



North Shore Schools

Discovering Your Dreams

Jeanette E. Wojcik
Principal, Sea Cliff School
wojcikj@northshoreschools.org

Sea Cliff Village Hall

Elena Villafane, Mayor

Sea Cliff Avenue

Sea Cliff, NY 11579

To Whom It May Concern:

Sea Cliff School will be having a Carnival on May 20, 2022 (rain date June 31, 2022).

Requester: Sea Cliff PCA and Sea Cliff School

Time: 4:00 PM to 9:00 PM

Request: The Sea Cliff PCA is requesting street closures around the Sea Cliff School to ensure the safety of our students, families, and community during our annual Sea Cliff Carnival. The event is open for the entire Sea Cliff community to enjoy.

Streets and corners:

1. Franklin (between Main Ave and Carpenter Ave)
2. Franklin/Carpenter Ave corner
3. Carpenter Ave (between Franklin Ave and Littleworth Lane)
4. Corner of Carpenter and Littleworth
5. Littleworth Lane (between Carpenter Ave and Hassen Pl)

Thank you for your consideration for allowing us to close the streets.

If you have any questions please do not hesitate to call us at 516-277-7502.

We look forward to hearing from you.

Regards,


Jeanette Wojcik

Principal, Sea Cliff Elementary School



Incorporated Village of Sea Cliff

For Village Use Only

300 Sea Cliff Avenue
Sea Cliff, NY 11579

Approved

(516) 671-0080 - www.seacliff.ny.gov

By _____
Signature _____

FACILITY USE PERMIT APPLICATION

Denied

Date of Application 5/6/22

Check one:

Park Roslyn Facility _____ Beach _____
(name of park) (name of facility)

APPLICANT'S NAME Craig Burnett Sea Cliff Resident Non-Resident

APPLICANT'S ADDRESS 1 Dubai Ct

APPLICANT'S PHONE 805-252-7540 APPLICANTS EMAIL Craigburnette@gmail.com

NAME OF ORGANIZATION Cub Scout Pack 274 - Zion's Den (1st Grade)

APPLICANT'S POSITION IN ORGANIZATION Den Leader

ORGANIZATION'S OFFICIAL ADDRESS N/A - Main office in Massapeque for Nassau

CITY _____ STATE _____ ZIP CODE _____

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

DESCRIPTION OF ACTIVITY(S) End of year fun, use of a small webber grill
5/22/2022 (supervised adult only)

Dates Requested _____

Days & Hours Requested _____

MONDAY _____ TUESDAY _____ WEDNESDAY _____ THURSDAY _____
FRIDAY _____ SATURDAY 11-1p SUNDAY _____

of Participants Expected Daily ~25 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.

SIGNATURE [Signature] DATE 5/6/22