

## City of Gluckstadt Special Event Permit Application

Barry Hale - Chief of Police

769-567-2306

Gluckstadtms.org

Email completed application to:

Barry.hale@Gluckstadt.net

## City of Gluckstadt | Special Event Permit Application

Applicant Name:	Phone #:	
Street Address:	City/State/Zip:	
Email Address:		
Applicant is (check all that apply):   Event Organiz	er 🔾 On-Site Emergency Contact 🔾 Organization Representative	
Organization Information:	pplicant	
Organization:	Phone #:	
Street Address:	City/State/Zip:	
Email Address:		
Individ	ual 🔾 Other	
	ual  Other	
Event Information:	ual  Other Time of Event:	
Event Information:  Event Name:	Time of Event:	
Event Information:  Event Name:	Time of Event:	
Event Information:  Event Name:  Event Location:  Date of Event:	Time of Event:	
Event Information:  Event Name:  Event Location:  Date of Event:  Type of Event (Select all that apply):	Time of Event:	
Event Information:  Event Name:  Event Location:  Date of Event:  Type of Event (Select all that apply):  Parade Run/Walk Assembly/Rally Sp	Time of Event: Approximate attendance:	

Received Date:

The following conditions must be met and agreed to:

- 1. The flow of vehicular and/or pedestrian traffic must not be interfered with.
- 2. Private businesses must not be interfered with.
- 3. No trespassing on private property.
- 4. No violent or noisy conduct will be permitted.
- 5. No candy, trinkets or other favors will be thrown from any float or group in a parade.
- 6. Grantee whose signature appears below accepts full and complete responsibility for the actions and conduct of each and every member of this activity.

P	rint Name		
Sigr	nature of Grantee of Permit		Date of Application
contingent on ins	nclude any special electrical wiring, mechan pection and approval of the Gluckstadt Buil	ding Department: 🔘 No	
Inspector:	Date:		
	nclude any fireworks, this permit is issued co Not Applicable () Approved () Denied Insp	-	
	nclude the discharge of any types of weapon iluckstadt Police Department:	•	
	Date:		
Permit Appr	oved () Permit Denied Reason: _		
Signature:	Chief of Police	Date:	
Signature:		Date:	
	City Clerk		<del></del>
Signature:		Date:	<u></u>
	Public Works Director		
Signature:		Date:	
	Planning and Zoning Administrator		
Signature:		Date:	

COPY OF PERMIT MUST BE ON THE PERSON OF THE GRANTEE AT ALL TIMES DURING THE EVENT AND AVAILABLE FOR INSPECTION UPON REQUEST BY ANY OFFICER OF THE CITY OF GLUCKSTADT.

IF THE PERMIT IS FOR MULTIPLE DAYS, A NEW PERMIT MUST BE ISSUED EACH DAY OF THE EVENT PRIOR TO THE EVENT COMMENCING.