

SPECIAL EVENT HIGHWAY PERMIT # _____

SPECIAL EVENT HIGHWAY PERMIT APPLICATION

Highway Application Submitted Date: _____

Name of Event: _____

Event Date(s): _____

Event Schedule: Start time: _____ Finish time: _____

County Roads (by Name) to use in route* (**Must include a color map**): _____

*Approvals from other jurisdictions (Townships, Municipalities, IDOT, etc.) may also be required when routing is designed for event.

Does your event (check all that apply) -

- Take place on a County Highway?
- Utilize any portion of a County Highway right-of-way? Or
- Enter/exit upon or cross a County Highway?
- Take place on a township road? Your event route will be checked for conflicts with planned construction and maintenance work. You will be referred to the appropriate Township Highway Commissioner for further coordination.
- Other (explain) _____

Will your event (check all that apply) –

- Cause traffic to slow or stop?
- Require traffic control for ingress/egress to the event site? (i.e. festival, farmers market, carnival)
- Require traffic control for moving event? (i.e. bike race)
- Require lane closure and detouring of Traffic?
- Other (explain) _____

Submit traffic control plan and/or parking and circulation plan.

FOR OFFICE USE ONLY

Permit Status: _____Approved _____Denied

Explanation/Conditions _____

Date: _____

County Engineer