TOWN OF BUCKLAND
SIDEWALK USE PERMIT

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

RECEIVED
AUG 1 1 2021
BY: KB

Date of Event: 9 + 10 Oct 21   Name of Event:
Crafts of Colrain Popup Shops

Name of applicant or organization:
Wood and Barrel Co.

Profit ✓   Non-Profit _____ [ ] check here if non-profit requesting fee waiver

Description of activity and purpose of request: (including date, time, location, etc.)
Craft Show for local Crafters, 9 + 10 Oct
Starting around 9 till 4PM
At 50 State St

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

_____ If I am selling food, I have a temporary food permit from the Board of Health.

___✓___ If I am setting up for an event, I have contacted the sponsoring organization to register, etc..

___✓___ 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.

___✓___ 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).

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

___✓___ I will sweep the area I have used when I am done.

_____ I have attached a copy of my State Vendors License (if applicable).

_____ I am requesting use of amplification (describe):

_____

_____

_____

_____

Kevin French (Print Name)

Print Name

Signature

Signature

PO# Foundry Village Rd
Colrain MA 01340

Address

413 624 3294

Telephone Number

<table>
<tr><td><i>Bill Police Services To:</i></td></tr>
<tr><td>_____
_____
_____</td></tr>
</table>

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.

(Town Use Only)

Date this application is received by Town _Buckland_

Fee Paid: Check # _____ /Cash _5.00_ Rcd by: _[signature]_
Town Clerk

- -
- - - - -

Police Department: Approved _____   Disapproved
_____

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

_____

_____

_____

_

_____

_____

Estimated cost to the Town: _____

_____   _____

           Chief of Police   Date

- -
- - - - -

Selectboard: Approved _____ Disapproved _____

_____

Chair, Selectboard   Date