



SPECIAL EVENT PERMIT APPLICATION INSTRUCTIONS

No person, firm, organization, or group of individuals shall hold or participate in a PARADE, RUN/WALK, or FESTIVAL (not-for-profit organizations) in the City of Evansville unless first having obtained a permit, therefore, and paid to the Controller of the City of Evansville for such permit.

The Board of Public Safety shall adopt regulations pertaining to parades, runs/walks, and festivals, and the application for permits, therefore, and upon approval of such application by the Board of Public Safety, and the payment of said fee, such permit shall be granted, and such permit shall be valid only for the date, hour, and route or location specified in such permit.

NO SIGNS IN RIGHTS-OF-WAY

There are to be no signs advertising the event posted in the right-of-way inside the city limits.

FESTIVAL PERMITS -- \$25

Application must be signed before a Notary Public on Page 6.

Permits must be signed by both the Evansville Police Department Lieutenant or Sergeant of Patrol Headquarters and a representative from the Vanderburgh County Health Department. The Board of Public Safety board administrator will forward via email the application to these individuals for signature if the application is received AT LEAST 60 days prior to the event.

PARADES and RUNS/WALKS -- \$5

Application must be signed before a Notary Public on Page 6.

Contact the Evansville Police Department Sergeant of Patrol Headquarters (812-436-7899) regarding security issues for traffic control and other safety measures related to the event.

BICYCLE RACKS

Bicycle racks courtesy of Welborn Baptist Foundation are available for your event. Call Metropolitan Planning Organization at 812-436-7833 to make arrangements.

MISCELLANEOUS INFORMATION REQUIRED

1. You must notify affected businesses and residents of approved street closures.
2. You must provide a maps showing streets/intersections requested to be blocked. If Parade or Run/Walk, you must provide a street-by-street list and detailed map (on 8.5" x 11" paper).
3. Event producer/contact is responsible for pick-up and removal of event-related debris.
4. Certificate of Insurance naming City of Evansville as additional insured will be required.

WHERE TO SUBMIT YOUR APPLICATION

Board of Public Safety
c/o Evansville Police Department
15 NW Martin Luther King, Jr. Blvd
Evansville, IN 47708

**Board of Public Safety will consider this application
ONLY if COMPLETE and if all required supporting
documentation is included.**

**Board of Public Safety**

Civic Center Complex, Room 301 • 1 NW MLK Jr., Blvd.
Evansville, Indiana 47708 • (812) 436-7897

----- FOR BPS USE ONLY -----

Permit Number _____
Approved by _____
Date _____

SPECIAL EVENT PERMIT APPLICATION

Official Name of Event/Festival _____

Name of Host Organization _____

Name of Contact/Producer _____

Address of Contact _____

Street

City/State

Zip Code

Business Telephone Number (include Area Code) _____

FAX Number (include Area Code) _____

Mobile Telephone Number (include Area Code) _____

Email Address _____

EVENT DETAILS

Purpose of Event _____

Date/Time of Requested Street Closing _____

Start Date: ____/____/____ Time: ____:____ AM/PM

End Date: ____/____/____ Time: ____:____ AM/PM

TYPE OF PERMIT REQUESTED

Parade ☐
(\$5 fee)

Walk/Run ☐
(\$5 fee)

Festival ☐
(\$25 fee)

Street Closing ☐
(No charge)

STREET CLOSINGS/AREA TO BE USED

List street-by-street route/direction of run/parade or the area to be closed – AND – Attach detailed map

For Lower Dress Plaza (boat ramp), you must also seek approval from Board of Public Works.

For any City Park or Greenway, you must also seek approval from Board of Park Commissioners.

