



CITY OF MILACA SPECIAL EVENT PERMIT APPLICATION

Permit No. _____
Return to City Hall By: _____
Date of Application: _____

NAME OF SPECIAL EVENT: _____

TYPE OF SPECIAL EVENT: Parade _____ Runs/Walks _____ Other: _____

Applicant's or Organization's Name: _____

Name of Contact Person: _____ Daytime Phone: _____

Address: _____ Evening Phone: _____

_____ Fax Phone #: _____

Email Address: _____

Other permits may be required for your event. This application will allow you to apply for the Special Event Permit along with Street Closings, Banners/Signs, and Parade Permits. All information needed for these permits are attached to this application. You must obtain a separate application for Park/Shelter Reservations, Temporary 3.2, Malt Beverage license, or Fireworks Permit.

Starting Date _____ Starting Time _____

Ending Date _____ Ending Time _____

Estimated Number of Participants Attending the Event _____

Number of Sanitary Facilities _____ Sanitary Locations _____

Where will Individuals Park _____

Will Security Be Provided Yes No Explain Arrangements: _____

If using a public address system, give the location of speakers _____

How will drinking water be provided _____

Will electricity be required, and if so, how will it be provided _____

How will refuse be disposed of _____

Will the Special Event require the use of a park/shelter Yes No

(if yes, a park/shelter reservation form must be obtained from the City of Milaca)

PARADE

IF YOUR EVENT INCLUDES A PARADE, YOU MUST COMPLETE THIS SECTION

Parade Title _____

Date of Parade _____ Assembly Time _____

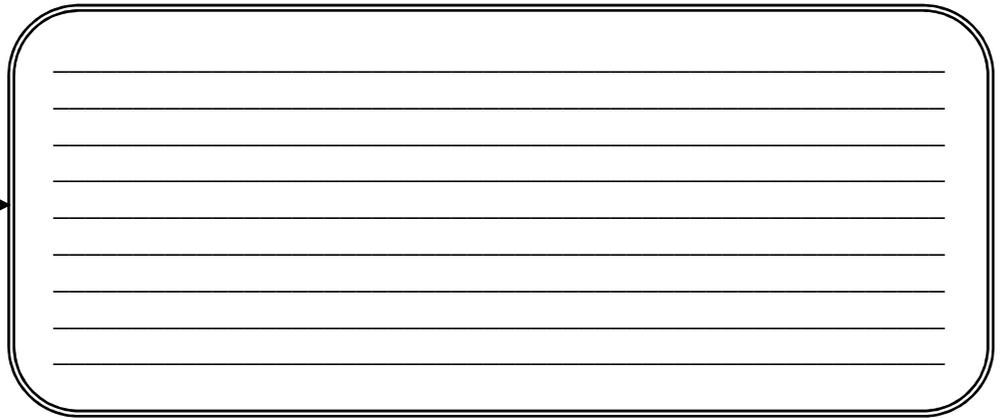
Assembly Area _____

(Note: Applicant must obtain owner(s) written permission and attach to this application if assembly/dispersal is on private property).

Exact Starting Time _____ Estimated Duration _____

Actual Starting Location _____

Proposed Parade Route
(Attach a separate sheet if necessary)



Parade End Location _____ Parade Dispersal Area _____

Approximate Number of Units in Parade _____

Approximate Number of Persons in Parade _____

Approximate Number of Animals in Parade _____

Type of Animals in Parade _____

Maximum Length of Parade in miles (or fractions thereof) _____

Contact Person _____ Telephone: _____ Cell Phone _____

If your parade involves the closing of any county road in the city limits, please allow up to 60 days for approval because the city must receive Mille Lacs County Board approval prior to final approval by the City of Milaca.

BANNERS & SIGNS

IF YOUR EVENT REQUIRES BANNERS OR SIGNS, YOU MUST COMPLETE THIS SECTION
(Attach a separate sheet if necessary)

Banner description(s) and location, including size, method of construction and wording:

BANNER(S): _____

Date Banner to be put up _____ Date Banner to be taken down _____

Contact Person _____ Telephone Phone _____ Cell Telephone _____

Sign description(s) and location, including size, method of construction and wording:

SIGN(S) _____

Date Sign to be put up _____ Date Sign to be taken down _____

Contact Person _____ Telephone Phone _____ Cell Telephone _____

BANNER & SIGN RULES

Special events temporary signs for non-profit organizations are permitted which are temporary displays which are erected to celebrate, commemorate or observe a civil or religious holiday. These signs shall be removed from the premises within ten days following completion of the special event. The special event signs shall not exceed four feet by eight feet in size.

Special events temporary signs shall not be erected more than 90 days before the date of the special event; an extension of this time limit may be obtained only by variance.

Public portable signs may be erected by the city and/or a non-profit corporation to advertise community-interest events and which public portable signs shall be placed upon public property. All public portable signs shall not be erected more than seven days before the date of the special event and shall be promptly removed following the event.

The Building Inspector may order the removal of any sign in violation of city ordinance.

**YOU MUST COMPLETE THIS SECTION FOR EACH CLOSING THROUGHOUT THE ENTIRE EVENT
STREET CLOSINGS**

1.

Location _____ Between _____ & _____
(Street to be Closed) (Cross Street) (Cross Street)

Date _____ Time _____ - _____
(Beginning) (End)

Contact Person _____ Daytime Phone _____ Cell Phone _____

Special Requests _____

2.

Location _____ Between _____ & _____
(Street to be Closed) (Cross Street) (Cross Street)

Date _____ Time _____ - _____
(Beginning) (End)

Contact Person _____ Daytime Phone _____ Cell Phone _____

Special Requests _____

3.

Location _____ Between _____ & _____
(Street to be Closed) (Cross Street) (Cross Street)

Date _____ Time _____ - _____
(Beginning) (End)

Contact Person _____ Daytime Phone _____ Cell Phone _____

Special Requests _____

4.

Location _____ Between _____ & _____
(Street to be Closed) (Cross Street) (Cross Street)

Date _____ Time _____ - _____
(Beginning) (End)

Contact Person _____ Daytime Phone _____ Cell Phone _____

Special Requests _____

5.

Location _____ Between _____ & _____
(Street to be Closed) (Cross Street) (Cross Street)

Date _____ Time _____ - _____
(Beginning) (End)

Contact Person _____ Daytime Phone _____ Cell Phone _____

Special Requests _____

For additional street closings, attach a separate sheet of paper listing each closing individually.

*****FOR CITY STAFF USE ONLY**
SPECIAL EVENT PERMIT ROUTING**

SIGN IF APPROVED

COMMENTS

City Administration

(date)

Milaca Police Dept.

(date)

Street Dept.

(date)

Building/Zoning Admin.

(date)

Fire Chief

(date)

**RETURN COVER SHEET WITH YOUR SIGNATURE AND
COMMENTS TO CITY HALL AS SOON AS POSSIBLE.**