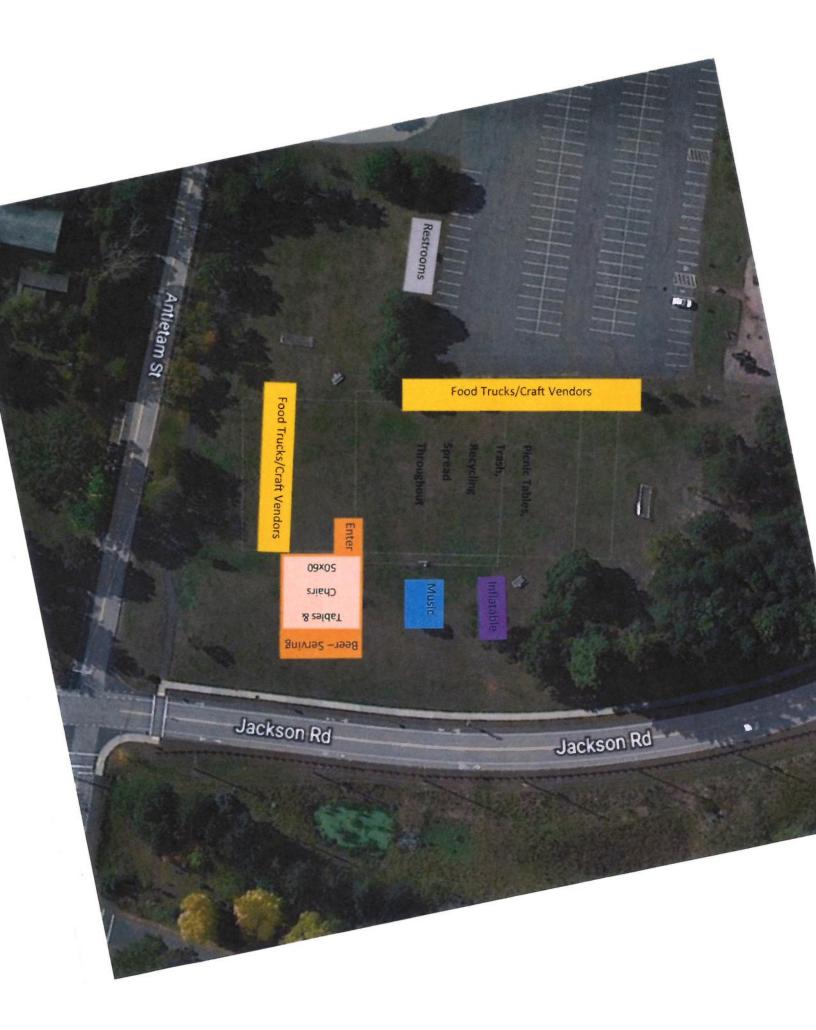
 Provide a site plan showing proposed layout of event (can be hand drawn) as well as the premises for dispensing and consumption of alcohol, outlining the area to be roped or fenced off (including dimensions of area, access point(s), internal layout – serving areas, tables, seating etc.). At least one (1) Police Officer shall remain in the roped or fenced off area at all times and security is required at each access point. ** 1-Day License is valid for wine and/or malt beverages only. Special licenses for the sale of all alcoholic beverages may be issued to Non-Profit organizations ONLY. Provide proof of Non-Profit status if you are applying for an all alcoholic beverages license Licensees must purchase alcoholic beverages from an authorized source; licensees CANNOT purchase from a package store and CANNOT accept donations from anyone. See the list of authorized sources at: www.mass.gov/abcc/pdf/authorizedsources1-day.pdf Police & Fire Detail Notification (CALL 978-772-8800): YES NO 	DEVENS ENTERPRISE COMMISSION			PERMIT NO		
APP 21 2022 APP 21 2022 APP 21 2022 APP 2000 Section Sectio		8831 x3338 Fax 978-772-152	Received by the	DEC No. D22-047		
(Check payable to Devens Enterprise Commission) A 1-Day License requires a public hearing. Applications must be submitted at least 21 days prior to the public hearing date. PROPERTY OWNER MASS DEVELOPMENT EVENT APPLICANT Hillary Andrews. Dy verished ADDRESS 33 Andrews Parkery ADDRESS 34 Andrews Parkery ADDRESS 34 Andrews Parkery ADDRESS 35 Andrews Parkery ADDRESS 36 Andrews Parkery ADDRESS 37 Andrews Parkery ADDRESS 37 Andrews Parkery ADDRESS 38 Andrews Parkery ADDRESS 39 Andrews Parkery ADDRESS 40						
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PHONE (17 894-2305) PHONE (17	ADDRES	s 33 Antrews Parkway	ADDRESS 99 Bue	na Vista Street		
FAX FAX SIGNATOREOF PROPERTY OWNER	TOWN/S	TATE DEVING, MA	TOWN/STATE DEVE	us, MA		
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LOCATION / STREET/ FIELD: PS Museum field build 19 Antictam St EVENT: FOOD TOTAL FLYING Please provide the following information with your 1-Day License Application 1. DATE: P 22 HOURS (that alcohol will be served): FROM TO 3pm 2. Event Description food trucks, cat vendor, music, inflatables 3. Provide a site plan showing proposed layout of event (can be hand drawn) as well as the premises for dispensing and consumption of alcohol, outlining the area to be roped or fenced off (including dimensions of area, access point(s), internal layout – serving areas, tables, seating etc.). It also to the police Officer shall remain in the roped or fenced off area at all times and security is required at each access point. ** 4. 