

La Grande Police Department
APPLICATION FOR SPECIAL EVENT PERMIT

1. **EVENT INFORMATION:**

Date of Event: _____
Type of Event: _____
Time of Event: Beginning: _____ Ending: _____
Food/Beverages Served: Yes _____ No _____
Alcoholic Beverages Served (permit required): Yes _____ No _____ Hours: _____
Amplified Music/Sounds: (permit required after 10 pm) Yes _____ No _____ Hours: _____

Note: Appropriate insurance must be secured including general liability and liquor liability (if applicable) that is acceptable to the City of La Grande.

If setting up in one or more fixed locations, give address and description of location(s):

If moving, proposed route including assembly point and disassembly point (include a map of the route):

Participants: _____ Number of Persons: _____ Vehicles: _____ Animals: _____

2. **APPLICANT INFORMATION:**

Name of Applicant: _____ Phone: _____
Address of Applicant: _____
Name of Event Coordinator: _____ Phone: _____
Name of Organization: _____

Applicant/Coordinator Signature

Date

3. **APPROVED BY:**

Chief of Police /Designee

Date

Recommended changes by Chief of Police/Designee:

c: Watch Log
City Planner
City Manager
Date Routed: _____

9-1-1 Center
Fire Chief
Public Works Street Superintendent

Economic Development
Shift Sergeant

By: _____

*Note: Major events may require more comprehensive information and a meeting with the Police Department.