



SAMPLE ONLY

NO. \_\_\_\_\_

# SPECIAL EVENT PERMIT

**MIDDLESEX COUNTY DEPARTMENT OF PARKS & RECREATION**  
**P.O. BOX 661 NEW BRUNSWICK, NJ 08903**  
Phone (732) 745-3900 - Administration  
Phone (732) 745-3800 - Park Ranger  
FAX (732) 745-7351

**STEPHEN "PETE" DALINA**  
FREEHOLDER  
CHAIRMAN OF PARKS  
  
**RALPH G. ALBANIR**  
DIRECTOR

PARK \_\_\_\_\_ DATE \_\_\_\_\_ TIME \_\_\_\_\_

ACTIVITY \_\_\_\_\_ LOCATION \_\_\_\_\_

NO. OF PEOPLE \_\_\_\_\_ ORGANIZATION \_\_\_\_\_

PERSON IN CHARGE \_\_\_\_\_

ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

CERTIFICATE OF INSURANCE REQUIRED:  YES  NO

If yes, see below for written instructions. Certificate must be submitted four weeks prior to event(s); permit will not be issued without it.

PERMIT AUTHORIZED BY \_\_\_\_\_ DATE \_\_\_\_\_

**NO REFUNDS. PERMIT MUST BE PRESENTED TO PARK RANGER OR MUNICIPAL POLICE ON REQUEST  
PLEASE OBSERVE ALL RULES AND REGULATIONS ISSUED WITH THIS PERMIT.  
ANY VIOLATION OF DEPARTMENT RULES AND REGULATIONS MAY RESULT IN CANCELLATION/TERMINATION OF EVENT.**

## HOLD HARMLESS AGREEMENT

In consideration of the granting of permission by the Middlesex County Parks and Recreation Department to the applicant for the use of the facilities set forth above, the applicant hereby shall defend, indemnify and save harmless the County of Middlesex against all claims arising from the conduct of activities for which this application is made.

\_\_\_\_\_  
Name or organization

Date:

\_\_\_\_\_  
Signature

## CERTIFICATE OF INSURANCE

The County of Middlesex carries insurance covering its legal liability. The County of Middlesex assumes no liability with respect to bodily injury, property damage, illness or any other damages or losses, or with respect to any claims arising out of any activity of the permit holder.

The County of Middlesex requires the applicant to procure and continue in force for the term identified on the permit comprehensive general liability insurance with limits of \$1,000,000 combined single limit. The policy must include contractual liability coverage and name the County of Middlesex as an additional insured.

The applicant shall provide the County of Middlesex with a certificate of Insurance. The Certificate of Insurance must state that the County of Middlesex is named as an additional insured and that the policy has been endorsed to include contractual liability coverage. The Certificate of Insurance shall contain a 30 day notice of cancellation. The Certificate Holder shall be identified as the Middlesex County Board of Chosen Freeholders. c/o Dept. of Parks and Recreation, P.O. Box 661, New Brunswick, NJ 08903.

## COMMENTS/REMARKS

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