1-Day License is valid for wine and/or malt beverages only. Special licenses for the sale of all alcoholic beverages may be issued to Non-Profit organizations ONLY. Provide proof of Non-Profit status if you are applying for an all alcoholic beverages license 5. Licensees must purchase alcoholic beverages from an authorized source; licensees CANNOT purchase from a package store and CANNOT accept donations from anyone. See the list of authorized sources at: www.mass.gov/abcc/pdf/authorizedsources1-day.pdf 6. Police & Fire Detail Notification (CALL 978-772-8800): YES NO 7. Waste Management (incl. recycling/composting): Purplement of the purpose of restricting the removal of alcoholic beverages by patrons/guests. The applicant is an individual, as the responsible manage for the organization. He or she agrees to control the dispensing of alcohol to persons not under the age of twenty-one (21), and that there is to be no service of alcohol to individuals who are or "appear to be" under the influence alcohol. Note: The DEC reserves the right to anticipate potential nuisance conditions at the time the event is proposed and to require assurance of non-impact or reasonable mitigation commitments (including restricting hours of the event and requirements to provide proof that the convener of the event	FAX _	NIA	FAX NA			
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APPLICANT SIGNATURE	outdo alcoh organ (21), a alcoh propo hours time t	or area is to be enclosed by fencing or olic beverages by patrons/guests. The nization. He or she agrees to control the and that there is to be no service of alcolol. Note: The DEC reserves the right to sed and to require assurance of non-intention of the event and requirements to provide Event Permit is issued. The DEC mather than the DEC math	other barrier set-up for the applicant is an individual, dispensing of alcohol to perbol to individuals who are anticipate potential nuisal pact or reasonable mitigate proof that the convenery also impose protective m	e purpose of restricting the removal of as the responsible manager for the ersons not under the age of twenty-one or "appear to be" under the influence nce conditions at the time the event is tion commitments (including restricting of the event has adequate insurance) at the		
			APPLICANT SIG	MANUS GNATURE		



