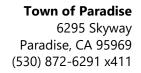




PARADE PERMIT APPLICATION (ROAD OR TRAILWAY CLOSURE/USAGE)

(Must be submitted for approval at least 15 days prior to date of event)

Date Submitted:	Date of Event:
Name of Parade	
Name of Applicant	
Applicant's Telephone Number (Hor	me, Work, Cell)
Applicant's Email Address(s)	
Name of Organization	
Coordinator Telephone Number (Ho	ome, Work, Cell)
Coordinator's Email Address(s)	
Describe the Event:	
Requested Location of Parade, Road Boundaries specifically described:	l or Trailway Closure/Usage with Streets and
	Entries, if applicable
	ending the Parade/Event





Staging Area? Where and what time will assembly begin	
Start Time (Road Closure	e) End Time (Road Closure
Parade Route – (Closure)	
End Location	
Minimum Speed of Entrie	es Maximum Speed of Entries
Maximum Space between	Entries
Will the entire street(s) be	e used curb to curb: YES () NO ()
Explain, if necessary	
charged as determined by	,
Total Fee \$	Received on(Date)
to the Police Chief for eva will sign it, the Town Man Release Agreement will be Certificate (specific insura	rade Permit Event Application, the Permit will be routed luation and approval. If approved by the Police Chief, he tager will then sign the Permit, Indemnification and excreated and signed by all parties, required Insurance ance requirements attached) will be received by the Town, ollected, if the staffing fees are deemed necessary.
Signature of Applicant	Town Manager:
Police Chief:	Town Engineer (Road Closure):