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**PERMIT REQUIREMENTS:**

Fire Protection	Site Plan Attached	[ ]	Yes	[ ]	No
Medical Services	Site Plan Attached	[ ]	Yes	[ ]	No
Parade Route Plan	Plan Attached	[ ]	Yes	[ ]	No
Parking Facilities	Site Plan Attached	[ ]	Yes	[ ]	No
Sanitary Facilities	Site Plan Attached	[ ]	Yes	[ ]	No
Street Closure(s)	Site Plan Attached	[ ]	Yes	[ ]	No

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**REQUIRED FEE:** \$ \_\_\_\_\_ **FOR:** \_\_\_\_\_

CHIEF OF POLICE  
OR DESIGNEE \_\_\_\_\_ Date: \_\_\_\_\_

Approved: [ ] Denied [ ] Comment: \_\_\_\_\_

COMMUNITY DEV.  
DIRECTOR \_\_\_\_\_ Date: \_\_\_\_\_

Approved: [ ] Denied [ ] Comment: \_\_\_\_\_

FIRE CHIEF OR  
DESIGNEE \_\_\_\_\_ Date: \_\_\_\_\_

Approved: [ ] Denied [ ] Comment: \_\_\_\_\_

JEFFERSON COUNTY  
HEALTH DEPARTMENT \_\_\_\_\_ Date: \_\_\_\_\_

Approved: [ ] Denied [ ] Comment: \_\_\_\_\_

OREGON DEPT. OF  
TRANSPORTATION \_\_\_\_\_ Date: \_\_\_\_\_

Approved: [ ] Denied [ ] Comment: \_\_\_\_\_

PUBLIC WORKS  
DIRECTOR OR DESIGNEE \_\_\_\_\_ Date: \_\_\_\_\_

Approved: [ ] Denied [ ] Comment: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

Approved: [ ] Denied [ ] Comment: \_\_\_\_\_

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**PERMIT FOR SPECIAL EVENT:** Permission for the above named applicant (Permittee) to conduct the special event specified herein is hereby granted.

\_\_\_\_\_ Date: \_\_\_\_\_  
City Administrator