



## SPECIAL EVENTS APPLICATION WARWICK TOWNSHIP

315 Clay Road  
Lititz, PA 17543  
Office: 717-626-8900

Please print and Fill out application **completely**- failure to do so may delay permit for event.

**This application must be submitted at least sixty (60) days prior to the event. Requests submitted less than 60 days run the risk of being denied.**

SPONSORING ORGANIZATION: \_\_\_\_\_

CHIEF OFFICER OF ORGANIZATION: \_\_\_\_\_

APPLICANT/CONTACT(Name)\_\_\_\_\_ E-mail\_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE(H): \_\_\_\_\_ PHONE(W): \_\_\_\_\_ PHONE(Cell): \_\_\_\_\_

Please identify the contact person "on-site" the day of event. (Note: This person must be in attendance for the duration of the event and immediately available to Township staff or Police/NLCRPD).

NAME: \_\_\_\_\_ PHONE(Cell): \_\_\_\_\_

TYPE OF EVENT: Run/Walk    Bike Race    Sporting Event/Tournament    Fair/Festival

Fundraiser    Other (Specify)

\_\_\_\_\_

EVENT TITLE: \_\_\_\_\_

EVENT DESCRIPTION: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DATE REQUEST: \_\_\_\_\_ ALTERNATE DATE: \_\_\_\_\_

**SITE PLAN AND ROUTE MAP**

**Event Set-up:** Date: \_\_\_\_\_ Day of Week: \_\_\_\_\_ Time: \_\_\_\_\_

Street Closing for set-up, Stages, Tents, etc. Date: \_\_\_\_\_ Time: \_\_\_\_\_

Street(s) to be Closed: \_\_\_\_\_

\_\_\_\_\_ (Submit a Site Map with the application)

**Event Opens:** Date: \_\_\_\_\_ Day of Week \_\_\_\_\_ Time: \_\_\_\_\_

Street Closing for Race, Parade, etc.: Date: \_\_\_\_\_ Time: \_\_\_\_\_

Street(s) to be Closed: \_\_\_\_\_

\_\_\_\_\_ (Submit Route Map with the application)

Race, Parade or escort Start Time: \_\_\_\_\_

Daily Festival or Street Party Times: \_\_\_\_\_

Road Race Service Co. And Phone: \_\_\_\_\_

**Event Closes:** Date: \_\_\_\_\_ Day of Week: \_\_\_\_\_ Time: \_\_\_\_\_

Street Opening: Date: \_\_\_\_\_ Day of Week: \_\_\_\_\_ Time: \_\_\_\_\_

**Event Dismantle:** Date: \_\_\_\_\_ Day of Week: \_\_\_\_\_ Time: \_\_\_\_\_

Street Opening: Date: \_\_\_\_\_ Day of Week: \_\_\_\_\_ Time: \_\_\_\_\_

Traffic Control by(Co. used and contact) \_\_\_\_\_

**INSURANCE:**

\* Before final permit approval will be granted, the applicant must provide an original and current certificate of general liability insurance, including bodily injury and property damage in the amount of \$1,000,000 per occurrence and aggregate of \$2,000,000.

\* The certificate must name "**Warwick Township**" as an "**additional insured**".

\* Coverage must be maintained for the duration of the event. *The Township of Warwick reserves the right to request a copy of the entire Insurance policy.*

Name of Insurance Carrier: \_\_\_\_\_

Agent's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

## INDEMNIFICATION AGREEMENT

THIS AGREEMENT made this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by and between the TOWNSHIP OF WARWICK, a political subdivision with its municipal offices located at 315 Clay Road, Lititz, PA 17543 (the "Township"), and \_\_\_\_\_ a non-profit organization with its offices located at \_\_\_\_\_ (the "Organization").

WITNESSETH:

WHEREAS, the Organization plans to hold the \_\_\_\_\_ in Warwick Township (the "Event"); and

WHEREAS, the Event will be conducted on \_\_\_\_\_; and

WHEREAS, the Organization desires to close certain roadways and/or occupy certain public rights-of-way during of the Event; and

WHEREAS, the Township is willing to authorize the closure of the referenced roadways and/or occupy certain public rights-of-way on the date of the event, the Organization agrees to bear certain costs, if applicable, indemnify the Township for any damages which might arise and/or claims on costs the Township might In and provide a Detour Plan for review and approval by the Township prior to the date of the event.

NOW, THEREFORE, with the following background incorporated herein by reference and intending to be legally bound the parties agree as follows:

1. The Organization agrees to defend, Indemnify and hold harmless the Township and its officers, agents and employees from and against all claims, damages, liability, losses and expenses, including attorneys' fees and cost of Investigation and defense, arising out of or resulting from the closure of the referenced roadways and/or occupy certain public rightsof-way in the Township to enable conduct of the Event. The Organization assumes all risks and shall bear all losses resulting from any Injury to property or persons occasioned by neglect or accident relating in any manner to the closure of the referenced roadways and/or occupy certain public rights-of-way, the and if necessary, detouring of traffic as a result of the this closure / occupation for the conduct of the Event.
2. The Organization shall obtain and maintain at all times during the event, comprehensive general liability insurance and shall present evidence of such insurance coverage to the Township. The Township shall be named as an additional insured on such policy.
3. The following procedures are applicable for all road closures:
  - a. The Organization agrees to prepare and submit a Detour Plan for review and approval by the Township Road Superintendent. Such plan shall be submitted with sufficient detail, note areas that will be used for the stacking of vehicles accessing and leaving the Event Site, and be submitted at least 15 days prior to the scheduled date of the Event. The Organization shall at all times comply with and adhere to the approved Detour Plan.
  - b. The closure shall be manned by trained or certified traffic control personnel meeting the requirements of Title 67 at all affected intersections, areas where participants will be crossing the flow of vehicular traffic, and areas where participants will be occupying a travel lane intended for vehicular traffic.

- c. The Organization shall bear all costs, if applicable, of police protection and the erection of barriers as a condition of the closing of the reference roadways.
- d. The Organization acknowledges that the Township has no jurisdiction or authority over the use and/or closure, either partial or full, of roads under the jurisdiction of the Commonwealth of Pennsylvania.

The undersigned person executing this Agreement on behalf of The Organization represents and warrants that he or she is authorized to execute this Agreement.

This Agreement shall be binding upon the parties, their successors and assigns.

IN WITNESS WHEREOF, the undersigned having caused this Agreement to be executed the day and year first written above.

WARWICK TOWNSHIP  
Lancaster County, Pennsylvania

Attest: \_\_\_\_\_  
(Assistant) Secretary

By: \_\_\_\_\_  
(Vice) Chairman  
Board of Supervisors

[TOWNSHIP SEAL]

Attest: \_\_\_\_\_

\_\_\_\_\_  
(Name of Organization)

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

By: \_\_\_\_\_  
Title