omission, or neglect of the Applicant or the Applicant’s members, employees, agents, servants, workmen, licensees, invitees, customers, vendors or guests, (d) any act, omission or neglect of any person who participated in the activity or function or, any member of the public who was attracted to the activity or function or who used the facility in connection with the activity or function, (e) any violation or breach by the Applicant of any provision, term or condition of the Permit or any failure by the Permit, or (f) any condition existing in or on the facility except, however, a condition caused by a negligent act of the Borough of Lewistown and one for which it is liable under the Pennsylvania Political Subdivision Tort Claims Act [42 Pa.C.S. §8541 et. seq.]. As used in this Paragraph, the term “Borough of Lewistown” includes any officer, official, employee, agent, servant, or workman of the Borough of Lewistown.*

## **Insurance**

*Applicant must carry comprehensive general liability insurance in connection with the activity or function as will protect the Applicant from claims for damages for bodily injury coverage and property damage. Lewistown Borough is included as Additional Insured under the General Liability policy as required by written contract.*

*If there will be vendors involved in the activity or function at any time, they must be covered under Applicant’s insurance or provide proof that they have coverage. Note, it is the responsibility of all sponsors of an activity or function at which vendors are anticipated to be present to assure that vendors possess sufficient general liability insurance. Lewistown Borough is included as Additional Insured under the General Liability policy as required by written contract.*

*Any hazardous activities involved in the proposed activity of function, such as fireworks show, or any other hazardous activity will require proof of additional insurance. Lewistown Borough is included as Additional Insured under the General Liability policy as required by written contract.*

---

Under the criminal penalties of 18 Pa.C.S.A §4904 of the Pennsylvania Crimes Code for making a false statement to a public official or public body, I hereby verify to the Borough of Lewistown that:

- I am the individual named as the Applicant.
- I am an officer, official, employee, or member of the group or organization named as the Applicant; I am authorized by that group or Organization to act on its behalf in making and signing this Application; Indemnification Clause.

And the facts set forth in this Application are true and complete to the best of my knowledge. I understand (and the group or organization on whose behalf I am acting understands) that the Borough is under no obligation to approve this Application or issue a permit.

---

Signature

---

Print

---

Date