

SPECIAL EVENTS PERMIT

All Special Events involving or affecting the use of City streets, sidewalks or public right-of-ways are required to complete this permit and submit it to the Office of the City Clerk, 232 East Jackson Street, Macomb, IL 61455. **All permits must be submitted at least TEN (10) days prior to the scheduled event. ****If this event will have 150 persons or over and include alcohol, a Mass Gathering permit is required.**

*****ALL MARKERS, SIGNS, BALLOONS, ETC. TO MARK THE ROUTE MUST BE REMOVED IMMEDIATELY AFTER THE EVENT. Please check to acknowledge. _____***

*****NO PERMANENT MARKINGS MAY BE MADE ON CITY STREETS AND SIDEWALK. Please check to acknowledge. _____***

Name of Individual, Organization or Business: _____

Address of Individual, Organization or Business: _____

Contact Person and Phone Number: _____

Date of Event: _____

Type of Event:

- Fairs, festivals or street fairs Road races, foot races, bicycle runs, walk-a-thons, bike-a-thons
 Sidewalk Cafe Sidewalk sales or displays Farmers or merchants markets
 Block parties, business openings, business promotions Marches

Specifically describe the purpose and location of the Event: _____

Specifically list the streets, sidewalks or right-of-ways that will be affected and how: _____

Beginning and Ending time of Event: _____

Number of Persons to Attend: _____

Will Event involve alcohol Yes No
If "Yes", please explain: _____

Does the Event require any assistance from the City. If so, which department: _____

Indemnity Agreement

The above named hereby agrees to indemnity and hold the city of Macomb and all of the City's officials, officer, agents and employees harmless from any liability what-so-every from any and all claims, demands, actions or causes of action for personal injury, including death, or property damage arising from or in any way connected to the assembly, special events or street closing, except on any claims arising solely from the negligent acts of the city or its officials, officers, agents and employees.

Signature of Individual or Representative of Organization or Business

Date

FOR OFFICE USE ONLY

____ City Clerk _____

____ Fire Department _____

____ Police Department _____

____ Public Works _____

____ Building & Zoning Office _____

____ City Attorney _____

ACTION

The "Special Events Permit" is hereby: _____ APPROVED _____ DENIED

The **approval** is subject to the following conditions: _____

The **denial** is based on the following reasons: _____

**Denials may be appealed to the Mayor.

Mayor/City Administrator

Date