

Austin POLICE DEPARTMENT



LAW ENFORCEMENT CENTER 201 1ST ST NE STE 2 AUSTIN, MINNESOTA 55912 (507) 437-9400 FAX (507) 437-9546

EVENT APPLICATION

1. Event Title _____
2. Name/Address of Organization _____
3. Contact Person _____ E-mail _____
Phone _____ Cell Phone _____
4. Alternate Contact _____ E-mail _____
Phone _____ Cell Phone _____
5. Date of Event _____ Approximate Number of Participants _____
6. Assembly Area Location and Description _____

7. Starting Time of Event _____ Estimated Termination Time _____
8. Starting Point _____
9. Termination Point _____
10. Portion of Street Width: *(Run/Walk Events: Runners and walkers are to remain in the furthest right lane or out of the vehicle traffic lane as much as possible. Organizers are responsible for providing personnel wearing reflective safety gear along the route to assist participants at intersections.)* _____
11. Please draw a map on the back of this form, or attach a map or PDF of the event route, and indicate if barricades are needed. Travel route of event (and/or street closures with barricades): _____

Signature of Applicant

Date

Approved upon compliance with the following terms and conditions: _____

City Engineer

Date

Chief of Police or Designated Officer

Date