

**Incorporated Village Of Westhampton Beach**  
**SPECIAL EVENT**  
**OUTDOOR SALES APPLICATION**

165 Mill Road  
Westhampton Beach, New York 11978  
Phone (631) 288-1654 Fax (631) 288-4332  
Email: [info@westhamptonbeach.org](mailto:info@westhamptonbeach.org)  
[www.westhamptonbeach.org](http://www.westhamptonbeach.org)

DATE: \_\_\_\_\_ PERMIT FEE \$150. \_\_\_\_\_

**APPLICATION REQUIREMENTS:**

**YOU ARE REQUIRED TO SUBMIT THE FOLLOWING:**

- (a) A numbered list of all goods you wish to display.**
- (b) Plans drawn to scale showing the placement of each numbered item from the list**

**FAILURE TO SUBMIT THE AFOREMNTIONED MATERIALS WILL RESULT IN AN INCOMPLETE APPLICATION AND WILL BE RETURNED TO APPLICANT.-**

**PART 1: SPONSORING ORGANIZATION INFORMATION**

*Property Location* \_\_\_\_\_  
*(If Using Village Property, separate Use of Village Property Application must be completed and \$100 fee paid)*

*Property Owner Name* \_\_\_\_\_

*Owner Mailing Address* \_\_\_\_\_

*Sponsoring Organization Name* \_\_\_\_\_

*Phone #: ( ) - \_\_\_\_\_ Cell # ( ) - \_\_\_\_\_*

*Contact Person* \_\_\_\_\_

*Organization Address* \_\_\_\_\_

*City, State, Zip Code* \_\_\_\_\_

**PART 2: DESCRIPTION OF ITEMS TO BE DISPLAYED** *(Include approximate size, color and any other information that will allow the Trustees to visualize the area with the items in place. Separate each item with a comma.)*

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**Certification by Applicant**

I/We are duly authorized representative(s) of the group or organization named in this application, have read and agreed to abide by the aforesaid rules.

\_\_\_\_\_  
Signature of Applicant or Representative

\_\_\_\_\_  
Print Name and Title

*Pursuant to Chapter 140-3 of the Village Code, Outdoor sales for special events shall be for a no greater period of time than two consecutive days, with provisions for inclement weather and subject to the approval of the Board of Trustees. \*\*\*\*No signs or advertisements are permitted in outdoor display areas.*

**SPACE BELOW IS FOR VILLAGE USE ONLY**

Date Application Received:		Application Approved	Disapproved	
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Village Departments to Be Notified:

Department:	Police	Fire	Public Works	Insurance Agent	Other	
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\_\_\_\_\_  
(Signature of Mayor or Mayor's Designee)

Date: \_\_\_\_\_

Approval of Village Board of Trustees (if necessary)

Date: \_\_\_\_\_

\_\_\_\_\_  
(Signature of Village Clerk)

Date: \_\_\_\_\_