



ATHLETIC FIELD PERMIT APPLICATION

Baseball, Basketball, Softball, Football, Soccer, Cricket, Lacrosse, Tennis

Season	Field Usage Dates	Application Submission Period
Spring	March 20 — June 20	January 16 — January 30
Summer	June 21 – September 4	April 24 — May 8
Fall	September 5 — December 18	July 24 — August 7

**Please do not call for availability
during the application submission period.**

PRIORITY GROUPS – Processed in order of priority from #1 to #4

Priority #1: County of Essex Vocational Schools

Priority #2: Essex County Municipalities, Public Schools and Private schools

Priority #3: Youth Sports groups

Priority #4: Adult Organizations

Athletic Field Permit Fees per Block of Time (BOT) Additional time will be pro-rated.		
Type of Fields	Youth Organizations Fee (17 or younger)	Adults Organizations Fee
Non-Lighted Grass Field	\$15.00	\$50.00
Non-Lighted Turf Field	\$45.00	\$125.00
Lighted Turf Field	\$70.00	\$165.00

If you are looking to obtain a permit for an **ATHLETIC TOURNAMENT, you must fill out a **SPECIAL EVENT APPLICATION**.**

PROCESSING OF APPLICATIONS

- All applications must be mailed, faxed, or hand delivered within the application submission period set forth above. Please allow 2 weeks after the end of the application submission period for approval of any dates.
- Return completed Athletic Field Application (PAGE 3 & xc4 ONLY) to:
Essex County Department of Parks, Recreation & Cultural Affairs
c/o Permit Unit, 115 Clifton Avenue, Newark, New Jersey 07104
- Applications that do not coincide with the above designated dates and or block of time (BOT) time slots, will be considered incomplete and will be returned.
- Each block of time (BOT) is allocated for up to 3 hours. BOT slots are not guaranteed and at the discretion of the Director, may be changed based on field restrictions/needs.
- Field applications will continue to be accepted after the application period deadline as non-priority submissions.
- The Permit Unit will not research or finalize any dates over the phone unless an application has been received.
- Permits will be issued based on field/space availability after all priority applications have been reviewed and processed.
- A submitted application does not guarantee you a permit. All requests are not guaranteed until you receive an Essex County permit.
- Insurance certificate must be submitted after the approval of application.



COUNTY OF ESSEX DEPARTMENT OF PARKS, RECREATION
AND CULTURAL AFFAIRS

115 CLIFTON AVENUE, NEWARK, NJ 07104
(973) 268-3500 Email: Permits@parks.essexcountynj.org

www.essexcountyparks.org



ATHLETIC PERMIT RULES AND REGULATIONS

- Permit holder is responsible for disposing of trash in dugout, field, and surrounding areas prior to the end of the permitted time slot. Failure to do so will result in a fine.
- No food is permitted on the field area, including sunflower seeds and gum.
- Permit holder is responsible for ensuring that all attendee's parking is in designated areas only, and not on grassy lawns or walkways.
- All previous fees must be paid in full prior to athletic play/day of field usage for a permit to be issued.
- During specific seasons and or special events parks may be closed to vehicular traffic. All attendees will be responsible for their own on street vehicular parking.
- **Prohibited: ALL ALCOHOLIC BEVERAGES**, glass, containers and bottles.
- Original permit holders must take full responsibility for transferred permit(s).
- **NO METAL SPIKES** allowed on any artificial turf fields.
- Allow at least 2 weeks' field preparation of soccer and football fields after Labor Day.
- The permitted area may be unavailable for an event or a portion thereof because of fire, flood or other emergency over which the park has no control. The Department of Parks because of emergency may find it necessary to cancel, postpone or move the field location. The County of Essex and its agents shall not be liable to indemnify or reimburse the permit holder for any damage or loss arising because of such an emergency action.
- **INSURANCE IS REQUIRED:** Please attach a Certificate of Insurance evidencing general liability of at least \$1,000,000 per occurrence/\$3,000,000 aggregate and naming Essex County as an additional insured. Applicant hereby indemnifies and holds the County harmless from all liability, claims, actions and costs that may arise with the Special Event for which a permit may be granted. The Certificate holder box shall be identified as: **County of Essex**

