



CITY OF GARY
DEPARTMENT OF PUBLIC PARKS * 839 BROADWAY * GARY, IN 46402
(219) 886-7099 (OFFICE) * (219)881-0008 (FAX)

SPECIAL EVENT BEACH PERMIT APPLICATION

Revised 3/13

TODAY'S DATE _____ **Beach Permit No:** _____
EVENT NAME _____ DATE(S) OF EVENT _____
EVENT HOURS _____ EVENT LOCATION _____
ORGANIZATION _____ ANTICIPATED ATTENDANCE _____
RESPONSIBLE INDIVIDUAL _____
ADDRESS _____ CITY/ZIP _____
PHONE _____ E-MAIL _____
DESCRIBE EVENT ACTIVITIES: _____

Please attach to this application a sketch and detailed description of the Event Layout.

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Reserved Parking YES NO **How many?** _____
Parking Requirements (Show on Event Layout):
Number of parking spaces needed: _____ Number of Handicapped Spaces: _____
Participants Parking Location _____

**Reserved parking on the beach lots, or for use of the beach lots, must be prepaid. Please contact Linda (219)886-2814 to prepay for the projected number of reserved parking spaces.*

**A Special Event Permit Fee of \$150 must be paid for processing of the Special Event Permit
Make all checks payable to **GARY PARKS DEPT.** Submit payments to the City of Gary, Department of Public Parks.*

RESERVED PARKING FEES

MARQUETTE/OAK STREET PARKING: RESIDENTS - \$3.00 NON-RESIDENTS - \$5.00
LAKE STREET LAUNCH BEACH PARKING: RESIDENTS - \$7.00 NON-RESIDENT - \$10.00

SPECIAL EVENT PERMIT FEE: \$150.00

LIVE MUSIC/AMPLIFICATION/GENERATOR? (Y/N) Describe:

I HEREBY CERTIFY THAT I/ _____ (NAME AND ORGANIZATION) THAT THE ABOVE INFORMATION IS COMPLETE AND I/WE WILL BE RESPONSIBLE FOR ANY DAMAGE OR UNNECESSARY ABUSE OF THE FACILITY, BUILDING, OR EQUIPMENT. I/WE AGREE TO HOLD THE CITY OF GARY HARMLESS AND FREE FROM LIABILITY OF ANY NATURE ARISING FROM THE USE OF CITY FACILITIES INCLUDING REIMBURSEMENT OF ANY LEGAL FEES INCURRED IN THE DEFENSE OF SUCH CLAIMS.

(PRINT NAME)

(SIGNATURE)

***NOTE: Incomplete applications will not be accepted. All the above information must be submitted. Failure to do so will result in the application being deemed incomplete and it shall be returned to you for completion. This will result in failure to meet the minimum 30-day requirement for processing of Special Event Permits.**

For Office Use Only

Date Filed: _____ Park Department Action: Approval _____ Denial _____ Other _____

Superintendent's Signature _____ Date _____ Notice Date _____