

**HAMMOND POLICE DEPARTMENT
HAMMOND, LOUISIANA**

APPLICATION FOR PARADE PERMIT

TODAY'S DATE: _____ TIME: _____

DATE OF PARADE: _____ STARTING TIME: _____ ENDING TIME: _____

NAME OF PERSON FILING THIS APPLICATION: _____

NAME: _____

ADDRESS: _____

PHONE #: _____ CELL #: _____

EMAIL: _____ FAX #: _____

ORGANIZATION NAME: _____

ADDRESS: _____

PHONE #: _____ CELL #: _____

EMAIL: _____ FAX #: _____

PARADE CHAIRMAN: _____

Please attach a map with the route.

ROUTE OF PARADE AND STARTING POINT: _____

ROUTE TO BE TRAVELED: _____

TERMINATION POINT: _____

WILL PARADE OCCUPY ALL OR ONLY A PORTION OF STREET: _____

ASSEMBLY AREA: _____

TIME UNITS WILL START TO ASSEMBLE IN THE ASSEMBLY AREA: _____

APPROXIMATE NUMBER OF UNITS: TRUCKS: _____ FLOATS: _____ AUTOS: _____

MARCHING UNITS: _____ MARCHERS: _____ BANDS: _____ OTHER: _____

NOTE: If approved, this in no way obligates the Hammond Police Department to make any notifications or to supply set up, cleaning, or other services for this event.

BELOW TO BE FILLED OUT BY HAMMOND POLICE DEPARTMENT

DATE RECEIVED BY: _____ TIME RECEIVED: _____

APPROVED: _____ (YES) _____ (NO)

REMARKS: _____

Authorized Signature Date