MAY 0 9 2022

DEVENS ENTERPRISE COMMISSION		PERMIT NO			
33 Andrews Parkway, Devens, MA 01434 978-772-8831 x3338 Fax 978-772-1529		DEC No. D22. 047			
		APPLICATION DATE: Fee: \$50.00 (additional fees may apply)			
EVENT PERMIT (fill out application form co	ompletely and legibly)				
PROPERTY Mass Development E	EVENT APPLICANT	Devens Recreation			
ADDRESS 33 Andrius Partway	address <u>99 Bul</u>	na Vista Street			
TOWN/STATE DEVENS, MA 1	OWN/STATE DEVE	ns. ma			
	PHONE 978-7	12-8876			
	CONTRACTOR	1/1			
	NAME / CONTRACTOR	U/A			
	PHONE	cation form completely and legibly.			
LOCATION / STREET/ FIELD: 17 JUSTICAL 1	Complex- Field	on the corner of Jackson & Antietan			
EVENT: Food & Craft Festival					
DATES: FROM 6/3 4-7 PM	14 11m-3P				
Please provide the following information with y					
1. Event description food tracks and craft					
3. Number of people expected to attend: 2,0	00 - Musure as	this is the first time doing this ever			
CALL 978-772-1864)	4. Will the event require street closure? YES NO (if YES contact Devens Public Works				
5. Parking arrangements/traffic control: Stt	Hacked map	a lateral and a			
6. Police & Fire Detail Notification (CALL 978-77		I am Noring a detail for alcohol			
7. Food Service: YES NO	7. Food Service: YES NO (Food Service Vendors must be permitted through Nashoba Associated Boards of Health CALL 978-772-3335) 8. Waste Management (incl. recycling/composting): +rash + recycling bins through Nut. Bunding recycling bins through N				
Waste Management (incl. recycling/composting)	g): trash + recycli	ng bins throughput, Bunoving recycle			
9. Sanitary Arrangements: (restrooms, hand wash, etc.) 115 - moving portable tailes to field to tump!					
10. Tent(s): YES NO (if YES please fill out reverse **)					
11. Stages and/or structures associated with the event?: YESNO (if YES provide plans/details)- விலியி					
12. Power source(s): 2 generators (Electric generators require electrical permit from the DEC; Propane tanks over 40 lbs. and/or gas generators require permits from the DEC and/or Devens Fire Dept.)					
13. Is Alcohol being served: YESNO					
14. Will there be amplified music : YES of amplified music: FROM	NO (if YES inc	licate method – i.e. (band) DJ, etc.) Hours			
The DEC reserves the right to anticipate potential nuisance conditions at the time the event is proposed and to require assurance of non-impact or reasonable mitigation commitments (including restricting hours of the event and requirements to provide proof that the convener of the event has adequate insurance) at the time the Event Permit is issued. The DEC may also impose protective measures with respect to the active use (i.e., boating, swimming, or fishing) of a surface water resource.					
	ADDIVIONIT S	SIGNATURE SIGNATURE			
	ALL FLAMINI	NOW TOKE			

	Permit Fee: \$50/per tent 10' x 12'	or larger (in a	ddition to event permit fee) when 10×12 was crafters might	ht bring 10x10 pop
NUM	Permit Fee: \$50/per tent 10' x 12' BER OF TEMPORARY TENT(S) S: FROM 4 3	Olorgo	TENT SIZE(S)	up ten
DATE	:s: FROM 4/3		то	
1.	Do tent(s) have side panels?	Yes	No N/A	
2.	Will tent(s) be utilized at night?	Yes	No	
3.	Number of people expected to occ (if over 250 for a single tent, include fl	cupy each tent	:\//	978-772-4600).
4.	Show tent location(s) on the event extinguishers and "no smoking sig		if required, means of egress, lo	cation(s) of fire
5.	Copy of worker's compensation ce	ertificate (if bei	ng installed by a licensed installe	er);
6.	Flame-resistant certificate(s) for ea	ach tent, side	wall or drops;	
A 1-D	-Day License Application as License requires a public hearing. All g date.	required in):
1-Day	y License Fee: \$250. (in addition to a	event permit fee) cohol will be s	6/3 4-7pm, 4/4 erved): FROMTO	11am-3pm
1. O of in	n site plan show proposed layout of alcohol outlining the area to be rope ternal layout – serving areas, tables ped or fenced off area at all times a	event as well and or fenced or seating etc.).	as the premises for dispensing a ff (including dimensions of area, At least one (1) Police Officer s	nd consumption access point(s), hall remain in the
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3. Li	censees must purchase alcoholic be urchase from a package store and C uthorized sources at: www.mass.go blice & Fire Detail Notification (CALL	everages from	an authorized source: licensees	CANNOT ne list of a detail office
4. P	olice & Fire Detail Notification (CALL	978-772-880	0): YES _ √ I am MO_	for the alcoho
** ot al ar	** It is illegal in Devens to sell, serve, and atdoor area is to be enclosed by fencing of coholic beverages by patrons/guests (she individual, as the responsible manager is cohol to persons not under the age of two tho are or "appear to be" under the influer	consume alcohor other barrier sow on proposed for the organizatienty-one (21), ar	ol beverages on public property with let-up for the purpose of restricting t layout plan and include dimensions ion. He or she agrees to control the	out a license. The he removal of). The applicant is dispensing of
	1 1		/ / /	
W	Official: 15		Applicant Signature	~

