



Office of Emergency Management Special Event Permit Application



Questions / Completed Form directed to: Mike Wahl, Deputy Director, EMA
Direct Line: 847-416-7504, Direct Fax: 847-416-7554 Email: MWahl@waucondafire.org

109 West Liberty Street
Wauconda, IL 60084

Date of Application: _____

Permit Number: _____

Type of Event: Block Party Parade Athletic Festival Other _____

Applicant Information:

Name: _____ Address: _____

Telephone: Day: _____ Evening: _____ Fax: _____ Cellular: _____

Email Address: _____

Event Information:

Name of Event: _____ Date of Event: _____

Location of Event: _____

Time: Starts: _____ Ends: _____

Road Closure / Blockage: Yes No *(If Yes, provide map showing area)*

Time of Closure / Blockage: Starts: _____ Ends: _____

Person in Charge Day of Event: Name: _____

Telephone: Day: _____ Evening: _____ Fax: _____ Cellular: _____

Email Address: _____

Route Information: *(Parades / Athletic Events - Route Map Required)*

Assembly Area: _____ Completion Point: _____

Number of Participants: _____

Special Requests / Notes:

Do not write below this line - Official Use Only

<input type="checkbox"/>	Emergency Management	<input type="checkbox"/>	Planning Meeting	<input type="checkbox"/>	Incident Action Plan	<input type="checkbox"/>	On-Site Inspection
<input type="checkbox"/>	Village Administration						
<input type="checkbox"/>	Fire District						
<input type="checkbox"/>	Police Department						
<input type="checkbox"/>	Public Works						
<input type="checkbox"/>	Other: _____						

	_____	_____
	<i>Emergency Management Approval</i>	<i>Date</i>
	_____	_____
	<i>Village Administration Approval</i>	<i>Date</i>