465 Dr. Martin Luther King Jr Blvd.

Newark, NJ 07102

- No Permits will be issued if insurance is not received.
- Inclement Weather Policy: If a permit was not used due to rain or inclement weather, the permit holder **MUST** notify the Permit Unit within 2 business days of the permit usage date. The Permit Unit will issue a new date, field location and BOT within the same year and season of the unused permit.
- Restroom coverage and opening of locked fields. For dates and fields that do not have building attendants, Permit holders must request coverage 7 days in advance and additional fees will apply. The permit holder must pay for building personnel to open and close any field that is locked.
- **FAILURE** to comply with these rules and regulations and any instructions or directives from Essex County employees and officials may result in a fine and or revocation of your permit/and or forfeiture of payment. Repeated failures will result in permanent denial of permits.



~ATHLETIC PERMIT FIELD APPLICATION~

Organization Name: _____ Profit: Non-Profit:

Organization Address (If applicable): _____

Contact Person Name: _____

Contact Mailing Address: _____

Organization Tel #: _____ Contact #: _____ Contact Cell#: _____ Email: _____

Type of Athletic Activity: _____ (Check One) Youth Adults

League/Association: _____ # of Teams _____ # of Players _____

of Spectators Anticipated During Games: _____ Team/League Entry Fee (If any): _____

Request Single or Multiple Dates, Times and Day of Week. 1 BOT Will Consist of Three 3 Hours (or any portion of)											
Dates- Month/Day /Year	Time - Check One				Day of Week: Mon-Sun – Circle One						
_____	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
_____	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
_____	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
_____	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
_____	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S

**Please complete the following information with the name of requested park.
–If more room is necessary please attach the additional 4th page for multiple dates-**

1st Choice Park: _____ 2nd Choice Park: _____ Field Preferred: _____

My signature attests that my Team/League is properly insured, and I waive Essex County of any responsibility. I am the person responsible for this activity. The applicant by his or her signature certifies that: All the information given is complete and correct, and that no false or misleading information, or false statements have been given. Giving false information or making false statements, in connection with this permit application may constitute a criminal violation. Violations will be the basis for denial or revocation of a permit and may result in criminal prosecution. The attached rules and regulations for permit approval and all rules and regulations governing the use of the Essex County Parks System have been read, are understood, and will be fully complied with by applicant and attendees.

Applicant's Signature: _____ Date: _____

Insurance Company: _____ Policy#: _____

Acknowledgement of Rules and Regulations

I acknowledge that I have read and understand the rules and regulations provided with this document.

Applicant Signature: _____ Date: _____

Return application to: County of Essex Parks, Recreation & Historical Affairs, c/o Permit Unit, 115 Clifton Ave, Newark, NJ 07104

DO NOT WRITE BELOW THIS LINE



**COUNTY OF ESSEX DEPARTMENT OF PARKS, RECREATION
 AND CULTURAL AFFAIRS
 115 CLIFTON AVENUE, NEWARK, NJ 07104
 (973) 268-3500 Email: Permits@parks.essexcountynj.org
www.essexcountyparks.org**



Date Received: _____ Cash _____ Check #: _____ Amount: \$ _____

****If dates requested is not accurately filled out. Processing of application will be delayed****

Request Single or Multiple Dates, Times and Day of Week. 1 BOT Will Consist of Three 3 Hours (or any portion of)

Dates- Month/Day /Year	Time - Check One				Day of Week: Mon-Sun – Circle One						
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S
	9AM-12PM <input type="checkbox"/>	12-3PM <input type="checkbox"/>	3-6PM <input type="checkbox"/>	6-9PM <input type="checkbox"/>	M	T	W	T	F	S	S