

SPECIAL EVENT PERMIT APPLICATION

DUBUQUE COUNTY

63-3.6 'Special Event' means any occurrence on county highway right of way where the time and size of an event would substantially interrupt the safe and orderly movement of traffic or deprive the local residents unimpeded use of their properties. Special Events typically require a user of the roadway to preregister for the event. Events of less than 100 participants are typically exempt. This ordinance is not meant to apply to parking along county roads or in most instances to a ride or tour as defined in Section 63-3.5. It is also not meant to apply to an incident such as a funeral procession. (63-3.5 'Ride or Tour' means, any event in which the participants' activities are noncompetitive and the event organizer encourages and requires the participants to follow the Rules of the Road.)

Applications for permits shall be made to the Dubuque County Secondary Road Department a minimum of six (6) weeks prior to the date of the occurrence of the event. Attach additional information if required.

Today's Date: _____

Sponsoring Organization(s): _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Is this organization a Non-Profit 501 c3 organization? No _____ Yes _____ (Provide proof with application)

Name of Applicant: _____ Cell: _____

Day Phone: _____ Evening Phone: _____ Fax: _____

Address: _____ City: _____ State: _____ Zip: _____

Name of Alternate Contact Person: _____ Phone: _____

Description of Event: _____

Day(s) & Date(s) of Event: _____ Hours: _____ to _____

Location/Route Requested: _____

Estimated Number of Participants: _____ Estimated Number of Vehicles: _____

Estimated Number of Attendees/Spectators: _____

Will the event substantially interrupt the safe and orderly movement of traffic or deprive local residents' unimpeded normal use of their properties? Yes _____ No _____

How do you plan to control traffic to and from the event area and not interfere with non-participating users?

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Will the event involve vendors? Yes _____ No _____

If yes, attach a separate listing of all vendors with contact information.

Will first-aid, fire and rescue services, or other safety and security measures be needed?

Yes _____ No _____ *If yes, attach a separate listing with details/contact information*

Are any additional permits for any other government agencies required? Yes _____ No _____

If yes, list all agencies, contact information and type of permits separately.

Are there any special requests or circumstances (i.e. banners, signs, etc.) Yes _____ No _____

If yes, provide details: _____

Contact person during Event: _____

Means of contact during Event: _____

Attachments:

- Parking/Traffic Plan
- Request for Other Services
- Other Agency Permits
- Safety & Security Plan
- Certificate of Insurance
- Non-Profit Verification
- Map/Site Plan
- Vendor Lists
- Other: _____

Once approved, the sponsor shall assume full responsibility for compliance with all conditions, fees and charges and further agrees to pay any cost associated with damage to Dubuque County road right of way, cleanup, or any other additional expense caused by this event. I have a copy of the Special Events Ordinance, and will supply the required insurance certificate, permits and other assessed fee at least 14 days prior to the event. (See Special Events Ordinance)

Applicant agrees to leave the road right of way in the same condition as found, cleaning up all litter and debris after the event. Applicant is responsible for any damages to county property during the event either by participants or spectators. Applicant agrees to abide by all state laws and Dubuque County rules and regulations. The undersigned applicant for a special event permit understands and agrees that Dubuque County will not be responsible for any injury to persons or damage to property arising out of or incident to the activities which are the subject of this application. The undersigned applicant agrees by the execution hereof to indemnify and hold harmless Dubuque County against all liabilities, costs, and expenses which may arise in consequence of the granting of this permit.

The undersigned has full authority to represent the sponsoring organization:

Applicant Signature: _____ Date: _____

Dubuque County Engineer Dept.: _____ Date: _____

Dubuque County Sheriff Dept.: _____ Date: _____

RETURN COMPLETED APPLICATION TO:
Dubuque County Secondary Road Department
1225 Seippel Rd
Dubuque, IA 52002
(563)-557-7283
engineer@dubuquecounty.us

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OFFICE USE ONLY:

() APPROVED
() DENIED

Authorized Signature(s)

_____	Date _____
_____	Date _____
_____	Date _____

Fee Assessment:

_____ Permit Fee \$50.00
 _____ Permit Fee Waived

Paid: Cash _____ Check # _____

Insurance Certificate Received _____

Special Considerations and Conditions: _____

Initials: _____