



Incorporated Village of Sea Cliff

300 Sea Cliff Avenue
Sea Cliff, NY 11579

(516) 671-0080 • www.seacliffny.gov

FACILITY USE PERMIT APPLICATION

Denied

Approved

For Village Use Only

By _____
Signature _____

Date of Application

3/2/22

Check one:

Park Village Green/Pirie Park (name of park) Facility close central Ave Street → bet. Sc Ave & Summit (name of facility) Beach

APPLICANTS NAME Kathleen DiResta Sea Cliff Resident Non-Resident

APPLICANTS ADDRESS 185 Glen

APPLICANT'S PHONE 917 767 9216 APPLICANTS EMAIL info@kdirestadesign.com

NAME OF ORGANIZATION SC Arts Council

APPLICANTS POSITION IN ORGANIZATION Pres

ORGANIZATION'S OFFICIAL ADDRESS POB 141

CITY SC STATE NY ZIP CODE 11579

Is this a Non-Profit Organization? YES NO FED TAX ID (if yes)

DESCRIPTION OF ACTIVITY(S) second Sunday Community event. w/ Artists, music, & promotion to downtown businesses.

Dates Requested 2nd Sunday of April, May, June, July, Aug, Sept, Oct.

Days & Hours Requested

MONDAY _____ TUESDAY _____ WEDNESDAY _____ THURSDAY _____

FRIDAY _____ SATURDAY _____ SUNDAY 11-4

of Participants Expected Daily ~150 Will Admission Be Charged? NO YES

Admission cost _____ Will Alcohol Be Consumed? No YES If Yes, will alcohol be sold or served? No YES

The APPLICANT understands and acknowledges that the information provided in the application is true and accurate, and that the Village of Sea Cliff is relying on these statements and representations as a basis for the issuance of a permit. The APPLICANT agrees to abide to the terms set forth in this application, and the Laws, Rules and regulations of the Village of Sea Cliff. The APPLICANT understands that their organization may not sublease, sell, or assign a permit to another entity. Any violation of the rules or conditions will result in a permit being revoked.

[Handwritten Signature]

SIGNATURE

DATE 3/2/22