



SPECIAL EVENT AND PARK RENTAL – PUBLIC ADDRESS SYSTEM APPLICATION

Date of Application: _____

Name: _____
 (last) (first) (middle initial)

DOB: _____ **Primary Phone:** _____

Home Address: _____

Organization's Name: _____

Organization's Address: _____

Organization's Phone #: _____

Local Address of Event: _____

Nature of Business/Event: _____

Date(s) and Time(s) of Event: _____
 (date) (time from) (time to)

(date) (time from) (time to)

(date) (time from) (time to)

Vehicle to be Used: _____
 (color) (year) (make) (license plate) (state)

Type of Sound Amplification Equipment to be used: _____

Additional Information: _____

Will PA broadcast sound travel beyond 1,000 feet? Yes No
 (if yes, application must be processed and submitted to City Council for approval)

<input type="checkbox"/> Special Event and Park Rental Application Attached			
<i>Application Review</i>	<i>Signature</i>	<i>Date</i>	<i>Decision (Approve, Approve with Conditions, Deny)</i>
CEDD			
City Manager			
Police Chief			
City Council (if applicable)			