

City Of Beacon Street Use/ Parade Request

Contact Information

Name of Event			
Type of Event	Parade <input type="checkbox"/>	Street Closure <input type="checkbox"/>	Street Use <input type="checkbox"/>
Sponsoring Organization			
Address			
Contact Person			
Email Address			
Phone		Cell	

Event Details

Date of Event	Time of Event	From	To
Giving name(s) of street(s), describe the area needed for this event and the use of any vehicles during the event, need for parking, barricades, etc. For parades please include route to be taken, Starting point and finish point. Please attach any advertising related to your event.			

PLEASE NOTE: The City of Beacon in its discretion may impose additional requirements prior to the issuance of this permit as are required by the nature of the use applied for. Any costs associated with these additional requirements will be incurred by the permittee. Proof of Insurance may be required for events. All fees and deposits are due and payable 30 days in advance of your requested date with your completed application. Please make all checks payable to the City of Beacon.

I and/ or the organization I represent agree to indemnify, defend, and hold harmless the City of Beacon, its officials, agents, and employees from and against any and all claims, demands, losses and expenses, including legal fees arising in and from my activities and/or those of the organization I represent during the term of the use of City facilities. I and/or the organization I represent agree to pay all reasonable costs of damage and/or vandalism to City facilities used in relation to the event.

Signed _____ Date _____

Return to: Office of the Mayor, One Municipal Plaza, Suite One, Beacon, New York 12508
Phone (845) 838-5010 Fax (845) 838-5096 Email: Mayor@cityofbeacon.org

Request	Approved <input type="checkbox"/>	Denied <input type="checkbox"/>		
Approved by	Steve K. Gold, Mayor		Date	
Reason For Denial				
Copy of Approval To:	City Administrator	Chief of Police	DPW	Fire Chief

