



City of Meadville
Office of City Clerk

894 Diamond Park
Meadville, PA 16335
Phone: 814-724-6000 Fax: 814-333-3353
dcrowe@cityofmeadville.org

RACE & PARADE PERMIT APPLICATION

All applications for permits should be received by the City Clerk’s Office not less than **60 days** prior to the event date. For list of applicable fees, please refer to the last page of this application.

Pursuant to Ordinance No. 3651 of 2008

PLEASE PRINT CLEARLY

Name of Race/Parade: _____

Purpose of Race/Parade: _____

Type of Race: Bicycle Race 5K Parade
 Other (specify): _____

Applicant’s Name: _____

Event Sponsor or Organization: _____

Contact Person (if different than above): _____

Applicant/Contact Phone No.: _____ Email Address: _____

Organization Address: _____
Street City State Zip Code

Organization Phone Number: _____

On-Site Event Contact: _____ Phone: _____

NOTE: Any race must use the attached route, approved by the City.

Estimated Attendance: _____ Estimated # of Parade Units: _____

Event Date(s): _____

Event Times:

Event Start		Event End	
Setup		Cleanup Complete	

Setup Needs:

Street Closure(s) – Please indicate the specific streets to be closed: _____

Requested time of street closing: _____ Number of affected intersections: _____

Use of Barricades and/or Traffic Cones – Please indicate locations on attached map

If yes, please indicate the number of barricades and/or cones needed: _____

Use of Meter Bags – Please indicate locations: _____

Special Parking Restrictions – Please specify the type of restrictions needed: _____

Auxiliary Police for Traffic Control (*use of Auxiliary Police is at the discretion of the Chief of Police*)

Use of Diamond Park Gazebo (*electricity included in fee for Gazebo use*)

Electric Service be needed?

Other (provide specific details): _____

NOTE: If street closings, traffic control, barricades, etc. are required for your event, a coordination meeting between City Departments and the Event Organizer(s) will be scheduled approximately two weeks prior to the event.

Is there entertainment related to the event? Yes No

Type of Entertainment: Theatrical Performance Musical Performance DJ

Other (specify) _____

Will the event include the use of amplified sound? Yes No

If yes, please list the approximate time of use: _____

NOTE: No amplified sound may be used at the Diamond during the hours of 8:00 a.m. – 12:00 noon or 1:00 p.m. – 5:00 p.m., Monday – Friday except for holidays.

Will the event include use of firework devices or recreational bonfire? Yes No

NOTE: Use of firework devices or recreational bonfires requires a separate permit & regulations.

Will the event include the use of any signs, banners, and/or other decorations on site? Yes No

If so, please describe the nature of the signs, banners, and/or decorations:

Please provide a detailed plan for the collection and removal of refuse/debris during and following the event:

Required Attachments:

1. Site Diagram: A detailed depiction of the proposed event’s layout, including the number and location of any tents, booths, tables, stages, fences, waste receptacles, signage, portable restrooms, public safety access points, event headquarters, barricade locations, vendors, and all other event equipment. **NOTE: The City reserves the right to determine location and limit number of structures used.**
2. A detailed event description including all aspects of the proposed event, such as purpose, schedule of events, logistics, proposed activities, etc.
3. Parade/Race Route Map (if applicable): A detailed map of the route to be traveled, barricade locations, start and finish points, direction of movement, dispersal area, line-up area, and any other relevant route information.
4. Certificate of Liability Insurance in the amount of \$1 million with the City of Meadville listed as an additional insured.

Declaration

1. *I hereby certify that I am an authorized agent of the organization (the Applicant) and that I am authorized to make an application on their behalf.*
2. *I have received and read the Race & Parade Permit Policies and Procedures and agree that the Applicant will abide by these and all other applicable City, State, and Federal Regulations.*
3. *I have included all the mandatory attachments and required fees with this application.*
4. *The information contained in this application and its attachment(s) are true and correct to the best of my knowledge.*
5. *I and the Applicant agree to hold harmless the City of Meadville and its agents and employees from suits, claims, damages, personal injuries, and loss or damage property sustained during the period of setup, execution, and tear down of this event. Furthermore, Applicant assumes all liability for damages or injury occurring to any person or property through or in consequence of any act or omission of anyone associated with this event, and agrees to hold harmless, defend, and indemnify the City of Meadville and its agents and employees from any suits, claims, damages, personal injuries, losses, or damaged property arising from negligence, recklessness, or intentional conduct of Applicant’s agents or employees.*

IMPORTANT NOTE: ABSOLUTELY NO EVENT ADVERTISING MAY BE DONE PRIOR TO RECEIVING OFFICIAL NOTIFICATION FROM THE CITY OF APPROVAL.

Applicant Signature: _____ **Date:** _____

For Office Use Only

Application Received: _____ Insurance Certificate Rec'd: _____

To Departments: _____ To City Manager: _____

Department	Signature of Approval
Public Works	
Police	
Fire	
City Manager	

Permit Granted Date: _____ Permit Denied Date: _____

Permit Issue Date: _____ Mail Email In-Person

Signature: _____

Print Name & Title: _____

The Permit is Granted with the following Conditions:

The Permit is Denied for Following Reasons:

RACE & PARADE PERMIT FEES – OFFICE USE ONLY

	<i>Service Requested</i>	<i>Fee</i>	<i>Paid</i>
<input type="checkbox"/>	Race & Parade Permit/Application <i>*includes use of barricades, electricity (if needed), and Diamond Park Gazebo (if needed)</i>	\$300*	_____
<input type="checkbox"/>	Auxiliary Police	Donation	_____
	Total Fee Amount:	\$_____	

Payment Method: Cash Check Credit Card

Amount Paid: _____ **Initials:** _____ **Date:** _____