Will any sidewalk, street, or other city property be used? No ☐ Yes, where? _____

Would there be RIDES? No ☐ Yes, where? _____

Would any PARKS' PROPERTY be used? No ☐ Yes, where? _____



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EVENT NAME _____ EVENT DATE _____

PARADES and RUNS/WALKS

LENGTH of Route (in miles) _____ Estimated Number of PARTICIPANTS _____

Estimated Number of UNITS/VEHICLES in Parade _____

Describe arrangements to secure the safety and protection of the participants in this event for traffic hazards

- We will regulate the conduct of participants in the event so it is conducted in a safe and orderly manner. Initial ____
- We will investigate complaints by the public concerning the conduct of the participants involved. Initial ____
- We will notify appropriate law enforcement agencies of any suspected activities of event participants that may be a violation of state law or local ordinance. Initial here ____

ALCOHOL

Will alcohol be served? No ☐ Yes ☐ If yes, please note, alcoholic beverages can NOT be served or sold on a city right-of-way. Explain where the alcohol would be served and the type of security you would be using.

MUST ATTACH copy of *Indiana State Excise Application for Temporary Beer/Wine Permit* for this event.

CLEAN-UP

After the event, your organization must clean-up the areas used. Describe how your organization would clean-up the areas of debris

LIABILITY INSURANCE

Certificate of Insurance (COI) that covers the date(s) of the event must be included with the application (see attached COI example as reference). The "City of Evansville" MUST be listed as an additional insured on the COI. Applicant must submit a liability insurance policy issued by an insurance company licensed to do business in the State of Indiana in the amount of one million (\$1,000,000) per occurrence and two million (\$2,000,000) aggregate for the injury or death of any person or damage to property; provided that if the event contemplated by this application will be serving alcohol, the policy limits shall be two million (\$2,000,000) per occurrence and three million (\$3,000,000) aggregate.

This application and insurance information will be forwarded to Legal Counsel and Board Secretary for review. Legal Counsel determines if the amount on the insurance coverage is adequate before the request is forwarded to the Board for approval. If a change in insurance coverage is required, the Board Secretary will notify the event organizer.

Name of Insurance Agency _____ Coverage Amount _____

Application continued on next page.



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EVENT NAME _____ EVENT DATE _____

POLICE DEPARTMENT REVIEW OF EVENT PLAN

The Evansville Police Department will review each permit application to check for possible conflicting events, safety, adequate volunteers for traffic control, or any other issue(s) that might arise from the event taking place. In the event the Evansville Police Department deems the proposed event plans pose a risk to the safety of the participants or the public, the organization applying for the event permit would have the following options:

- Change the date and/or time of the event
- Move the event to a location that does not require traffic control (i.e. a city park)
- Provide enough volunteers to block intersections for adequate traffic control
- Hire at the organizations' expense recommended off-duty law enforcement officers for any needed traffic control
- Cancel the event

ROUTE VERIFIED	YES	NO
CHOICE OF DATE APPROVED	YES	NO

EPD SIGNATURE _____ Date _____
Lieutenant or Sergeant of Patrol Division (812-436-4939 or 812-436-7899)

Arrangements have been made with the following to secure the safety and protection of the public and participants in this event:

Police Department signature _____

Fire Department signature _____

Vanderburgh County Health Department signature _____

For its event, the organization is required to provide or comply with the following:

- Plans to handle/control traffic at all intersections, including those where the route goes through traffic lights or stop signs.
- Prepare and present a map and a complete, detailed description of the route for approval by the Evansville Police Department.
- Volunteers to be utilized at intersections must be at least 18 years of age and wear a type of distinctive uniform (military, etc.) or reflective traffic vest or t-shirt identifying the host organization/event.
- To the law enforcement officer in charge, present at least 30-minutes prior to the start of the event, verification that all traffic control personnel/volunteers are in place at every intersection along route.
- Plans for providing emergency services (ambulances, etc.) – when required – for all event participants.
- Display the Special Event Permit issued by the City Controller's Office.

FAILURE TO COMPLY WITH THESE INSTRUCTIONS COULD RESULT IN THE CANCELLATION OF THE EVENT.



