

Town of Geneva

N3496 Como Road
Lake Geneva, WI 53147
(262) 248-8497
Fax (262) 249-8873

SPECIAL EVENT PERMIT APPLICATION

REQUESTOR

Name _____

Address _____

City, State, Zip _____

Phone _____ Cell _____

E-Mail Address _____

EVENT SPECIFICS

Date _____

Time _____

On-Site Security Yes / No How many individuals? _____

Road Closure Requested Yes / No

Certificate of Insurance Required Yes / No

PROVIDE THE FOLLOWING DOCUMENTS

- 1) Completed Application
- 2) Map Showing Circulation of Traffic around Closure, if Required
- 3) Neighbor Approvals (Owners must have access to their property)
- 4) Cost Recovery Form
- 5) Certificate of Insurance, if Required
- 6) Emergency Contact Name and Number for on-duty police officer(s)

Name

Date