Devens Food Truck and Craft Festival Narrative

We are hosting the Devens Food Truck and Craft Festival on Museum Complex, the field at the corner of Jackson Road and Antietam Street on June 3rd from 4-7pm and June 4th from 11am-3pm. Please see the categories below for more information.

Food Trucks – all food trucks will provide their temporary or seasonal food permits from NABH and will provide proof of insurance, their W-9, and a signed license agreement. Food trucks will be around the perimeter of the field in the yellow areas (see attached layout map). We currently have 11 food trucks signed up for the event as of 5/5 that are working on getting all of their documentation in.

Craft Vendors – all craft vendors will provide a signed release waiver in lieu of proof of insurance. Craft vendors will be spread throughout the food truck areas. I currently have 5 craft vendors signed up as of 5/5, but am getting more in daily as we have recently changed the documentation requirements for craft vendors.

Beer Vendors — beer vendors will provide their documentation and will be located inside a 50x60 foot fenced off area. Galvanized steel, interlocking barricades will be used to fence the area off and a State Police detail trooper will be hired to monitor the alcohol area while alcohol is being sold. There will be tables with seating, as well as trash and recycling barrels inside of this area. Beer vendors are Bull Spit Brewing and Sterling Street Brewery.

Music – we will have one musical performance at each date's event. Point the Finger Band will be performing 6/3 (electric music) and Jacqueline Burns will be performing 6/4 (acoustic set). We will be using a generator to power the bands' equipment. There will also be a stage set up for the band to utilize. The stage is 16x24 feet and is constructed from metal with carpet on top, and has wooden stairs. With the exception of breaks for the performers, music will be playing throughout the duration of the events. Generators will follow safety guidelines set by the DEC.

Inflatable – we will have one inflatable slide that will be secured to the ground. The blower for the slide will be powered by a generator. There will be a DPW employee supervising the slide to ensure safety and make sure all rules are being followed. The slide will be closed in the event of high winds.

Restrooms – we will provide at least four portable toilets at the location and have access to many others, if they are needed. Restrooms will be located away from food vendors to minimize risk of transfer of bacteria and odor.

