



CITY OF ATHENS POLICE DEPARTMENT

THOMAS D. PYLE II, CLEE, CHIEF OF POLICE

APPLICATION and PERMIT TO PARADE ON CITY STREETS (A.C.O. 7.04.40)

Date of Event:

Name of Event:

Organizational Sponsor:

General Guidelines- Please read carefully and sign below

- Complete applications must be printed and submitted to the Athens Police Department no less than one (1) week and no more than ninety (90) days in advance of the planned event.
- Certificate of insurance that indemnifies and holds the City harmless to be submitted to APD **at least 24-hours prior** to the event.
- Overall dimensions of floats mounted on vehicles or trailers shall not exceed 9 feet in width, or 13 ½ feet in height.
- **No throwing** of objects from vehicles or floats, including candy. Walkers may hand out objects to parade viewers.
- Please list **reliable** contact information on this application. Those listed will be contacted by an Athens Police Supervisor to make arrangements for parade coverage. Successful contact and arrangements are paramount in **reducing the cost** of your event.
- **Cost** of additional overtime officers, city personnel, or equipment required to safely manage your event is to be **borne by the requesting organization** and paid at least 24-hours prior to the parade, unless otherwise noted. Your organization may provide marshals to assist with the event to help reduce cost, as approved by your assigned Athens Police Supervisor.

I, _____, am the person authorized by the applicant organization to make an application for a parade permit. I have read and understand the regulations and conditions stated in this application. It will be my responsibility to inform my associates, whom I represent, of these regulations and conditions. I also understand that if any person or persons in my organization fails to conform to the stated regulations found on the issued parade permit, sanctions may be imposed including the possibility that no parade permits will be issued to my organization for at least one year.

Signed: _____ **Date:** _____.

APPLICANT CONTACT INFORMATION:

Name: Phone:

Street Address:

City: State Zip Code:

E-Mail:

ALTERNATE APPLICANT CONTACT INFORMATION:

Name: Phone:

Street Address:

City: State Zip Code:

E-Mail:

EVENT INFORMATION

Assembly Location: Assembly Start Time:

Person in charge at assembly:

Mobile Phone:

Event Start Time: Estimated Number of persons: Estimated Number of vehicles/floats:

Location of Judging Stand(s) if applicable:

EVENT ROUTE:
Please describe exact route in detail and attach a map if available. Please do not write "Same as last year."

Please add any special requests to this section as well.

Disband Location: Estimated End Time:

Please send approved permits via: US mail E-Mail Pick up at APD

PERMIT TO PARADE ON ATHENS CITY STREETS- *for internal use only*

Received at APD DATE: _____

Assigned Shift Supervisor: _____

Fees waived for up to _____ overtime officers.

In order for this permit to remain valid, applicants must:

- Cooperate with the assigned Athens Police Supervisor to arrange police coverage for the event.
- Pay all fees associated with arranged coverage at least 24hrs prior to event (*Payment to be made at Utilities Billing using invoice provided by assigned Athens Police Supervisor*).
- Provide Certificate of Insurance to APD at least 24hrs prior to event.
- Adhere to any "special conditions" attached to this permit

Permit is:

APPROVED DENIED

Chief of Police Signature Date