

## **County of Dukes County, Massachusetts**

## **Permit Application for Beach Event**

Name of the Beach	
Location on the Beach	
	Note:f it is state beach please include the entrance number
<u>Applicant</u>	
Name	
Address On-Island	
Off-Island	
Phone # On-Island	Fax#
Off-Island	E-Mail
Event Date	Rain Date
Start Time	End Time
Total # of People Expected	
Total # of Paid Staff	
Type of Event  Description of Event	Commercial ( ) / Social ( ) / Other ( )
Food - Will food be served?	Yes ( ) No ( )
Who will be preparing the food?	sed caterer is consumed at one's own risk.*
	Yes ( ) No ( )
	by a licensed caterer or a certified "Serve-Safe" Person.*
Catering Company	
Phone#	
Contact Person	
	Please attach copy of license & permit from Board of Health
Serve-Safe Certified	Yes ( ) No ( )
Name of Person Certified	
	Please attach a copy of one-day permit from Board of Health
Will there be a grill?	Yes ( ) No ( )
9	If caterer, please attach copy of a permit from the Oak Bluffs Fire Dept
Name of Porta-Potty Company	
Phone #	
Will a company or tent be expeted?	Vec ( ) Ne ( ) Circ.
Will a canopy or tent be erected?  If Rented, Name of Company Phone #	Yes ( ) No ( ) Size:
List other equipment that will be us	ed (ie Tables Chairs ect)
Lot other equipment that will be us	oa. (io. Tabioo, Oriano, ooi.)
Signature of Applicant	