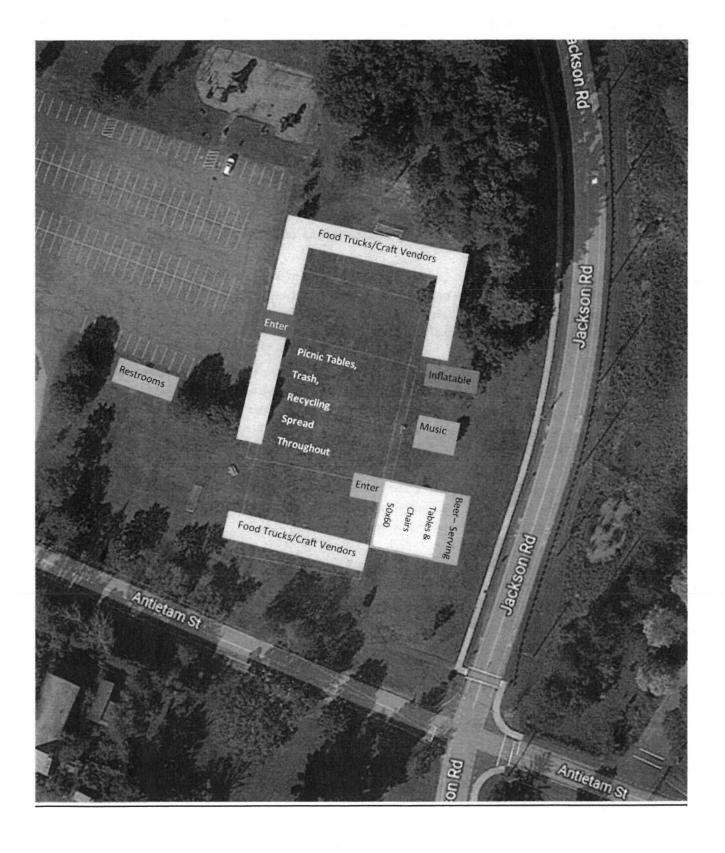
Trash and Recycling – trash and recycling barrels will be spread throughout the event area. A DPW staff member will be responsible for removing bags as they get full and putting them in Recreation trash or recycling dumpsters.

Parking – we plan on utilizing three large and two small Recreation parking areas for this event, but we have three additional large parking areas that we can open if we get more attendees than expected. We will have a-frame directional signage out that will point people to approved parking areas.

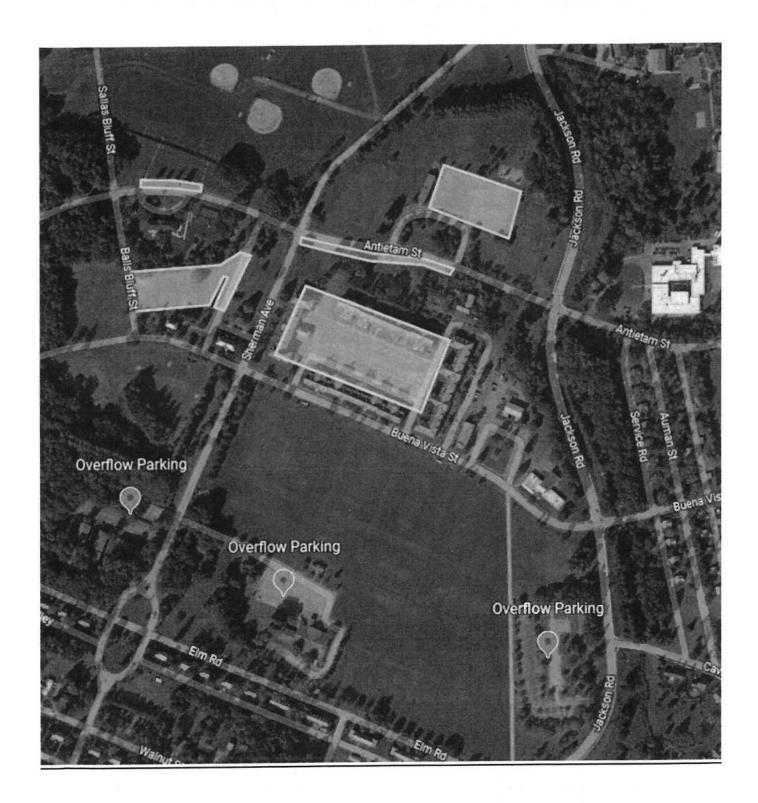
Expected Attendance – as this is the first time we are doing an event of this nature, it is difficult to know how many people will attend. We are currently estimating around 2,000 attendees, but we have additional parking areas and directional signage if more people show up than we estimated.

