

# Parade and Right-of-Way Closure Permit Application



Date of Application: \_\_\_\_\_

Payment Due: \$ \_\_\_\_\_

This application is used to request a right-of-way closure for a parade or other special event. Applications must be submitted at least **90 days** in advance of the event. The applicant is responsible for covering the costs associated with any city personnel required for event safety, as well as barricades, cones, signage, and any other necessary safety equipment. Staffing estimates will be determined based on event size and complexity. The City Manager may modify fees based on the value of fostering community engagement and celebration in each instance. Applicants will be notified of the request's final determination once it has gone through the review process.

## Applicant Information

Name of Event: \_\_\_\_\_

Date of Event: \_\_\_\_\_ Time of Event: \_\_\_\_\_

Sponsoring Organization/Entity: \_\_\_\_\_

Organization/Entity Type:  Nonprofit  Corporation  Government  Other

Contact's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Event Coordination Information

1. Name of Street(s) Requesting to Close: \_\_\_\_\_

Starting Cross Street: \_\_\_\_\_ Ending Cross Street: \_\_\_\_\_

2. What times are requested for the street closure? Beginning Time: \_\_\_\_\_

Ending Time: \_\_\_\_\_

3. Type of Event:  Walk-a-Thon  Run/Marathon  Carnival/Festival  Parade  Filming  
 Bike Ride  Religious Ceremony  Political Event  Performance  Rally/Demonstration

4. Description of Event: \_\_\_\_\_

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5. If the Event is a parade, where are the starting and ending points? \_\_\_\_\_

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6. Do you require barricades?  Yes  No

If yes, describe where the barricades will be placed: \_\_\_\_\_

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7. Expected Event Attendance: \_\_\_\_\_

8. Describe the various safety measures you plan to utilize: \_\_\_\_\_

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\*Attach the following to the application:

- ✓ Route Map
- ✓ Proof of Liability Insurance (City of Portage, additional insured)

*It is hereby acknowledged that any permit issued by the City of Portage is conditional upon the applicant fulfilling certain requirements prior to the event, and should the applicant fail or neglect to fulfill any such condition, then approval for the event, as obtained from the City Manager, shall be automatically rescinded. Furthermore, failure to comply with permit conditions or safety requirements may result in permit revocation or denial of future applications. Any public property or safety equipment damage will be billed to the event organizer.*

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

RETURN THE COMPLETED APPLICATION TO:

Office of the City Clerk  
City of Portage  
7900 S. Westnedge Avenue  
Portage, MI 49002  
[cityclerk@portagemi.gov](mailto:cityclerk@portagemi.gov)  
ph: (269) 329-4511  
fax: (269) 324-8070

## City Department Review

### City Clerk

Sent to Directors: \_\_\_\_/\_\_\_\_/\_\_\_\_

Required Documents Completed & Submitted?

Sent to City Manager: \_\_\_\_/\_\_\_\_/\_\_\_\_

Proof of Liability Insurance - City add'l insured?

### Public Safety Director

Recommended:  YES  NO

*security, crowd control, and emergency response measures*

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

### Public Works Director

Recommended:  YES  NO

*estimates for barricades, waste receptacles, and other items*

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

### Transportation & Utilities Director

Recommended:  YES  NO

*traffic impact, detour plans, and signage requirements*

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Detailed Traffic Management Plan Attached?

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

### City Manager

Approved:  YES  NO

Final Estimated Cost: \$ \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_