SPECIAL EVENT PERMIT APPLICATION VILLAGE OF BAYSIDE 9075 N. REGENT ROAD BAYSIDE, WI 53217-1800

VILLAGE HALL 414-206-3915 POLICE 414-206-3916

Applicant Name	_ Telephone #	Fax #	
Address	City	ST ZIP	
Email:	_		
Organization Name	Telephone #	Fax #	
Address	City	ST ZIP	
Contact Person	Telephone #	Fax #	
Address	City	ST ZIP	
Event Name	Date	Time	
Event Type: Bike RideRun/WalkParade	Athletic Event	MarchBlock pa	rtyOther
Please provide the following information regarding you	ır event:		
Assembly area, starting point, route to be traveled and	the termination poir	nt (Route map must acco	ompany application)
Number of participants or types of units comprising the	e event:		
Map of area for roadblock placement:			
I, the undersigned, have received a copy of Bay provisions thereof. I understand that prior to receiving proof of insurance satisfactory to the Village Manager of In addition to the \$50 permit application, fees the type of event and number of participants. Every eff the information provided in the application, however, to completion of the event should additional resources by	approval for my ever or Village Attorney. will be assessed by th ort will be made to a the Village reserves t	nt, I must submit a \$50 a ne Department of Public ssess the fees prior to t	application fee and Works based upon he event based upon
Applicant's signature	Printed Name _		Date
	or Village Use*****		
Date permit rcvd Permit fee receivedYes	U	Estimat	ed Charges \$
Additional Charges \$ Manager app	roval	Police approva	l
SeeClickFix Request MyBlue request	_ Email Applicant wh	en permit is approved d	ate: