

**CITY OF BUCYRUS, OHIO
EVENT/ASSEMBLAGE PERMIT**

Date Today _____ Date of Event Request _____

Organization or Sponsor _____

Applicant Contact Name _____

Applicant Contact Address _____

Applicant Email Address _____

Phone _____ Fax _____

Reason for Event or Assemblage _____

Event Address or Areas _____

Time of Event Start _____ End _____

Street Department - specify amount of equipment needed and ATTACH A MAP.

Barricades _____
Cones _____
Trash Cans _____
Other Equipment _____

Police Department - specify amount of Officers needed.

Officers _____
Cruisers _____
Auxillary _____
Explorers _____
Pioneer Students _____

Any Other Services needed. _____

There is absolutely no painting or marking of the streets or sidewalks permitted - including the parks. However, sidewalk chalk or duct tape is acceptable. All signage will be removed promptly after the event/assemblage by the Applicant(s). All barricades, cones, trash cans, or other equipment requested will be set off to the side or in the tree lawn area by the Applicant(s).

Signature of Applicant/Title _____

Police Department Approval _____ Date _____

Service-Safety Director Approval _____ Date _____