



1969 Central Avenue
Lake Station, IN 46405
Phone (219) 962-2081 Ext.204 Fax (219) 963-9275
Clerk Treasurer: Brenda Samuels

PERMIT # _____

REQUEST FOR PARADE PERMIT

APPLICANT: _____

ADDRESS: _____

CITY: _____ ZIPCODE _____ PHONE # _____

SPONSORING ORGANIZATION: _____

PURPOSE OF PARADE: _____

DATE REQUESTED: _____

STARTING TIME: _____ ENDING TIME: _____

ASSEMBLY AREA: _____

ROUTE TO BE TRAVELED: _____

(Description of floats, marching units, vehicles. Bands, including description of any sound amplification equipment to be used. Please attach with parade request application)

NUMBER OF PARTICIPANTS: _____

PROOF OF INSURANCE COVERAGE: _____

(Pursuant to City Ordinance, Section 4-20 [f])

I have been provided with and have read Lake Station City Ordinance, Section 4-20 "Parade Permits" I hereby certify that all information in this request is true and accurate to the best of my knowledge and belief.

APPLICANT SIGNATURE: _____ DATE: _____

FEES: \$50.00 PER DAY APPLICANT SHALL BE RESPONSIBLE FOR DAILY CLEAN-UP

BOARD OF WORKS MEMBERS: _____ APPROVAL DATE: _____
