



POS SALES RECEIPT

Receipt # 247241
 Payment Date: 08/27/24
 Household: 61940

Town of Babylon Parks and Recreation
 151 Phelps Lane
 North Babylon NY 11703
 Phone: (631)893-2100
 www.townofbabylon.com

Brian Belpanno
 P.O Box 611
 Lindenhurst NY 11757

Cell Ph: (631)226-4519

POS Ticket Details: 2024 Athletic Field Permit

		<u>New Fees</u>	<u>Total Fees</u>	<u>New Paid</u>	<u>Total Paid</u>	<u>Amount Due</u>
Quantity:	1	0.00	0.00	0.00	0.00	0.00
Family Member:	Brian Belpanno					
Ticket Numbers:	060					
Ticket Comments:	.					

Approved by: *ERG*

Date: *8/27/24*

Special Questions:

What Organization Is The Athletic Field Permit For? Lindenhurst little league soccer
 What field is being reserved? Venetian (G-3)
 What are the dates of the permit? Overall dates 8/26-12/1 Mon, Fri, Sun: 5pm-10pm, Wed: 7:30pm-10pm, Sat: 8am-5pm

Processed on 08/27/24 @ 8:28am by Cashier03

Total New Fees	0.00
Discount Applied	0.00
Total Due	0.00
Total Fees Paid	0.00
Total Paid	0.00

Household Balance Information

Overall Household Credit Balance Available 0.00
 Overall Household Balance Due 0.00

dm



Town of Babylon
 Department of Parks, Recreation & Cultural Affairs
 151 Phelps Lane, North Babylon, NY 11703

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Athletic Field Permit Application 2024

Application Requirements:

All documents and fee(s) must be returned to the address listed above.

1. Athletic Field Permit Application
2. Signed Rules and Regulations form
3. Proof of tax information, proving not-for-profit or for-profit status
4. Certificate of insurance for two (2) million-dollar liability naming the Town of Babylon additionally insured.
5. Rosters, Practice and Game Schedules
6. If applicable, non-refundable permit fee. *See fee schedule.* (Please make checks Payable to "Town of Babylon." **CASH NOT ACCEPTED.**)

League Information:

League: Lindenhurst Soccer League For Profit Not For Profit
 Organization Address: P.O. Box 611, Lindenhurst, NY 11757 Town: Lindenhurst
 League President's Name: Brian Belpanno Phone: 585 576 7471
 League President's Address: 209 33rd St Town: Lindenhurst
 League President's Email: belpanno@gmail.com

Field Request:

Sport/Activity: Soccer
 Park Requested: Venitian Shores Turf Specific Field Code: _____
 Overall Dates: From: 8/26/2024 To: 12/1/2024
 Opening Day: Date: 8/26/2024 Time: _____
 Rain Date: _____ Sound/Mic Requested: Y N

Office Use Only: Date Received: 8/20/24 Office Staff Initial: @

Rich Schaffer, Supervisor
 Antonio Martinez, Councilman
 Parks, Recreation & Cultural Affairs Committee

Eva Rodriguez-Greguski, Commissioner
 (631) 893-2100

Specific Dates/Times:

	Dates	Times	
Mondays:	8/26 10/14	Monday 5p-10p	✓
Tuesdays:			
Wednesdays:	8/28 10/2	Tuesday	X
Thursdays:		Wednesday 7:30p-10p	
Fridays:	8/30 10/2	Thursday	✓
Saturdays:	9/7 10/2	Friday	8a-4p
Sundays:	9/15, 10/27, 11/3, 11/10, 11/17	Saturday 8a-5p (9/7 exception end @ 3:30p)	✓
		Sunday 5p-10p	

It is within the policy of this town within the Town. Due to the nature of athletic organizations we cannot guarantee any organization will satisfy all requests.

The holder of a permit will be responsible for any person or property resulting from the use of the permit.

I HAVE READ THE RULES AND AGREE THAT BY SIGNING THIS PERMIT I WILL ABIDE BY THEM.

* Approved through email 8/26 @ 3:20pm *

League President's Signature: *[Signature]*

Date: 8/12/2024

Office Use Only:

Indicate date each item was received:

Permit Application: _____ Tax Documentation: _____

Insurance: _____ Rosters: _____

Practice/Game Schedules: _____ If applicable, Fee: _____

Signed Rules and Regulations: _____



Town of Babylon
Department of Parks, Recreation & Cultural Affairs
151 Phelps Lane, North Babylon, NY 11703

Athletic Field Permit Application 2024

Application Requirements:

All documents and fee(s) must be returned to the address listed above.

Applications must be submitted at least 2 months prior to league or team play.

Applications must include all of the following:

1. Athletic Field Permit Application
2. Signed Rules and Regulations form
3. Proof of tax information, proving not-for-profit or for-profit status
4. Certificate of insurance for two (2) million-dollar liability naming the Town of Babylon additionally insured.
5. Rosters, Practice and Game Schedules
6. If applicable, non-refundable permit fee. *See fee schedule.* (Please make checks Payable to "Town of Babylon." **CASH NOT ACCEPTED.**)

*Applications will not be approved until all items are submitted. *

Rules and Regulations

1. At least 75% of group's membership shall consist of Town residents. Groups whose membership does not conform to this provision, may request authorization under special conditions set forth by the Town.
2. Activities that are part of or an outgrowth of Town-sponsored programs shall take precedence over other applications. Groups will receive written authorization specifying dates and times field to be used and special arrangements.
3. Preference will be given to groups re-applying for the same dates and times slots as previous years, if application is submitted prior to the following seasonal due dates:

