

**VILLAGE OF BUCHANAN
RESOLUTION AUTHORIZING
USE OF VILLAGE FACILITY**

Introduced by: _____

Seconded by: _____

Dated: _____

WHEREAS, The Village Trustees of the Village of Buchanan have received a request for the use of the Village Pavilion on June 1, 2012 by Joshua Cohen on behalf of the Buchanan-Verplanck Elementary School, at which time no alcoholic beverages will be available; and

WHEREAS, the Village Trustees of the Village of Buchanan have also received a request for the waiver of the usual fee for the use of same;

NOW BE IT THEREFORE RESOLVED, that the requests are hereby approved subject to the applicants complying with all Village requirements for the use of this facility

Upon Roll Call Vote:

Mayor Sean Murray _____

Trustee Richard Funchion _____

Trustee _____

Trustee Theresa Knickerbocker _____

Trustee Nicolas Zachary _____

Vote: Resolution carried by a vote of _____ to _____.

STATE OF NEW YORK)
)SS.:
COUNTY OF WESTCHESTER)

I, KEVIN HAY, Village Clerk of the Village of Buchanan, do hereby certify that the above is a true and exact copy of a Resolution adopted by the Village Board of the Village of Buchanan at a meeting of said Board held May 1, 2012.

KEVIN HAY

Buchanan-Verplanck Elementary School

160 Westchester Avenue
Buchanan, New York 10511
Phone (914) 257-5412
Fax (914) 257-5401

Joshua S. Cohen, Principal



ELEMENTARY



April 20, 2012

Village of Buchanan
236 Tate Avenue
Buchanan, NY 10511

To Whom It May Concern:

We would like to request the use of the Village of Buchanan facilities for a school activity in the near future.

Our annual end-of-the-year picnic for grades K-5 will be held this year at the Pavilion on Friday, June 1, 2012 (rain date Friday, June 8, 2012). We would like to request the use of the Pavilion, fields and playground areas for approximately 400 students, teachers and parents.

We have enclosed the Request for Use of Village Facility form and are requesting the Village waive the fee for the use of the facilities. We will provide the Certificate of Insurance.

Please let us know if this day is okay, as we need time to plan for this school-wide event.

Sincerely,

Joshua Cohen

VILLAGE OF BUCHANAN
DEPARTMENT OF RECREATION
MUNICIPAL BUILDING
BUCHANAN, NEW YORK 10511-1298

DATE: 4/20/2012

REQUEST FOR USE OF VILLAGE FACILITY

(All requests must be received 14 days in advance.)

(Requests for alcoholic beverage use must be received 30 days in advance.)

NAME OF INDIVIDUAL RESPONSIBLE: Joshua Cohen, Principal
NAME OF ORGANIZATION/COMPANY: Buchanan-Verplanck School
ADDRESS: 160 Westchester Avenue, Buchanan
PHONE NUMBER (DAY): (914) 257-5412 APPROXIMATE # OF PEOPLE ATTENDING (MAX.) 400
DATE(S) OF EVENT: Friday, June 1, 2012 TIME(S) 9:00 AM TO 3:30 PM
Raindate: Friday, June 8, 2012 (Please include set-up/clean-up time)
Brief Description of Event or Activity (Intended use/purpose, etc.):

Picnic, Organized Games

FOOD OR NON-ALCOHOLIC BEVERAGE SERVED? X (YES) (NO)

ALCOHOLIC BEVERAGES -ONLY WHEN AUTHORIZED - (APPROXIMATE DESCRIPTION & QUANTITY):

PLEASE CHECK FACILITY(IES) REQUESTED:

- | | | | |
|--------------------------|-------------|--------------------------|-------------|
| COMMUNITY ROOM | <u> </u> | WESTCHESTER AVENUE FIELD | <u>X</u> |
| PAVILION | <u>X</u> | CONFERENCE ROOM | <u> </u> |
| LENT'S COVE FIELD | <u> </u> | SWIMMING POOL | <u> </u> |
| HISTORICAL ROOM | <u> </u> | TENNIS COURTS | <u> </u> |
| WESTCHESTER AVE. OFFICES | <u> </u> | OTHER: | <u> </u> |

ADDITIONAL REQUESTS:

BATHROOMS X LIGHTS ATTENDANT (ADDITIONAL CHARGE)
OTHER

All fees and reimbursements are the responsibility of the applicant. Please read the attached fee schedule along with the rules and regulations before signing this applicaiton.

SIGNATURE OF APPLICANT: Joshua S. Cohen

RECEIVED BY: DATE:

*CONDITIONS OF APPROVAL: LIABILITY INSURANCE IN THE AMOUNT OF ONE MILLION DOLLARS
(Certificate of Insurance must name Village of Buchanan as insured)

AVAILABILITY: YES X NO SIGNED: Norma B...
Caretaker/Recreation Supervisor

APPROVAL: Kenn Hany RESTRICTIONS:
DATE: 4/27/12 INSURANCE CERTIFICATE RECEIVED:
EXPIRATIONS DATE:

ISSUED? YES NO: NAME: