

Large gathering permit application

<u>Name of Applicant</u>	PAUL GOYETTE	
<u>Mailing Address</u>	240 BUCK POND RD WESTFIELD, MA 01085	
<u>Contact Person</u>	<u>Contact Person who will be at Event</u> ¹ PAUL GOYETTE	
<u>Contact Person Phone</u>	<u>Contact Person will be present at event phone Number</u> 413-246-9770	
<u>Contact Person Cell</u>	<u>Contact Person will be present at event cell phone Number</u> 413-246-9770	
<u>Description of Event</u>	Please attached addition sheets of paper if description cannot fit in space MOTORCYCLE RACE	
<u>Location of Event</u>	589 DEAN RD N. TOWNAL, VT	
<u>Date of Event</u>	<u>Day(s)/Hours of event</u>	<u>Start time</u> SAT 12pm SUN 8am
	6/3/23 + 6/4/23	<u>End time</u> 11pm 4pm
<u>Estimated Attendance</u>	<u>Minimum No:</u> 900	<u>Maximum No:</u> 1000
<u>Types of Alcohol Being Served</u>	NONE	

¹ Applicant must be reachable during entire event at a moment's Notice


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The following Facilities will be available for the event

Sanitation: PORTA POTTY	No. of Units: 8	Male: —	Female: —
Water Supply from: N/A			
Food will be served from and/or by: FOOD TRUCK - FOOD VENDOR WILL APPLY FOR PERMIT			
Beverages will be served from and/or by: N/A			
Illumination after dark will be provided by: P27 OFFROAD LIGHT TOWERS			
Medical and First Aid Provided by: TOWNAL RESCUE			
Traffic Control Provided by: N/A		Crowd control by & No. of officers: N/A	
Parking for <u>250</u> is planned.			
Attach plan of exact parking location and exact route to be kept open for emergency vehicles If this is not applicable to this permit explain: GRAVEL ROAD OPEN			

Name of Promoter P27 OFFROAD	Applicant PAUL GOLETTE
Mailing address: 240 BUCK POND RD. WESTFIELD, MA 01085	Mailing address //
Phone: 413-246-9770	Phone: // Cell: //
Email: p27offroad@gmail.com	Email: //

I PAUL GOLETTE, do here by accept all responsibility for the above-described event. I agree to adhere to all laws and regulations of the Town of Pownal and the state of Vermont. I do hereby consent to the entry, at any time, in the course of his/her duties, any official of the Town in the performance of their official duties, including but not limited to inspection. I also agree to provide surety that the Town deems necessary. Under the Penalty of perjury, I do here by certify that the above is true.

Signature:  Date: 1-3-23

Name of Property Owner (The following MUST BE completed by the owner of the property involved)

Mailing address: PO BOX 272 N. POWNAL VT 05260	Phone Number: 518-857-8556
Email: treefarmer84@gmail.com	Cell Phone: —

Sean O'Rourke have thoroughly discussed the above event with the Promoter and am in agreement with him/her in all areas. I do hereby give my consent to use my property for this event. I do hereby consent to the entry, at any time, in the course of his/her duties, any official of the Town in the performance of their official duties, including but not limited to inspection. I also agree to provide surety that the Town deems necessary. Under the Penalty of perjury, I do here by certify that the above is true.

Signature:  Date: 1-3-23