

# CITY OF JURUPA VALLEY

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## Engineering Department

Email: [Engineering@JurupaValley.org](mailto:Engineering@JurupaValley.org)

STAFF USE ONLY

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|--|
| Permit Application No.                                       |
| Date Application Received:                                   |
| Non-refundable Application Processing Fee:<br><b>\$50.00</b> |
| Receipt No. (Processing Fixed Fee):                          |

### PARADE & SPECIAL EVENT PERMIT APPLICATION

The undersigned hereby applies for a permit to conduct a parade or special event which is proposed to take place within the City of Jurupa Valley road right-of-way as follows. Please submit the application no later than **sixty (60) days prior to the event.**

|                                   |                                     |                                    |       |     |
|-----------------------------------|-------------------------------------|------------------------------------|-------|-----|
| Name of Sponsoring Organization   | Sponsor's Mailing Address           | City                               | State | Zip |
| Name of Person In Charge of Event | Daytime Phone Number                | 24-hour Emergency Phone Number     |       |     |
| Name of Event                     | Date(s) of Event (First – Last Day) | Time (Beginning – Ending Each Day) |       |     |
| Applicant's Name (Printed)        | Applicant's Mailing Address         | City                               | State | Zip |
| Applicant's Signature             | Daytime Phone Number                | Email                              |       |     |

**Type of Event:**       Parade                       Bicycle Ride                       Running/Walking  
 Block Party                       Other (Describe) \_\_\_\_\_

**General Description of Event & Activities:**  Brochure, Flyer, Advertisement, Etc. Attached in Addition  
 \_\_\_\_\_  
 \_\_\_\_\_

**Anticipated Size of Event:**      Estimated Number of Sponsor Participants: \_\_\_\_\_      Estimated Number of Parade/Event Spectators: \_\_\_\_\_

**Address / Location of Event or Description of Route:**       Map Attached in Lieu  
 \_\_\_\_\_

**Describe Portion of Roadway to Be Used:** \_\_\_\_\_  
 \_\_\_\_\_

**Indicate Any Public Services Requested:**       Police Services Requested       Fire Prevention Services Requested       Barricades, Cones, Signs, Other Parking/ Traffic Control Requested  
 \_\_\_\_\_