



CITY OF LA PORTE
REQUEST FOR A **PARADE** ON A PUBLIC STREET

Date Received: _____

Received By: _____
ROUTE TO TRAFFIC SGT.

REQUESTED PARADE DATE: _____

CONTACT PERSON: NAME: _____

ADDRESS: _____

ORGANIZATION NAME: _____

PRIMARY CONTACT PHONE #: _____

ALTERNATE CONTACT NAME: _____

ALTERNATE CONTACT PHONE: _____

STATE THE TYPE OF PARADE: _____NON-COMMERCIAL _____COMMERCIAL*

*IF COMMERCIAL PARADE, DESCRIBE THE PRODUCT, GOOD OR SERVICE TO BE ADVERTISED:

NOTE: A "COMMERCIAL PARADE" MEANS A PARADE SPONSORED OTHER THAN BY A NONPROFIT ORGANIZATION, THE PURPOSE OF WHICH IS TO ADVERTISE A PRODUCT, WHETHER TANGIBLE OR INTANGIBLE, TO ADVERTISE OR PROMOTE AN EXHIBITION OR THEATRICAL PERFORMANCE OR OTHERWISE OPERATE TO THE PRECUNARY BENEFIT OF THE SPONSOR.

ROUTE OR SECTION OF STREET(S) TO BE CLOSED (PLEASE ATTACH A MAP OF AREA – HAND DRAWN IS ACCEPTABLE):

TIME STREET(S) TO BE CLOSED: _____

TIME STREET TO BE REOPENED: _____

STATE THE LOCATION POINT FOR ASSEMBLY OF PARADE: _____
(PLEASE INDICATE AND MARK ON MAP OF ROUTE)

STATE THE LOCATION POINT FOR DISASSEMBLY OF PARADE: _____
(PLEASE INDICATE AND MARK ON MAP OF ROUTE)

APPROXIMATE NUMBER OF PERSONS WHO WILL PARTICIPATE: _____

ESTIMATED NUMBER OF VEHICLES TO BE IN THE PARADE: _____

IF APPLICABLE, DESCRIPTION OF NUMBER & KIND OF ANIMALS PARTICIPATING:

The City incurs costs associated with parades for street closures and required City services. Is the organization/applicant willing to reimburse the City for reasonable costs associated with this request?

_____ Yes _____ No
Please initial your response

I understand that by submitting this Parade Request, either for myself or on behalf of others, I am responsible for leading the event in accordance with the all local Ordinances and State laws.

Applicant's Signature

Date



MAP OR SKETCH

A map or sketch is required, hand drawn is acceptable.

Map Symbols:



Parade Route



Assembly Area



Disassembly Area



Barricade



This Section to Be Completed By City Personnel Only

Police Costs and Approvals:

Route Approval PD Traffic Division: _____

of PD Personnel Required: _____ Total # PD Hours Required: _____

(To obtain estimate the total # of hours required multiplied by overtime rate for a mid range Officer)

Estimated Costs to Provide Police Services for Parade: _____

_____ Approved _____ Denied

Police Chief Approval: _____

Public Works Costs and Approvals:

of PW Personnel Required: _____ Total # PW Hours Required: _____

Estimated Costs to Provide Public Works Services for Parade: _____

_____ Approved _____ Denied

Public Works Director Approval: _____

_____ Approved _____ Denied

City Manager Approval: _____

Please Route form to Office Coordinator at Police Department once City Manager has reviewed. Notification to Applicant will be then be made and copies distributed to Police and Public Works for planning purposes.

Applicant Notified of Decision: Date: _____ By: _____

Copy sent to PD Traffic Division: Date: _____ By: _____

Copy sent to Public Works: Date: _____ By: _____

Last weekday prior to event, Police Dispatch and Patrol Briefing Room should be provided a copy for information purposes.

Copy sent to Dispatch: Date: _____ By: _____

Copy Placed in Briefing Room: Date: _____ By: _____