City Hall
316 West Lake Street
Chisholm, MN 55719
Tel: (218)254-7900 Fax: (218)254-7955
www.ci.chisholm.mn.us

REQUEST FOR CITY EVENT/STREET CLOSURE/CITY WIDE FESTIVAL

Date of Application: _____

Event Title/Name: _____

Event Date/Time:

Set Up:	Date: _____	Time: _____ to _____
Actual Event:	Date: _____	Time: _____ to _____
Clean Up:	Date: _____	Time: _____ to _____

Location (address) of Event: _____

Description of Event/Street Closures (please be specific):

Estimated Attendance (participants and spectators): _____

Application Information: (person/group responsible)

Sponsoring Organization Name: _____

Mailing Address: _____

City, State, Zip Code: _____

Primary Contact/Applicant Name: _____

Phone #: _____ Fax#: _____ Cell#: _____

Email: _____

Website Address: _____

Name of Contact person During Event: _____ Cell #: _____

Alternate Contact Person: _____ Cell #: _____

Refer Media or Citizen Inquiries to: _____ Phone #: _____

Additional Requests from City:

Garbage Cans_____

Street Barriers_____

Orange Cones_____

Additional requests from the city:

To have your request submitted for approval by the city council submit this form 10 days prior to the council meeting. Council meetings are held the 2nd and 4th Wednesdays of the month (excluding June, July, and August when they are held only the 2nd Wednesday of the month). Send requests to Susan Trunk at strunk@ci.chisholm.mn.us or bring to Chisholm City Hall. For additional questions call Susan Trunk at 218-254-7904.

Noise ordinance requests are granted no later than 11:00 pm. Please note that if there are complaints about the noise level at any time, the police will request for it to be turned down.

Office Use Only

☐ Police Chief

☐ Fire Chief

☐ Ambulance Director

☐ Public Works Supervisor

☐ City Administrator

_____ Date Passed by City Council