

## CITY OF CRETE APPLICATION FOR SPECIAL EVENT PERMIT

Data of Fivent	DO NOT WRITE IN THIS SPACE
Date of Event	Application # SE 23-0
Start Time of Event 1 USK	Application # JC AS
/ // // /	Public Works Review
Finish Time of Event 35/40 Minutes	Emergency Services Review
Location of Event	
The Earlens	City Administrator Review
THE CANALD	Council Meeting Date
1405 Hickou AV	June 15th 202
Cysto NE 108322	JULIE 10, and
CRUINC (1855)	Approved
☐ This request is for temporary occupation of the street	Danied
or sidewalk right-of-way.	Denied
Streets or Alleys requesting to be closed	Insurance Certificate
+ 1 %	Required
_NA	Ins. Cert. Received
	Conditions listed on back
	Conditions fisted on back
Special Equipment	
NA	
Organization \( \mathcal{V} \)	
Responsible Party	
, <i>K</i>	
Address	
Phone NA	
	1/. 6 12
(1 (1) (1) (1)	Kim Sasek
Signature of Responsible Party	4028266450
	<b>→</b> ='

REQUIRED ATTACHMENTS:
☐ Diagram or print of location of event.
│☐ If alcoholic liquor will be served, copy of SDL.
If alcoholic liquor will be served, description of barricades, devices, security measures etc. to ensure compliance with The Nebraska Liquor Control Act:
Copy of insurance covering event with City of Crete as named insured.



