

**TOWN OF BUCKLAND  
SIDEWALK USE PERMIT**

*This permit is to be filled out in conjunction with the Town's written policy – see separate document.*

Date of Event: Ongoing Name of Event: Musical Performance

Name of applicant or organization: Michael Kolodny

Profit ☒ Non-Profit ☐ [ ] check here if non-profit requesting fee waiver

Description of activity and purpose of request: (including date, time, location, etc.)

I am an expert jazz saxophonist with  
over 40 years busking experience in many  
cities and nations.

Please check off or write N/A, for not applicable:

I am professor of saxophone @

N/A If I am selling food, I have a temporary food permit from the Board of Health. William

N/A If I am setting up for an event, I have contacted the sponsoring organization to register, etc.. College

N/A I am an organizer of an event and am applying for a blanket permit. I will coordinate all the requirements for vendors at my event [see written policy (c)].

☒ I am leaving at least 36" of sidewalk around my table/cart/etc., to allow access.

N/A I have written permission from the owner of the premises in front of which I wish to set up (submit a copy with this application).

N/A If I plan to be in the road, I have permission from the police, or have notified the police.

N/A I will sweep the area I have used when I am done.

N/A I have attached a copy of my State Vendors License (if applicable).

☒ I am requesting use of amplification (describe): small boom box w/  
accompaniment [low volume - not an 'amp']

Michael Kolodny

Print Name

413-213-0522

Telephone Number

Signature

5 Frazier Lane  
Cambridge MA  
01026

Address

**Bill Police Services To:**

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

info@jazzinsight.com

I will be at the black iron  
bench across the bridge from the  
Bridge of Flowers entrance.  
I plan to play weekends / summer  
early fall.

**Vendor License Information (if applicable):**

Name on license: \_\_\_\_\_

Vendor license number: \_\_\_\_\_

Date(s) license is valid: \_\_\_\_\_

I am exempt from this requirement under M.G. L. because: \_\_\_\_\_

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

***This permit must be completed in full and returned with a non-refundable \$5.00 application fee to the Town of Buckland, no later than 30 days prior to date requested for the activity.***

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(Town Use Only)

Date this application is received by Town \_\_\_\_\_

Fee Paid: Check # \_\_\_\_\_ /Cash \_\_\_\_\_ Rcd by: \_\_\_\_\_

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**Police Department:**                      Approved \_\_\_\_\_                      Disapproved \_\_\_\_\_

**Recommendation of Police Department: Traffic &/or crowd control assessment:**

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

Estimated cost to the Town: \_\_\_\_\_

\_\_\_\_\_  
Chief of Police

\_\_\_\_\_  
Date

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**Board of Selectmen:**    Approved \_\_\_\_\_                      Disapproved \_\_\_\_\_

\_\_\_\_\_  
Chair, Board of Selectmen

\_\_\_\_\_  
Date