



# Village of Yellow Springs

## EVENT/PARADE PERMIT APPLICATION

Name of Applicant: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Address: \_\_\_\_\_ Organization: \_\_\_\_\_

NAME OF EVENT: \_\_\_\_\_

Date(s) of Event/Parade: \_\_\_\_\_ Time(s): \_\_\_\_\_

Streets or Public Areas requesting to close: \_\_\_\_\_

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**Please highlight the event area or the parade route on a map (attach).**

Please describe the event. Note any special public safety or city services needs. If your event is a parade or bike/run/walk, please write the directions that the parade or event will follow or roads that you are requesting to be closed. For events, describe the public property you are requesting to close:

### **Please note:**

### **Participant Safety is Vital!**

- ◆ Prior to the beginning of a bike/run/walk, it is important that all participants be advised to **obey pedestrian regulations** and **cross only at intersections or as directed by the police**.
- ◆ Your organization will have to arrange for payment for the use of services (water, electric, trash pick-up) whether provided by a private owner or public entity. Extraordinary public safety services (excessive overtime) may also need to be paid for at the determination of the Village Manager.
- ◆ It is the sponsoring organization's responsibility to clean up debris left over from the event. This would include any material that might fall from floats, animal manure and/or markers or signs along the route. Failure to clean up following the event will result in a \$500 clean-up fee being sent to the person and/or organization responsible for the event.

**HOLD HARMLESS:** The Permittee will hold harmless and indemnify the Village, its elected officials, officers, employees and agents from any damages which may arise as a result of the conduct of the parade or assembly for which the permit is sought by persons who were or reasonably should have been under the control of the Permittee.

*Signature of Applicant* \_\_\_\_\_ *Date* \_\_\_\_\_

**\*\*\*\*\*INSURANCE INFORMATION\*\*\*\*\***

YOU MUST HAVE YOUR INSURANCE COMPANY SEND A CERTIFICATE OF INSURANCE TO THE VILLAGE OF YELLOW SPRINGS, VILLAGE MANAGER'S OFFICE ATTENTION RUTHE ANN. (Fax to 937/767-3720)

THE FOLLOWING LANGUAGE MUST BE ON THE CERTIFICATE: "The following are Additional Insureds: The Village of Yellow Springs, Ohio and its elected and appointed officials, all employees agents, volunteers, all boards, commissions and/or authorities and board members, including employees, agents and volunteers thereof. Coverage shall be primary to the Additional Insureds and not contributing with any other insurance or similar protection available to the Additional Insureds whether other available coverage be primary, contributing or excess."

FAILURE TO PROVIDE A CERTIFICATE OF INSURANCE VOIDS AN OTHERWISE APPROVED EVENT PERMIT.

DATE CERTIFICATE OF INSURANCE RECEIVED BY THE VILLAGE: \_\_\_\_\_

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**EVENT DETERMINATION**

Approved: \_\_\_\_\_  
Disapproved: \_\_\_\_\_

cc: Police Department  
Fire Department  
Street Department  
Applicant  
Parks Dept. (If applicable)

\_\_\_\_\_  
Village Manager's Signature / Date