

Joseph G. Pinto  
Commissioner



Town of Oyster Bay  
Department of Parks  
977 Hicksville Road  
Massapequa, New York 11758  
(516) 797-4128 Fax: (516) 797-4145  
www.oysterbaytown.com

### EQUIPMENT PERMIT APPLICATION

Name of Event: \_\_\_\_\_

Location of Event: \_\_\_\_\_

Exact Location where Equipment should be delivered: \_\_\_\_\_

Delivery Date and Time: \_\_\_\_\_ Pick-Up Date and Time: \_\_\_\_\_

Day of Event Contact Person & Cell Phone Number: \_\_\_\_\_

Actual Event Dates and Times (as advertised to public): \_\_\_\_\_

EQUIPMENT TYPE	REQUESTED QUANTITY	RENTAL RATE (per piece of equipment)	DELIVERY & SET-UP FEES
SHOWMOBILE		\$175 for the first day \$100 each additional day	\$75 per event
PORTABLE LIGHTS (available <i>only</i> for special events using Town Showmobile)		\$50 per light, per day	\$50 per event

- NO CHECKS SHOULD BE MAILED AT THIS TIME. If application is approved, you will receive a written invoice. At that time, a check may be sent in, made out to the "Town of Oyster Bay" and the permit will be issued.
- PROOF OF INSURANCE (with "Town of Oyster Bay" listed as "Additional Insured"), along with ENDORSEMENT PAGE, must be provided.
- IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT (516) 797-4156.

**Applicant's Name:** \_\_\_\_\_

**Requesting Organization:** \_\_\_\_\_ **Is your organization located within the Town of Oyster Bay?**  
 YES  NO

**Organization's Mailing Address:**

Street \_\_\_\_\_ P.O. Box \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Applicant's Contact Information:**

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-mail Address \_\_\_\_\_

The APPLICANT understands and acknowledges that the information provided in the application is true and accurate, and that the Town of Oyster Bay and the Department of Parks are relying on these statements and representations as a basis for the issuance of a permit. The APPLICANT agrees to abide by the terms set forth in this application, and the Rules and Regulations of the Town of Oyster Bay and the Department of Parks. Any violation of the rules herein will result in the permit being revoked and the forfeiture of all money received.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE

FOR OFFICE USE ONLY:

- APPROVED BY \_\_\_\_\_
- DENIED BY \_\_\_\_\_
- HOLD (Special Event)

Amount Paid: \_\_\_\_\_

Date: \_\_\_\_\_

Check #: \_\_\_\_\_

DELIVERY DATE/TIME
RECOVERY DATE/TIME