

# STREET CLOSING / PARADE PERMIT APPLICATION

***Application must be turned in 60 days prior to event***

\_\_\_\_\_  
Today's date

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Phone number

\_\_\_\_\_  
Alternate phone number

\_\_\_\_\_  
E-mail address

\_\_\_\_\_  
Mailing address that we can send the approval/denial to

\_\_\_\_\_  
Event

Has this event taken place in the past?      No / Yes, On \_\_\_\_\_

\_\_\_\_\_  
Contact person on the day of the event

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Date of Event

\_\_\_\_\_  
Rain Date

\_\_\_\_\_  
Hours

\_\_\_\_\_  
Approximate number of participants

Will there be any type of selling or solicitation of funds? No / Yes\*\*\*

\*\*\* If yes, please contact the City Clerk's Office, Room 107, 382-5199 ext. 5303 for the necessary permits / licenses prior to approval of this application.

I am requesting: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature

A fee of \$10.00 is requested and checks should be made payable to the City of Schenectady

Received from: \_\_\_\_\_

Amount Received: \_\_\_\_\_

Date Received: \_\_\_\_\_

Received By: \_\_\_\_\_

Cash / Check # \_\_\_\_\_

For Internal Use only

Revenue Code 020062590

**Please note that this is only an application. Your special event Permit will be issued when approval has been received from City Department / Bureau Heads and the Mayor. Thank You.**