SPECIAL EVENTS REQUEST
LINDSBORG DEPARTMENT OF PUBLIC SAFETY

Requests for special events assistance, or exemption from city ordinances for special event activities should be completed and returned to the Director of Public Safety. Confirmation or denial will be made in writing within one working day to the person completing the request form unless otherwise notified.

Special Event Name	*Event Location*
Event Date(s)	*Event Time*
Sponsoring Group Name	*Group Address / Phone*
Requestor Name	*Requestor Phone*
Requestor Email	

Outline Special Event Activities (attach additional info as needed)

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Individual who will be available on-site for contact by Public Safety Personnel and responsible for the actions of the group or event	
Event Contact Person	*Event Contact Phone*
Event Contact Email	

Signature	*Date*

****For Office Use Only****

Request Received By *Date/Time*	*Reviewer Signature*

APPROVED ( ) DENIED ( ) DATE:

Additional Notes _____

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