Status:

Permit #:

CITY OF HARRISBURG

APPLICATION FOR SPECIAL EVENT PERMIT

Traffic Safety, 1820 Paxton St, PA 17104

PLEASE PRINT CLEARLY Incomplete forms will be returned

| Your Name: | Date Submitted: | | | |
|--|---|--|---|--|
| Organization: | | | | |
| Address: | Phone Primary: | | | |
| City: | State: | zip: l | Phone Secondar | y: |
| Email: | | Organia | zation: | |
| Event Date: | _ Start Time (set u | ıp): | _ Ending Time: | |
| Number of estimated at | | | | |
| STREETS NEEDED BI | LOCKED OFF | | | |
| | | 5 | St TO: | St |
| | | | | |
| I have contracted: City PennDOT approved tra | | | to p | rovide MUTCD and |
| The Applicant MUST nearea. For bag meters cal 255-3141. Payments are | II STANDARD PA | RKING 234-2 | 2274. For "NO P | |
| Event Name: | | | | |
| **REQUESTING PARTY By acceptance of this perm person or persons to whom date(s), times, and shall be resulting from the activity | nit, the holder of it sh this permit is issued liable for any loss, d | all be bound by shall carry thi amage, or inju | y all applicable lav s permit on their p ry sustained by an | ws and ordinances. The person during the effective y person or by the City |
| * Must be received * Certificate of Ins * Approved PennE * All required fees | urance (COI) n OOT TE-300 Pe | nust be atta rmit must k | iched. De attached if | on State roads. |
| _ | | _ | | |
| HAVE ALL N | EIGHBORS/BUSI | cant Signature | — | |
| | r p | | | |
| City Engineer | or | | Traffic N | Manager |