

OFFICE USE:

Date: _____

Check # _____

FEE \$25.00

By: _____

**Must be submitted minimum of 45 days prior to event*



Application for Special Event

Type of Event: Parade Run/Walk Other: _____

Name of Event: _____

Name of Sponsoring Organization: _____

Address: _____

Contact Person: _____

Phone Number: _____ Email: _____

Date of Event: _____

Time Event Assembles: _____ Event Start: _____ End: _____

Specific Location of Event (Streets/Area): _____

Expected Number of Participants: _____ Spectators: _____ Vehicles: _____

Other details: _____

Secondary Contact Name: _____

Secondary Contact Phone Number: _____

A map and/or route of the Event MUST be attached – including details of the layout

The City of Lodi reserves the right to approve, modify or deny requests for the Event that may compromise public safety. The City of Lodi assumes no liability as a result of any Event actions and/or activities.

Applicant Certification:

I understand that I am responsible to mail/deliver notifications of the event to residents and/or businesses that will be impacted at least 1 week in advance of the event.

I understand that I am responsible for the set up and the removal of all personal property utilized for the event.

I understand that a one million dollar insurance certificate may be required and, if so, must be attached naming the City of Lodi as an additional insured.

I understand that additional permits for food, alcohol, tents or direct selling may be required to comply with City of Lodi municipal code and/or Columbia County regulations.

I hereby certify that the foregoing facts concerning this Special Event are true to the best of my knowledge.

Applicant Signature

Date



INTERNAL USE

Reviewed by Director of Operations

Reviewed by Chief of Police

Consideration of Common Council - Date: _____ Approve Deny

Special Conditions to Note: _____

Map/Route Enclosure Required