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EVENT NAME _____ EVENT DATE _____

BARRICADE REQUEST

If your event requires any of the items listed below, please complete this section in its entirety. If the Special Event Permit get approved, this form will be forwarded to Board of Public Works for consideration. If approved, every person handling barricades will be required to submit a completed Volunteer Waiver Form.

Is the requesting organization a NOT-FOR-PROFIT? No ☐ Yes ☐
Would access to WATER be needed? No ☐ Yes ☐
Would ELECTRICITY be needed? No ☐ Yes ☐
Would FENCING be needed? No ☐ Yes ☐ If yes, how many feet? _____
Would SPECIAL SIGNAGE be required? No ☐ Yes ☐ If yes, please circle which type(s):
 No Parking Detour Road Closing No Left Turn No Right Turn
Would BARRICADES be needed? No ☐ Yes ☐ If yes, how many? _____

Barricade Start Date: ____/____/____ Start Time: ____:____ AM/PM

Barricade End Date: ____/____/____ Start Time: ____:____ AM/PM

MUST PROVIDE A *MAP AND DETAILED LISTING OF INTERSECTIONS* WHERE BARRICADES ARE REQUESTED.

NOTE: It is the event organizers' responsibility to move barricades to a safe location out of the public right-of-way. Any special signage (No Parking, Road Closed, etc.) signs should covered or removed. If removed, please place with barricades.

BARRICADES WILL NOT BE SUPPLIED UNLESS PROPER INSURANCE COVERAGE IS PROVIDED AND EVERY PERSON HANDLING BARRICADES HAS SUBMITTED A COMPLETED VOLUNTEER WAIVER FORM.

----- FOR BOARD OF PUBLIC WORKS USE ONLY -----

Application Approved/Denied by BPW _____ Date _____

BPW Signature _____

Application continued on next page.



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EVENT NAME _____ EVENT DATE _____

ADDITIONAL CONTACTS

Provide alternate contacts in the event we are not able to reach the person listed on the first page.

(1) Name of Alternate Contact/Producer _____

Address of Contact _____
Street City/State Zip Code

Business Telephone Number (include Area Code) _____

FAX Number (include Area Code) _____

Mobile Telephone Number (include Area Code) _____

Email Address _____

(2) Name of Alternate Contact/Producer _____

Address of Contact _____
Street City/State Zip Code

Business Telephone Number (include Area Code) _____

FAX Number (include Area Code) _____

Mobile Telephone Number (include Area Code) _____

Email Address _____

(3) Name of Alternate Contact/Producer _____

Address of Contact _____
Street City/State Zip Code

Business Telephone Number (include Area Code) _____

FAX Number (include Area Code) _____

Mobile Telephone Number (include Area Code) _____

Email Address _____

Application continued on next page.



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EVENT NAME _____ EVENT DATE _____

NOTARY PUBLIC AUTHORIZATION

This application must include a Notary Public who has authorized the signature of the applicant.

----- FOR NOTARY PUBLIC USE ONLY -----

I, the undersigned, swear and affirm that all statements and representations in this application are true and correct.

Signature of Applicant

STATE OF INDIANA
VANDERBURGH COUNTY

_____ being duly sworn, deposes and says that the matters
and things in the foregoing application are true.

Subscribed and sworn to and before me, a Notary Public, in and for said County and State, this

_____ day of _____, _____.

Signature of Notary Public

County of Residence _____ My Commission Expires _____

RETURN THIS COMPLETED APPLICATION AND ALL REQUIRED DOCUMENTATION TO:

Board of Public Safety
c/o Evansville Police Department
15 NW Martin Luther King, Jr. Blvd
Evansville, IN 47708

**Board of Public Safety will consider this
application ONLY if all required
supporting documentation is included.**

Did you attached your:

- Indiana State Excise Application for Temporary Beer/Wine Permit
- Certificate of Insurance
- Barricade Map & Detailed Listing of Intersections