CITY OF ITHACA

129 West Emerson Street
Ithaca, Michigan 48847
(989) 875-3200

PARADE PERMIT APPLICATION

Together with any supplementary information as may be required by the City of Ithaca, this form must be filed with the Department of Public Works, **not more than sixty (60) days nor less than fourteen (14)** days, prior to the parade date to ensure proper processing. The permit shall be issued after the following departments have checked over the date, time, and route of said parade:

Department representative should initial by their department and make a copy of any documentation they require.

[ ] POLICE   **[ ] FIRE**   **[ ] DPW/TRAFFIC**   **[ ] CITY MANAGER**

PLEASE TYPE OR <u>PRINT</u> ALL INFORMATION. THANK YOU.

1. **NAME OF PARADE:**_____

2. **PARADE MARSHALL:**_____

3. **ORGANIZATIONS SPONSORING THE PARADE:**

    Organization Name:_____

    Mailing Address: _____

    Telephone Number: _____-_____-_____ ext_____

    Principle Contact: _____

4. **PERSON IN CHARGE OF THE DAY OF THE PARADE:**

    Name:_____

    Title: _____

    Mailing Address: _____

    Telephone Number: _____-_____-_____ ext_____

5. **PARADE DETAIL INFORMATION:**

    Parade Date: _____,____ 20____

    Assembly Time: _____(am / pm)   Parade Start Time: _____(am / pm)

    Assembly Location:_____

    Parade End Time: _____ (am / pm)

    Disbursement Location: _____

    Disbursement to be Completed By (approximate time): _____ (am / pm)

6. NUMBER OF UNITS/PARADE PARTICIPANTS:

_____ Individuals / Groups on Foot

_____ Marching Bands

_____ Motor Driven (including politicians, fire, police, antique, etc.)

_____ Animals

_____ Any Other (Explain) _____

7. IN YOUR BEST ESTIMATION, PLEASE ANSWER THE FOLLOWING:

What portion of the streets traversed will be occupied by the parade?_____

What interval of space will be maintained between units of the parade? _____

How long will it take the parade to clear the broadest intersection? _____

8. ARRANGEMENTS FOR DISPOSAL OF CONBUSTIBLE MATERIAL: _____

_____

_____

9. VERIFICATION STATEMENT

I verify that I am an authorized representative of the organization specified in Item #3 and that, as such, I have the power to execute this application on their behalf.*** All of the above statements are true to the best of my knowledge, information, and belief. All questions have been answered completely and, if any change in fact or method occurs subsequent to the date of this application, or the issuance of the parade permit, the applicant will notify the City of Ithaca in writing within twenty-four (24) hours of said change.

Application Prepared By: _____ Title: _____

Signature: _____ Phone: ____-____-_____ ext _____

Mailing Address: _____

10. ATTACHMENTS:

☐ Yes ☐ No Map showing Parade Start / Route / End clearly marked.

☐ Yes ☐ No *Written permission for assembly from property owner if on private property.

☐ Yes ☐ No ** Written permission for disbursement from property owner if on private property.

☐ Yes ☐ No *** Written authorization from the person/organization the parade is being held on behalf of if the parade is being held on behalf of a person or organization other than the organization specified in Item #3.

Date Submitted:_____

Department Head Review/Approval:

CITY MANAGER: □Yes   □No

    Conditions/Comments:_____

    _____

    _____

    Signature:_____Date:_____

DPW: □Yes   □No

    Conditions/Comments:_____

    _____

    _____

    Signature:_____Date:_____

FIRE DEPARTMENT: □Yes   □No

    Conditions/Comments:_____

    _____

    _____

    Signature:_____Date:_____

POLICE: □Yes   □No

    Conditions/Comments:_____

    _____

    _____

    Signature:_____Date:_____

Approved by Council: □Yes   □No   □Not Applicable   Date:_____

Date Copy Returned to Responsible Party:_____ □Mail   □Email   □In Person