CITY OF SYLVANIA 6730 Monroe St. Sylvania, Ohio 43560

PARADE, FESTIVAL, EVENT or ASSEMBLY APPLICATION [SMC: 311.02, 705.04, 1519.02]

Applicant name (group or org	anization:			
Address:				
Phone number: ()	Number	r of participants	expected:	
Event contact person:		Phone number: ()		
Type of event: [] parade [] running-biking []	assembly []	other	
Brief description of event:				
Reason for event:				<u></u>
Location of event:				
Event date(s):	Start time:	am/pm	End time:	am/pm
Rain date(s):	Start time:	am/pm	End time:	am/pm
Note: If this event will use any $8\frac{1}{2}$ x 11 piece of paper with a constant.				
Participant Registration Form and traffic will be maintained". coordinator for a period of two	The signed Participant Re	egistration Form ent and be availa	ns must be kept by table to the city.	
You must attach to this application number, amount of coverage and insurance requirements depend or	the provision that the City of	of Sylvania is inc		
The applicant hereby agrees to sa damage growing out of the perm		vania, Ohio harm	less from any and al	l liability or
Applicant signature:			Date:	
Address:			Phone <u>:()</u>	ANALYS CONTRACTOR OF THE PROPERTY OF THE PROPE
Parade, Festival, Event or Asse Conditions required for your event:	embly Permit – the below info	rmation and appro	val to be completed by t	the Safety Director
Permit Fee \$ Make check payable to: <u>City of S</u>	, non-refundable and l ' <u>vlvania</u> . Deliver to: Safety I			
	f Public Safety d: [] check [] cash-reco	Date cipt issued Date		

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PARADE, FESTIVAL, EVENT or ASSEMBLY APPLICATION

This page must be completed and submitted with your application.

licant name (group or organization):		
tact person:	Phone number:	()
you request any streets to be closed to traffice -If "yes", please provide a drawing or map	c for your event? [] yes [] p identifying the streets and clo	no osure locations.
e streets are not closed, can your event still	take place? [] yes [] no	,
y street is to be closed, when can the street	be reopened? Date	Time: am/pm
our event is a parade, types of groups that w	ill be in your parade:	
our event is a parade, list the total number of	f groups in your parade to dete	rmine time and length:
arking on the event streets, traffic control, s	ecurity, assistance with event p	
other requests or special instructions for yo	our event? Describe in detail:	
ed event route or location. Your application. If your event requires a Permit Feaur Permit Fee, payable to the <i>City of Sylv</i> , a, Ohio 43560. If your event is assessed a rmit Fee is received. If you have any que 4-0482.	on cannot be considered with a to be assessed you will be no ania, to: Director of Public States Permit Fee your application estions, please call the office of	nout this required otified. You can bring or Safety, 6730 Monroe St., I cannot be approved until of the Safety Director at
	you request any streets to be closed to traffice -If "yes", please provide a drawing or maje e streets are not closed, can your event still you require the streets to be closed in advanting and time and the and time and	licant name (group or organization): tact person: Phone number: you request any streets to be closed to traffic for your event? [] yes [] -If "yes", please provide a drawing or map identifying the streets and close e streets are not closed, can your event still take place? [] yes [] no you require the streets to be closed in advance of the event for "set-up" pur-If "yes", Date: and time: and time: and pm require the streets to be closed in advance of the event for "set-up" pur-If "yes", Date: and time: and time: and pm require the streets of groups that will be in your parade: but event is a parade, types of groups that will be in your parade: but event is a parade, list the total number of groups in your parade to deter your event require any equipment, resources or assistance from the city starking on the event streets, traffic control, security, assistance with event for "yes", please describe your requirements in detail: If there be any type of alcoholic beverages at your event? [] yes [] no lif "yes", please give details. There are city ordinances restricting the use of the page your Insurance Certificate and, if applicable, your map of devent route or location. Your application cannot be considered with a total in the page your requires a Permit Fee to be assessed you will be not ur Permit Fee, payable to the City of Sylvania, to: Director of Public 1a, Ohio 43560. If your event is assessed a Permit Fee your application trmit Fee is received. If you have any questions, please call the office of 10482. Page - 2



DOWNTOWN ELECTRICAL USE PERMIT

EVENT: ____

DATE:
ORGANIZATION INFORMATION:
NAME:
ADDRESS:
TELEPHONE:
E-MAIL:
SIGNATURE:
The fee for using electricity for downtown Sylvania events will be <u>\$200.00</u> . Checks should be made payable to City of Sylvania and must be received prior to the permit for the event being issued.
The City of Sylvania Zoning Administrator will contact the person designated by the applying organization to coordinate the use of electric power on the day of the event.
<u>Parade, Festival, Event or Assembly Permit For Electricity Use</u> – the below information and approval to be completed by the Safety Director Conditions required for your event:
Permit Fee \$
Approved Date
Director of Public Safety Permit Fee received: [] check [] cash-receipt issued Date