

City of Pico Rivera
 6615 Passons Boulevard
 Pico Rivera, CA 90660
 (562) 801-4389



APPLICATION FOR PARADE PERMIT

Date of Request: _____

Date of Event: _____

Starting Time: _____ AM

_____ PM

Ending Time: _____ AM

_____ PM

 Name of Organization

 Name of Authorized Person

 Address

 Phone

 Number of Persons in Parade

 Number of Animals

 Number of Vehicles

Proposed Route of Parade (**ATTACH MAP**): _____

Will Parade require whole width of street(s)? Yes No If not, what part? _____

The proposed assembly area will utilize the following streets (**BE SPECIFIC AND INCLUDE CROSS STREETS AFFECTED**):

The disassembly area will utilize the following area or streets (**BE SPECIFIC AND INCLUDE CROSS STREETS AFFECTED**):

I hereby affirm that I have full knowledge of the provision of Chapters 12.52.010, 12.52.020, 12.52.030 of the Pico Rivera Municipal Code and agree to comply with the requirements of said ordinance.

 Name of Organization

 Signature of Authorized Representative

FOR OFFICIAL USE ONLY

RECOMMENDED SERVICES: State Permit: _____ Barricades: _____ ECATC: _____
 Street Sweeping: _____ Signs: _____ Other: _____

Distribution: Public Works, L.A. County Sheriff, City Clerk

<input type="checkbox"/> APPROVED	<input type="checkbox"/> APPROVED	<input type="checkbox"/> APPROVED
<input type="checkbox"/> APPROVED with the following conditions:	<input type="checkbox"/> APPROVED with the following conditions:	<input type="checkbox"/> APPROVED with the following conditions:
<input type="checkbox"/> DENIED for the following reasons:	<input type="checkbox"/> DENIED for the following reasons:	<input type="checkbox"/> DENIED for the following reasons:
Public Works	L. A. County Sheriff	City Clerk
Date	Date	Date