Event No:	
Event No:	



PARADE/STREET CLOSURE APPLICATION

Date: NAME OF GRO	OUP:		
NAME OF GROUP EVENT:		4	· -
I/we hereby request the temporary closure of Parade/Other:	The second secon	£	
Street(s):(Please enclose map of route if closure is rec	guested for the nurness of	a narado)	
Dates and Times Requested:			Ψ.
(For Parade Only)			
Estimated Number of Units: Ma	arshalling Area:		
Other Requests:			
			92
DISTRICT USE ONLY:			
Date Application Received in Full (inc	cluding damage deposit):		
Application Complies Fully with Distr	rict Policy:	Yes	No
Date <u>Approved / Denied</u> by Staff:			
Approved / Denied by:			
Date Approved by Council (if applicable (for Parades only)):	Resolution #:_	<u> </u>
Special Instructions/Requirements:			
FEE:	Date Paid:		Q1
Deposits:			
Total:	Receipt #:		

Event No:

GENERAL TERMS AND CONDITIONS – PARADES

- 1. Every applicant shall ensure adequate details and a map of the proposed parade route accompanies this application at least twenty-one (21) days prior to the event.
- 2. Where, in the opinion of the Detachment Commander of the RCMP or the Chief Administrative Officer of the District of Hope, traffic control devices are required, the District shall provide the devices at no cost to the permit holder who shall then be responsible for placing and removing the devices. If the District is required to place or remove the devices, the permit holder may be required to compensate the District for its services at a cost estimated by the Manager of Operations or the Chief Administrative Officer.
- 3. Any permit issued by the Chief Administrative Officer or his designate may be rescinded, revoked, amended or varied without compensation or prior notice to the permit holder.

ACKNOWLEDGMENT

I/WE HEREBY COVENANT to and with the District of Hope that upon permission being granted for the use of highways set out in this permit, I will use the highways in accordance with any plans, route maps, or schedules submitted as part of the application and to the satisfaction of the Chief Administrative Officer, and that I will observe, perform and carry out the regulations and provisions of all applicable municipal bylaws and the terms and conditions of the application and permit.

I HEREBY CERTIFY that I will indemnify and save harmless the District of Hope of and from all claims, damages and causes of action whatsoever including costs, which may be made, brought against of suffered by the District of Hope or in respect of, either directly or indirectly, the use authorized by this permit.

of all the terms		s application and		phly understand the per that the statements mad	
Dated this	day of	2	at		

(Signature of Applicant)