

VILLAGE OF SPRING VALLEY
200 NORTH MAIN STREET
SPRING VALLEY, NEW YORK 10977

APPLICATION - CARNIVAL

For License Pursuant to Village Ordinances
(To be typewritten or printed using ball point pen only)

NAME (Print)

ADDRESS (Location) CITY STATE ZIP CODE P.O. BOX #

INDIVIDUAL TO BE CONTACTED HOME PHONE # CELL PHONE #

CARNIVAL OPERATOR

ADDRESS OF OPERATOR CITY STATE ZIP CODE P.O. BOX #

INDIVIDUAL TO BE CONTACTED HOME PHONE # CELL PHONE #

NUMBER OF DAYS _____ @ \$200.00 PER DAY TOTAL \$ _____

DATES & HOURS OF OPERATION _____

TO BE SUBMITTED WITH APPLICATION

- 1) Hold Harmless Agreement
- 2) Insurance Policy in the amount of \$1,000,000.00 naming the Village of Spring Valley as co-insured
- 3) A plot plan showing location of all rides and booths and showing adequate parking
- 4) Appropriate fees - Non-Refundable Money order or Bank Check

CARNIVAL OPERATOR (Print Name)

SIGN NAME

VILLAGE OF SPRING VALLEY
200 NORTH MAIN STREET
SPRING VALLEY, NEW YORK 10977

APPLICATION - CARNIVAL

FOR OFFICE USE ONLY **DATE** _____

License Number _____

Date Issued _____

Fee _____

Building Dept. () *Approved* () *Disapproved (Signature)* _____

Police Dept. () *Approved* () *Disapproved (Signature)* _____