



Police Traffic Division (415) 485-3034  
1375 Fifth Avenue San Rafael, CA 94901  
events@cityofsanrafael.org  
Website: www.cityofsanrafael.org

**APPLICATION FOR AND PERMIT TO CONDUCT A PARADE, AND/OR HOLD A MEETING OR ASSEMBLY ON THE PUBLIC STREETS, PARK OR OTHER PUBLIC GROUNDS OF THE CITY OF SAN RAFAEL, OR IN SAN RAFAEL CITY PLAZA, AS REGULATED BY SRMC CHAPTER 5.70**

Name of Organization \_\_\_\_\_ Authorized Representative \_\_\_\_\_

Name of Event Chairperson/Organizer \_\_\_\_\_ CDL# \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

Type of Event \_\_\_\_\_ Date \_\_\_\_\_ Event Hours \_\_\_\_\_ am/pm to \_\_\_\_\_ am/pm

Purpose of Event \_\_\_\_\_

Names of Speakers/Groups \_\_\_\_\_

List Type of Sound Equipment to be used (PA, microphone, stereo, etc.) \_\_\_\_\_

Is Alcohol Going to be Sold/Available? \_\_\_\_\_ What Type? \_\_\_\_\_ Has ABC Permit Been Obtained? \_\_\_\_\_

<b>ESTIMATED NUMBER OF</b> (attach detailed diagram of layout)	
Participants _____	Vendors _____
Garbage Cans _____	Dumpsters _____
Portable Toilets _____	
Vehicles (include types) _____	
Animals (include species) _____	Estimated Attendance _____
<b>PARADE/PUBLIC GATHERING</b>	
Location of Event or Starting Point and Route (be specific) _____	
Location of Assembly Area _____ Location of Dispersal Area _____	
Plans for Assembly and Dispersal, Including Times _____	
Will Event Occupy All or Only a Portion of the Streets and Sidewalks? _____ If Inter-City Parade, Has Other City Issued Permit? _____	
<b>PLAZA</b> (attach detailed diagram of layout)	
Setup Date and Time _____	Takedown Date and Time _____ (If Different Than Hours Listed Above)
Number of Tables _____	Chairs _____
Generators _____	Tents _____
Dimensions of Tents _____	
<b>STREET CLOSURE(S)</b> (attach additional sheets, if necessary)	
List Street(s) to be Closed _____	
Hours of Closure _____ am/pm to _____ am/pm	

IT IS UNDERSTOOD THAT THIS MEETING AND/OR PARADE WILL BE CONDUCTED IN AN ORDERLY MANNER. IT IS ALSO UNDERSTOOD THAT THE MEETING AND/OR PARADE WILL BE STOPPED, MOVED TO ANOTHER LOCATION, OR REDIRECTED, IF SO REQUESTED BY A POLICE OFFICER OF THE CITY OF SAN RAFAEL WHEN SUCH ACTION IS NECESSARY TO PERMIT THE NORMAL FLOW OF VEHICULAR OR PEDESTRIAN TRAFFIC. IT IS ALSO UNDERSTOOD THAT THE PARADE WILL BE CONDUCTED IN CONFORMITY WITH THE ROUTE AND HOURS SPECIFIED IN THIS PERMIT. APPLICANT AGREES TO CONDUCT THIS EVENT IN COMPLIANCE WITH SAN RAFAEL MUNICIPAL CODE CHAPTER 5.70 (SEE BACK OF THIS FORM). APPLICANT REALIZES THAT A VIOLATION OF ANY PROVISION OF THIS ORDINANCE WILL BE GROUNDS FOR IMMEDIATE REVOCATION OF THIS PERMIT.

IT IS ALSO UNDERSTOOD THAT THIS MEETING AND/OR PARADE WILL BE FULLY COMPLIANT WITH THE AMERICANS WITH DISABILITIES ACT (ADA) LEGAL REQUIREMENTS. QUESTIONS/CONCERNS MAY BE ADDRESSED TO APPROPRIATE DEPARTMENT LISTED AT THE TOP OF THIS FORM.

THIS APPLICATION, WHEN SIGNED BY ALL PARTIES, SERVES AS A CONTRACT BETWEEN THE CITY OF SAN RAFAEL AND THE ABOVE MENTIONED ORGANIZATION. PRIOR TO THE EXECUTION OF THIS CONTRACT, THE ORGANIZATION WILL PROVIDE THE CITY OF SAN RAFAEL WITH ANY AND ALL REQUIRED DOCUMENTS (EVENT DIAGRAM, ABC LIQUOR PERMIT, ETC.) AND APPLICABLE FEES, AS WELL AS A CERTIFICATE OF LIABILITY INSURANCE WITH A MINIMUM OF \$1,000,000 COVERAGE, AND IF DEEMED NECESSARY, BASED ON TYPE OF ACTIVITY, UP TO \$2,000,000 COVERAGE. ALSO REQUIRED IS AN ENDORSEMENT TO THE LIABILITY POLICY LISTING THE CITY OF SAN RAFAEL AS AN ADDITIONAL INSURED.

THIS PERMIT MUST BE IN POSSESSION OF PERSON CONDUCTING PARADE, MEETING OR ASSEMBLY, AND MUST BE SHOWN TO ANY POLICE OFFICER OR AUTHORIZED REPRESENTATIVE OF THE CITY OF SAN RAFAEL UPON DEMAND. IF THIS PERMIT IS FOR A MEETING OR ASSEMBLY ON A PUBLIC STREET, MEETING MUST START WITHIN TEN (10) MINUTES OF THE SCHEDULED TIME; OTHERWISE PERMIT IS AUTOMATICALLY CANCELLED.

Approved _____ Denied _____  OFFICIAL USE ONLY	Applicant _____ Date _____ Police Traffic Division _____ Date _____ _____ By _____ Date _____ CHIEF OF POLICE	Insurance Requirement: \$1 Mil _____ \$2 Mil _____
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