

Village of Monroeville
PARADE / EVENT / STREET CLOSING PERMIT

Today's Date: _____

Organization/Person requesting permit: _____

Purpose of street closing or parade (homecoming, march, festival, etc.) _____

Contact Person: _____

Address: _____

Phone # (cell) _____ (work) _____ (home) _____

Proposed date and time of parade / event / street closing: _____

Staging area and contact person at staging area: _____

Proposed parade / march route: _____

Where, if applicable, will parade cross any railroad tracks: _____

Approximate number of participants and their average age: _____

Approximate number of floats and/or vehicles, if any: _____

Will there be any activities at the end of the route which may require traffic control? Yes _____ No _____

If Yes, where? _____

Alternate date of parade / event in case of cancellation: _____

**For street closings, at what intersections will the street be closed? _____

(Requires an attached drawing of the proposed blocked off area)

Signature of Applicant

THIS REQUEST IS: _____ **APPROVED** _____ **NOT APPROVED**

cc: FIRE DEPT.
STREET DEPT.
EMS
COUNCIL

CHIEF OF POLICE