<u>SEASON DATES</u>	<u>APPLICATION DUE DATES</u>
(Winter) January 1 – March 31	November 1
(Spring) April 1 – June 30	February 1
(Summer) July 1 – September 20	May 1
(Fall) October 1 – December 31	August 1
4. To secure a permit the organization must provide insurance conforming to the following standard: Certificate of insurance for two (2) million-dollar liability naming the Town of Babylon additionally insured. The Certificate of insurance must contain the following language:
"Town of Babylon, its agents, employees and officers - additional Insured and Certificate Holder 200 E Sunrise Highway Lindenhurst, New York 11757"

Office Use Only: Date Received: _____

Office Staff Initial: _____

Rich Schaffer, Supervisor
Antonio Martinez, Councilman
Parks, Recreation & Cultural Affairs Committee

Eva Rodriguez-Greguski, Commissioner
(631) 893-2100

5. *DB* (initial) The Town of Babylon strives to provide safe facilities for all residents and visitors. This includes using bullying language or abusive behavior by coaches, players or spectators. Any instance of such behavior towards any player, coach or spectator may be subject to an immediate revocation of the permit. We are **committed** to an **all-inclusive** and **respectful** environment for **ALL**.
6. *DB* (initial) An approved permit obtained from the Parks & Recreation Department is valid only for your organization. **NO FIELD CAN BE SUB-LEASED. Unused portion of permit must be returned to the Town of Babylon. Violating this rule will result in immediate revocation of permit.**
7. *DB* (initial) Permit holders are entitled to a maximum of three (3) dates within every 12-week period. Any additional rain dates requests must receive approval from the Parks and Recreation Commissioner.
8. *DB* (initial) Gambling, use of profane language, alcoholic beverages and glass containers strictly prohibited.
9. No pets or other animals are allowed at any Town facility.
10. Vehicle parking is restricted to designated parking areas only.
11. Permit holder is responsible for damages caused by the group; this includes restroom facilities.
12. No private or personal gain is to be derived from the activity.
13. Food and drinks cannot be sold by anyone other than those with the proper vending permit.
14. Use of Town ballfields is prohibited during rain or inclement weather. Discretion should be used at all times.
15. *DB* (initial) No metal cleats allowed on any synthetic field.
16. *DB* (initial) The use of personal locks at any facility owned by the Town of Babylon is strictly prohibited. Non-compliance regarding this policy may lead to the revocation of the permit.
17. Public Safety (631-422-7600) must be notified whether any security problem or violation occurs or to cancel night games (where ballfield lights are required) due to inclement weather or for any other reason.
18. All ballfield lights will be turned off by 11:00 PM or otherwise posted.
19. No loitering in or around the parks and fields after the games.
20. Permit holders must:
 - a. Abide by all Town rules and regulations.
 - b. Submit a certificate of liability insurance for a minimum of **\$2,000,000**.
 - c. Submit complete team/league rosters (name, address and age) for all time slots requested.
 - d. Submit a complete schedule of league or team play including practices and games.
 - e. Submit, in writing, any requests of changes in an issued permit or any additional requests (other than that, which is stated in permit) at least 7 days in advance. Additional fees may be required.
 - f. Notify the Parks Department of any tournaments or special events being held.
 - g. Submit any changes of league presidents or representatives.
 - h. Defray any costs incurred by the Town due to the use of facilities within limits of the regulations and stipulated by the Town Board.

- i. Be responsible for general clean-up of the area after the completion of each practice or game.
- j. Provide the necessary nets and equipment at the organization's own expense.

**** The Town reserves the right to refuse or terminate permission to use Town facilities for any reason and to change these rules or regulations without advanced notice. ****

AUTHORIZATION AND ACCEPTANCE

I HAVE READ THE RULES AND REGULATIONS GOVERNING THE USE OF A TOWN SHOWMOBILE AND AGREE THAT BY MY SIGNATURE, AS WELL AS THE ORGANIZATION THAT I REPRESENT, WILL ABIDE BY THEM.

League President's Signature: 

Date: 8/12/2024



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
8/30/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER LIC #40558248 Player's Health Cover USA Inc. 718 Washington Ave North #402 Minneapolis MN 55401		CONTACT NAME: PHONE (A/C No, Ext): 612-345-9683 FAX (A/C, No): E-MAIL ADDRESS: certificates@playershealth.com	
INSURED Eastern New York Youth Soccer Association 167 Nassau Blvd. Garden City South NY 11530		INSURER(S) AFFORDING COVERAGE INSURER A: Everest National Insurance Company NAIC # 10120 INSURER B: Great American Insurance Company 16691 INSURER C: INSURER D: INSURER E: INSURER F:	

COVERAGES

CERTIFICATE NUMBER: 59445

REVISION NUMBER: 8


THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input checked="" type="checkbox"/> OTHER: PER EVENT	Y		S18ML02684-231	9/1/2023	9/1/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ EXCLUDED PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 5,000,000 PRODUCTS - COMP/OP AGG PARTICIPANT LEGAL LIAB \$ 1,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY			S18ML02684-231	9/1/2023	9/1/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB DED RETENTION \$ 0			S18EX02099-231	9/1/2023	9/1/2024	<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
B	Accident Medical			BSRE758936-01	9/1/2023	9/1/2024	PER INJURY LIMIT \$ 200,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate Holder is Additional Insured as required by written agreement per policy endorsement ECG 20 600 05 09. Coverage applies only to official, sanctioned & approved activities of ENYSSA. Coverage is primary & non-contributory when required by written contract or agreement. This certificate is issued on behalf of: LIJSL /Lindenhurst SC

CERTIFICATE HOLDER**CANCELLATION**

Venetian Shores Park Venetian Blvd & Granada Pkway Lindenhurst NY 11757	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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