



Event Timeline:

	Day of Week	Date	Start Time	End Time
Set – Up				
Event Start				
Event End				
Tear - Down				

Section 3 – Street Closure Requested (if applicable)

Streets/Intersections to start and stop closures:

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Does the requested street closure include DOT approval? [] Yes [] No



Section 5 – Fees [to be completed by staff]

Event Questions	Yes/No	If yes, Fee	Sub - Total
Does this event require a Special Event Alcohol Permit Application?		If yes, a Special Event Alcohol Permit Application must be completed.	
Is this application more than 90 days from the event date?		\$25	
Is this application less than 90 days from the event date?		\$50	
Does this event require/request the closure of ONLY City Streets?		\$50	
Does this event require the closure of City Streets and/or State Routes (Laurel Street)?		\$150	
Are Springfield Officers Requested? State Route Closure Requires a minimum of two Springfield Officers for every hour the road is closed. # of Officers _____ # of Event Hours _____		\$50/hour/officer	
Barricades (includes delivery & pickup – does not include setup) # of Barricades requested: _____ Delivery/Pickup Address: _____		Up to 30 \$25 More than 30 \$60	
Additional Application Review for Changes (date/time/streets/etc.)		\$25/review	
Total Special Event Permit Fees			



Applicant Signature: _____ Date: _____

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Application Received on: _____ Amount Due : _____ Invoice

Police Department Review: [] Approved [] Denied Reason for
Denial _____

Staff Review: [] Approved [] Denied Reason for
Denial _____

Council Approval Needed [] Yes [] No If Yes, Date Approved

Permit Issued _____ City Official
Signature _____