



EVENT REQUEST

PARADE RUN

MARCH RIDE

Date of Application: _____

Notification is hereby given to the City of DeKalb as provided in Chapter 51 "Traffic", Section 51.20 "Parades, Processions and Marches" of the City of DeKalb Municipal Code to request an Event (Parade, March, Run, Ride) as follows:

IMPORTANT NOTICE

This application must be submitted no less than four (4) weeks prior to the event for processing. If requesting the temporary closure of Route 23 and/or Route 38, this application must be submitted no less six (6) weeks prior to the event for processing and approval by the City Council and the Illinois Department of Transportation (IDOT).

Name(s) of sponsoring organization(s): _____

Date of Event: _____ Starting Time: _____ Ending Time: _____

Name(s) of person(s) responsible for organizing and conducting the event:

Name	Address	Phone	Email

Number of: People (_____) Animals (_____) Vehicles (_____) expected to participate.

Describe the event in detail (use a separate sheet of paper if more space is needed):

Describe the event route from the starting point to the termination point (use a separate sheet of paper if more space is needed) **(a map of the event route is required)**:

Does the event request require the closure of City streets?

Yes No

If yes, list the specifics below and provide notation on the event route being provided (use a separate sheet of paper if more space is needed):

Will the event require the temporary blockage or closure of either Illinois Route 23 and/or Illinois Route 38?

Yes No

If yes, it will require approval from the City of DeKalb City Council and the Illinois Department of Transportation (see notice above).

Does this event require any of the following?

- **Barricades** Yes No
- **Reflective vests for staff and/or volunteers** Yes No
- **Emergency Medical Services (an ambulance on site)** Yes No
- **Police Department presence (for traffic control)** Yes No

A Certificate of Insurance naming the City of DeKalb as an additional insured in the amount of \$1 million dollars is required. This application will not be considered or approved without receipt of this document.

If requesting the temporary blockage or closure of Illinois Route 23 and/or Illinois Route 38, a Certificate of Insurance naming the City of DeKalb AND the Illinois Department of Transportation as an additional insured in the amount of \$1 million is required. This application will not be considered or approved without receipt of this document.

Signature of Person Making Application	Printed Name of Person Making Application
Address	
Telephone Number	E-mail Address

Return this form to (can be mailed, emailed or faxed): City of DeKalb – City Manager’s Office
 200 S. Fourth Street
 DeKalb, Illinois 60115
 E-mail: ruth.scott@cityofdekalb.com
 Fax: (815) 748-2091

Phone (815) 748-2090 with questions regarding this application.

FOR USE BY CITY PERSONNEL ONLY	
CHECKLIST	EVENT INFORMATION
<input type="checkbox"/> Application <input type="checkbox"/> Event Map <input type="checkbox"/> Insurance Certificate	E-mail complete event application to the staff listed below for review before scheduling a meeting (a meeting may not be necessary). Police Dept. Date: _____ Interim Police Chief John Petragallo Commander Steve Lekkas Fire Dept. Date: _____ Fire Chief Jeff McMaster Engineering Dept. Date: _____ Zac Gill Public Works/Streets Date: _____ Bryan Faivre Andy Raih
Date and Time of Event Discussion Meeting (if required): _____	
<input type="checkbox"/> Approved: _____ Date: _____	
<input type="checkbox"/> Denied: _____ Date: _____	