

VILLAGE OF PALMYRA SPECIAL EVENT PERMIT

NAME: _____

NAME OF ORGANIZATION HOSTING EVENT: _____

NAME OF EVENT: _____

LOCATION OF EVENT: _____

DATE(S) OF EVENT: _____ START TIME: _____
END TIME: _____

WILL THE EVENT REQUIRE A STREET CLOSURE? _____
YES NO

IF YES, WHAT *STREET(S) NEED TO BE CLOSED? _____
STREET NAME(S)

*Please note STH 59 and 106 require State DOT approval: request application at Village Clerk's Office

STREET BARICADES OR CONES REQUIRED? _____
YES NO

EXTRA POLICE OFFICER (S) FOR SECURITY OR TRAFFIC CONTROL? _____
YES NO

**WILL ALCOHOL BE SERVED AT THE EVENT? _____
**Note: proper licenses may be required YES NO

SIGNED: _____ DATE: _____

STAFF ONLY-DO NOT WRITE BELOW THIS LINE

Approved by: _____ Date: _____

Copies Distributed to:
-Public Works Director -Fire Chief
-Public Safety Director -Police Sergeant