Rules for Attendees – No pets, no outside alcohol, no BBQs or open flames, park in approved parking areas only. Rules will be on the marketing flyer and will be posted at the entrance to the event.

Devens Food Truck and Craft Festival Layout Map



Devens Food Truck and Craft Festival Parking Map



Devens Enterprise Commission - 33 Andrews Parkway - Devens, MA 01434



Commonwealth of Massachusetts Department of Fire Services

	Official Use Only	
Permit No.		
Occupancy	and Fee Checked	
[Rev. 1/07]	(leave blank)	

PERMIT FEE: \$

BOARD OF FIRE PREVENTION REGULATIONS APPLICATION FOR PERMIT TO PERFORM ELECTRICAL WORK All work to be performed in accordance with the Massachusetts Electrical Code (MEC), 527 CMR 12.00 Date: 5/5/22 (PLEASE PRINT IN INK OR TYPE ALL INFORMATION) To the Inspector of Wires: City or Town of: 1) EVENS By this application the undersigned gives notice of his or her intention to perform the electrical work described below. Location (Street & Number) field at the corner o and Telephone No. 978-772-88 76 Owner or Tenant 1) Visc |) Reclapment Owner's Address 33 Martins Parking, Devens Is this permit in conjunction with a building permit? No V (Check Appropriate Box) Purpose of Building Utility Authorization No. Existing Service Volts Overhead Undgrd No. of Meters Amps Undgrd 🔲 Volts Overhead No. of Meters New Service Amps Number of Feeders and Ampacity Location and Nature of Propos at the corner d blower band compnent and Completion of the following table may be waived by the inspector of Wires. No. of Total No. of Cell.-Susp. (Paddle) Fans No. of Recessed Luminaires KVA Transformers KVA Generators 2 No. of Luminaire Outlets No. of Hot Tubs No. of Emergency Lighting Swimming Pool Above Ingrad No. of Luminaires **Battery Units** No. of Receptacle Outlets No. of Oil Burners FIRE ALARMS No. of Zones No. of Detection and No. of Gas Burners No. of Switches Initiating Devices Total No. of Air Cond. No. of Alerting Devices No. of Ranges Tons No. of Self-Contained Heat Pump Number No. of Waste Disposers Detection/Alerting Devices Local Connection Connection Totals: No. of Dishwashers Space/Area Heating KW Security Systems:* No. of Devices or Equivalent Heating Appliances No. of Dryers KW No. of Water No. of 10.01 Data Wiring: KW Ballasts Heaters No. of Devices or Equivalent Telecommunications Wiring: No. of Devices or Equivalent Signs No. Hydromassage Bathtubs No. of Motors Total HP OTHER: Attach additional detail if desired, or as required by the Inspector of Wires. Estimated Value of Electrical Work: (When required by municipal policy.) Inspections to be requested in accordance with MEC Rule 10, and upon completion. Work to Start: INSURANCE COVERAGE: Unless waived by the owner, no permit for the performance of electrical work may issue unless the licensee provides proof of liability insurance including "completed operation" coverage or its substantial equivalent. The undersigned certifies that such coverage is in force, and has exhibited proof of same to the permit issuing office. CHECK ONE: INSURANCE ☐ BOND ☐ OTHER ☐ (Specify:) I certify, under the pains and penalties of perjury, that the information on this application is true and complete. FIRM NAME: LIC. NO.: Licensee: Signature LIC. NO.: (If applicable; enter "exempt" in the license number line.) Bus. Tel. No .: Address: Alt. Tel. No.: *Per M.G.L. c. 147, s. 57-61, security work requires Department of Public Safety "S" License: Lic. No. OWNER'S INSURANCE WAIVER: I am aware that the Licensee does not have the liability insurance coverage normally

required by law. By my signature below, I hereby waive this requirement. I am the (check one) owner owner's agent.

1/11/ Telephone No. 978-772-

Owner/Agent Afriller 1