Urbana
The heart of Champaign County

# SPECIAL EVENT REQUEST

**Please include your organization's Certificate of Insurance**

## DETAILS OF EVENT

**Event Name:** _____

**Event (start)Date:** _____ **Event (end)Date:** _____

**Event Location:** _____

## SPECIAL INSTRUCTIONS

**____BANNER**
**(specify location: ____Rts 55/68 ____Rts 29/36 (if single-sided sign face E or W?)**

- **PLACEMENT OF BANNERS AND SIGNS ARE SUBJECT TO SPACE AVAILABILITY.**
- **ALL BANNERS MUST BE DELIVERED TO THE STREET DEPARTMENT (416 TAFT AVE) W/APPROPRIATE HARDWARE PRIOR TO INSTALLATION.**

**____PARADE**

- **Applicant must be a resident of the City of Urbana**
- **Parades are limited per calendar year, preference is given to those having previous history**

**____BLOCK PARTY** **____BARRICADES NEEDED**

**____CONES NEEDED** **____STREET CLOSING**

**____ADDITIONAL SIGNAGE** **____ OTHER (Specify)_____**

**IF ADDITIONAL STAFFING FROM THE CITY IS REQUIRED FOR YOUR EVENT, CHARGES MAY BE APPLIED.**

**Applicant's Signature** _____ **Date** _____

**PLEASE PRINT YOUR NAME HERE:**_____

**Home Phone:** _____ **Work:** _____ **Cell:** _____

**Fax:**_____ **E-Mail:** _____

***By processing a permit, the applicant agrees to hold the City harmless from any and all risks, liability costs, claims or causes of action that may arise from said event. Such assumption of risk and hold harmless is a material condition of the use of the public property.**

**APPROVED** _____ Date _____
Director of Administration
City of Urbana

**NOT APPROVED**_____ Date _____
Director of Administration
City of Urbana

**Explanation:**

***For your records: signed form will be emailed to you as a PDF, unless otherwise arranged**