



# APPLICATION FOR ROAD USE SPECIAL EVENTS PERMIT

Application No.

(Please Print)

Name of Event:		
Sponsoring Organization:		
Applicant's Name:		
Mailing Address:		
City:		Postal Code:
Telephone No.:	Fax No.:	e-mail address:

<input type="checkbox"/> Parade	<input type="checkbox"/> Running Event	<input type="checkbox"/> Other _____
<input type="checkbox"/> Street Festivities	<input type="checkbox"/> Procession	Date of Event: _____
<input type="checkbox"/> Filming	<input type="checkbox"/> Walk-a-Thon	Scheduled Start: _____
<input type="checkbox"/> Bicycle Race/Tour	<input type="checkbox"/> Sidewalk Sale	Scheduled Finish: _____
		Number of Participants: _____

Route (Provide Map) :	
Assembly Area:	Disbanding Area:

Participants:	Bands:	Cars:	Animals:
Floats:	(Max. Length):	(Max. Width):	(Max. Height):
Parade Marshals:		Other(s):	

Garbage Containers :	Public Washrooms :	
Electrical Power :		
T.V. :	Security :	Stage Required :
Bleachers Required :		Security :
Other :		

Comments :

**I/WE HEREBY AGREE TO THE FOLLOWING CONDITIONS:**

1. To save the City of Niagara Falls harmless from any and all claims and/or damages arising out of this road closing and to provide any bond or insurance which may be required in this regard.
2. To be responsible for any and all costs to provide and maintain sufficient traffic control measure to ensure safety for the traveling public and participants.

**PLEASE NOTE :** This permit is valid only for roads/allowances under the jurisdiction of the City of Niagara Falls. Other permits may be necessary pending the event location.

\_\_\_\_\_  
**APPLICANTS SIGNATURE**

Yellow copy - applicant

\_\_\_\_\_  
**DATE OF APPLICATION**