

**BOSTON TOWNSHIP
BICYCLE, MOTORCYCLE, RUNNING, JOGGING, WALKING, AND EVENTS FORM:**

PERMIT NUMBER: _____

This form constitutes a permit when completed and signed by the Event Organizer and a Township Official

Event Name: _____ **Event Date** ____/____/____

Type of Event _____ **Number of Participants** _____ **Time: Start** _____ **End** _____

Event Organizer Name: _____ **Phone Number:** _____

Event Organizer Address: _____/_____/_____

Event organizer indicate that the following has been completed:

- ☐ Completed application is due 70 days in advance of event.
- ☐ Route Map – Attached.
- ☐ Boston Township named as additional insured – attach certificate of insurance

Minimum requirement: \$1,000,000 per occurrence; \$2,000,000 aggregate

- ☐ Notification of Peninsula Police Department (330-657-2995). Traffic control to be determined by Police Chief.

Name of officer notified: _____ Date Notified: _____

- ☐ Notification of Valley Fire/EMS (330-657-2292)

Name of officer notified: _____ Date Notified: _____

Submit Form to:

Boston Township
P.O. Box 123
Peninsula, Ohio 44264

AmyZ1028@aol.com
330-657-2439
fax: 330-657-2493

www.bostontownship.org

NO PAINTING OF TOWNSHIP ROADS IS PERMITTED

REMOVE ALL TRASH WHEN THE EVENT IS OVER

This completed check list certifies I have complied with the Boston Township Bicycle, Motorcycle, Running, Jogging, Walking, and Events Policy:

_____/_____/_____
Event Organizer Signature, Title, Date

_____/_____/_____
Received by Boston Township/Official's Signature, Title, Date