

This application must be filed at least 30 days prior to the date of the event. Please call Captain Nathan O'Dell at 540-443-1415 for consultation prior to filling out and submitting the form. Please return this form to Blacksburg Police Department, 200 Clay St., Blacksburg, VA 24060 or to nodell@blacksburg.gov.

*\*Paint used for special events markings in the street should be a latex base temporary marking spray paint that is intended to wear away and fade quickly.*

**Date:** \_\_\_\_\_ **Hour:** \_\_\_\_\_ **Duration:** \_\_\_\_\_ **Expected Number of Participants:** \_\_\_\_\_

**Place:** Please include a map of the proposed route with this application

\_\_\_\_\_

\_\_\_\_\_

**Purpose:** \_\_\_\_\_

\_\_\_\_\_

**Participants:** (animals, vehicles, bikers, walkers, runners, etc.) *See page 2, Insurance Requirements*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Sponsors:**(Individuals and organizations)

Name

Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Applicant:** (Person in charge and responsible for conduct of parade/demonstration and participants' compliance with all laws)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #1: \_\_\_\_\_ Phone #2: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**Application Fee:** Parade, procession, march, footrace, bicycle race, or other event requiring closure of sidewalk, street or thoroughfare - **\$75** or Parade, procession, march, footrace, bicycle race, or other event requiring monitoring of sidewalk, street, or thoroughfare - **\$25**.

**APPLICATION PAID:** Yes \_\_\_ No \_\_\_ Amount: \_\_\_\_\_

DENIED \_\_\_ APPROVED \_\_\_ APPROVED WITH CONDITIONS \_\_\_

\_\_\_\_\_  
DATE

\_\_\_\_\_  
CHIEF OF POLICE (OR DESIGNEE)

## INSURANCE REQUIREMENTS

Applicants shall provide proof of liability insurance acceptable to the town and written for no less than the limits cited 30 days prior to the event. If one policy has several categories, the amount of coverage must be at least \$1,000,000.

Event Type	Minimum Limit of Insurance
Food and Beverage: Sale or Distribution to General Public	\$1,000,000 per occurrence
Outdoor Staged Entertainment	\$500,000 per occurrence
Amusement Devices	\$500,000 per occurrence
Fireworks or Pyrotechnics (including fire performers)	\$1,000,000 per occurrence
Parades and Other Miscellaneous Activities (Required for parades with motor vehicles only.)	\$500,000 per occurrence
Sporting Events: Requiring Street Closure	\$1,000,000 per occurrence
Major thoroughfare	\$500,000 per occurrence
Residential (block parties are exempt)	
Sporting Events: Not Requiring Street Closure	\$500,000 per occurrence

The Town of Blacksburg does not sell insurance. However, this type of insurance policy can be acquired from most private insurance carriers. **The Town of Blacksburg requires that the town be named as an additional insured and contain the following information:**

1. Certificate Holder: Town of Blacksburg
2. Description of date(s) of event or a statement that the coverage is for all events held on town property during the policy period
3. For sale or distribution of food and beverage: Products Liability Coverage
4. For sale or distribution of alcoholic beverage: Liquor Liability Coverage

The Town of Blacksburg reserves the right to modify the cited minimum liability insurance limits based on the nature and degree of risks to the public.

**Liability insurance is required for these events. Final consideration of the event application will be pending until a certificate of liability insurance is provided.**

Applicant shall assume risks incident to or in connection with the permitted activity and shall be solely responsible for damage or injury, of whatever kind or nature, to person or property, directly or indirectly arising out of or in connection with the permitted activity or the conduct of the applicant's operation. Applicant hereby expressly agrees to defend and save the Town of Blacksburg, its officers, agents, employees, and representatives harmless from any penalties for violation of any law, ordinance, or regulation affecting its activity and from any and all claims, suits, losses, damages or injuries directly or indirectly arising out of or in connection with the permitted activities or conduct of its operation or resulting from the negligence or intentional acts or omissions of the applicant or its officers, agents, and employees.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_