

This application must be filed with the Chief of Police no later than thirty (30) days prior to the start of this activity. The Chief of Police has the authority to ask for any additional information he finds necessary to make a fair determination as to whether a permit for such parade or demonstration may be issued. The Chief of Police also has the authority, where good cause is shown, to consider any application for a parade or demonstration that is filed less than thirty (30) days before the date of the proposed event.

DATE OF EVENT:	E OF EVENT: EVENT TITLE:								
PURPOSE OR NATURE OF PAR	ADE/DEMONSTRATION	:							
ASSEMBLY TIME:	START TIME:	DISBANDING TIME:							
EVENT SPONSOR (group, orga NAME:		PHONE NU	IMBER:						
PHYSICAL ADDRESS:									
(Number)	(Street)	(City)	(State)	(Zip)					
MAILING ADDRESS:									
(Number) APPROXIMATE NUMBER OF P	(Street) ERSONS PARTICIPATING		(State)						
WILL THERE BE ANIMALS?	YESNO	NUMBER AND TYPE:							
NUMBER OF MOTORIZED VEHICLES/FLOATS:									
MAXIMUM DIMENSIONS OF VEHICLES/FLOATS:									
DISTANCE TO BE MAINTAINED BETWEEN VEHICLES:									
EVENT ROUTE OR LOCATION (Please attach a map of the route) WHERE WILL UNITS ASSEMBLE/PARK FOR EVENT:									
WHERE WILL EVENT START:									
WHERE WILL EVENT END:									
WILL AMPLIFIED SOUND BE USED: YES NO									
IF YES, PLEASE DESCRIBE:									
WILL SECURITY BE PROVIDED: YES NO									
IF YES, PLEASE DESCRIBE:									
WILL CITY SERVICES BE REQUI	RED: YES	NO	·						
IF YES, PI FASE DESCRIBE:									

WILL STREET CLOSURE BE REQUIRED: YES NO								
IF YES, PLEASE DESCRIBE:								
APPLICANT INFORMATION:								
NAME:			PHONE NUMBER:					
PHYSICAL ADDRESS:								
	(Number)	(Street)		(City)	(State)	(Zip)		
MAILING ADDRESS:								
	(Number)	(Street)		(City)	(State)	(Zip)		
DRIVERS LICENSE:								

If the event is designed to be held by, and on behalf of or for, any person other than the applicant, the applicant for such permit shall file with the Chief of Police a communication in writing from the person proposing to hold the event, authorizing the applicant to apply for the permit on his behalf.

I, the undersigned applicant, hereby affirm that the information contained in the application is true and correct to the best of my knowledge. I understand that any false or misleading statement in the application is grounds for denial of a permit, or if one has already been issued, grounds for its revocation. I also understand that I am responsible for compliance with all applicable laws and any other requirements set forth for this issuance of this permit.

Date	Appli	icant's Signature	
ACTION TAKEN BY POLICE CHIE	F: Approve	ed Denied	
If denied, reason for denial:			
Date	Chi	ef of Police	
APPLICANT NOTIFIED:			
Date	Method	Ву	