



TOWN OF GANANOUE

SPECIAL EVENTS PERMIT - ROAD CLOSURE

Application and Permit to hold a Special Event on a Municipal Road

NAME OF ORGANIZATION SPONSORING THIS EVENT: _____

Contact Information:

Contact Person: _____

Phone: _____ Cell _____ Email _____

TYPE OF EVENT: _____

PURPOSE OF EVENT: _____

Is this a community-sponsored, non-profit event? Yes () No ()

Will the event include the consumption of alcohol Yes () No ()

Will the event include the solicitation of donations from the driver or any other person in the vehicle? Yes () No ()

DAY(S) OF THE WEEK AND DATE(S) IF EVENT: from _____ to _____

TIME OF THE EVENT: from _____ to _____

NUMBER OF PARTICIPANTS:

Individual's _____ Bands _____ Horses _____ Bicycles _____ Cars _____ Floats _____

ROAD TO BE USED

ROAD OR LANE CLOSURES REQUESTED

CIRCULATED TO SENIOR MANAGEMENT:

DATE: _____

CERTIFICATE OF INSURANCE RECEIVED: \$2,000,000 () \$5,000,000 ()

DATE: _____

CONDITIONS OF APPROVAL:

Police Presence Required: YES () NO ()

Safety Cones Required: YES () NO ()

Barricades Required: YES () NO ()

Safety Vests Required: YES () NO ()

Other: _____

This permit is conditional upon the applicant signing below and agreeing to the conditions listed above. The Town of Gananoque confirms that electronic signature of this document is acceptable provided that the applicant is specifically authorized by the sponsoring organization to enter into and execute this document in such a manner.

DATE: _____

SIGNATURE: _____