

BLAIRSTOWN TOWNSHIP
WARREN COUNTY, NEW JERSEY
ORDINANCE NO. 2016-13

**"ORDINANCE AMENDING CHAPTER 142- 36 B: FIXING CERTAIN
RECREATION FACILITY USE FEES "**

BE IT ORDAINED by the Township Committee of the Township of Blairstown, County of Warren and the State of New Jersey, that the following amendment be made to CHAPTER 142-36 Section B replacing the current wording with the following:

B: The Township Committee shall require that all applicants complete an "Application For Use of Recreation Facilities" for use of any of the locations named in this Ordinance. Fees for use will range from \$100-\$450, depending upon the type of organization requesting the use. The applicant will also be required to pay any additional licensing fees and/or outside source fees deemed necessary by the Municipal Departments reviewing the application. A deposit in the amount of 50% of the total usage fee will be required at the time the application will be reviewed and approved by the members of the Township Committee.

This ordinance shall take effect immediately upon passage and publication in accordance with the law.

Introduction:

Date: November 9, 2016

Motion: Lance

Second: Avery

VOTE: AYE: Avery, Dalton, Lance, Van Valkenburg, Shoemaker

Adoption:

Date: December 14, 2016

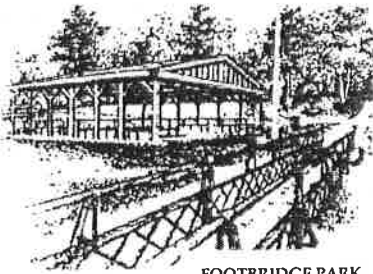
Motion: Van Valkenburg

Second: Dalton

VOTE: AYE: Avery, Dalton, Lance, Van Valkenburg, Shoemaker

CERTIFICATION: It is hereby certified that this is a true and accurate copy of an Ordinance adopted by the Township Committee of the Township of Blairstown, Warren County, NJ at a Regular Meeting held on December 14, 2016.


Linda Leidner, RMC
Municipal Clerk



FOOTBRIDGE PARK
BLAIRSTOWN, NJ

TOWNSHIP OF BLAIRSTOWN

Incorporated 1845

106 Route 94
Blairstown, New Jersey 07825
www.blairstown-nj.org

Herman P. Shoemaker, Mayor
Linda Leidner, Clerk

Telephone (908) 362-6663
Fax (908) 362-9635

APPLICATION FOR FACILITY USE

Date of Function: _____ Time: _____

Rain date of Function _____

Name of Organization or Group: _____

Name of Representative of Organization or Group: _____

Postal Address _____

Telephone No.: _____

Email _____

Non-Profit Status, are you a 501c3 Yes _____ No _____

Purpose of Function: _____

Estimated Number of Participants: _____ Residents _____ Non-Residents _____

Applicant is seeking to use what area/facility: _____

Please give a brief summary of event:

Will you be using the Concession Stand?	Yes	_____	No	_____
Will you be charging a fee/admission for event?	Yes	_____	No	_____
Are any items going to be sold at event by group or vendors?	Yes	_____	No	_____
Will there be a raffle at this event?	Yes	_____	No	_____
Will there be any bounce houses/amusements at event?	Yes	_____	No	_____
Will there be any farm animal at event?	Yes	_____	No	_____

Will there be any use of generators Yes _____ No _____
 Will there be any type of demonstrations at event Yes _____ No _____

If you answered yes to any of the above please give specific details

Are you requesting assistance from Police, First Aid Squad, Fire Department or any other outside agency?

FEE SCHEDULE

Out of Township Organization	\$ 350.00
Out of Township Non-Profit (School, Church, etc.)	\$ 200.00
Township Non-Profit (School, Church, Scouts, etc)	\$ 100.00
Township Fire Co., EMS, Public School, Historic or Senior Citizens	Free
Non Excluded Sporting Groups	\$ 400.00 per season
Concession Stand Use	\$ 100.00

Exempt Sporting Groups are as follows:

- | | |
|--|------------------------------------|
| North Warren Little League | Blairstown Softball - All Stars |
| North Warren Little League - All Stars | North Warren Patriots (Football) |
| Blairstown Youth Soccer | North Warren Patriots Cheerleaders |
| Blairstown Softball | |

Seasons are defined as follows:

- | | |
|----------------------------------|----------------------------------|
| Winter - January -February-March | Summer - July-August-September |
| Spring -April-May-June | Fall - October-November-December |

As a condition of the Township of Blairstown granting the use of the park or facility, the applicant shall assume all risk and responsibility for, and agrees to indemnify, defend and save harmless the Township, its officials, agents and servants from and against, any and all claims, demands, suits, actions, recoveries, judgments and costs or expense in connection therewith on account of loss of life, property, injury or damage to the person, body or property of any person, or person, which shall arise from or result directly or indirectly from the use of the park or facility by applicant, the applicant's guest, friends, associates, contractors, subcontractors or any other person or entity associated with applicant.

I have read the forgoing application and agree to the terms and conditions on behalf of the applicant.

Applications will only be approved at monthly Township Committee meetings. Please note, it will take approximately two weeks to for Township to respond to initial application request.

Applicants' Signature _____
 Title: _____
 Date: _____

Date Received : _____

Signature: _____
 Title: _____

For Internal Use Only

Municipal Clerk

Licenses and Permits required for this event

Costs

_____	_____
_____	_____
_____	_____

Comments or concerns with event

Signed off by Municipal Clerk:

Date:

DPW

Description and Time Estimate for DPW workers before and after event

Are additional trash containers needed for this event?

Yes

No

If yes, Number and Size

Is there a need for any DPW worker to be present on day of event?

Yes

No

If yes, how many and estimated number of hours

Comments or concerns with event

Signed off by DPW Foreman:

Date:

POLICE

Are police requested OR are police required at this event?

Yes

No

If yes, number of officers and estimated time

Will there be a need for traffic control?

Yes

No

If yes, number of officers and estimated time

Need for special parking permits?

Yes

No

Comments or concerns with event

Signed off by OIC:

Date:

RECREATION DEPARTMENT

Facility requested is available	Yes	_____	No	_____
Certificate of Insurance Provided	Yes	_____	No	_____
Will there be any bounce houses/amusements at event?	Yes	_____	No	_____
If yes, has Township insurance agent verified proper coverage	Yes	_____	No	_____
If Nonprofit 501 c(3) organization supplied proof of non-profit status	Yes	_____	No	_____
		_____		_____
Are extra Port-A-John's need for event?	Yes	_____	No	_____
Comments or concerns with event				

Date Application Submitted:
Estimated Fees

Clerk	_____
DPW	_____
Police	_____
Recreation	_____
Total	=====

Security Deposit Required _____
(50% of Total Usage Fee)

_____ CFO Signature

_____ Date

Committee Action

Approved: _____ Denied: _____ Dated: _____