



# SPRINGETTSBURY TOWNSHIP APPLICATION FOR LICENSE TO HOLD A PARADE OR PUBLIC ASSEMBLY WITHIN THE TOWNSHIP

**For General Questions or Comments Regarding Compliance:**  
**Go To: The Township's Website – [Springettsbury.com](http://Springettsbury.com)**  
**Click on: Township Municipal Ordinances**  
**Refer To: Parades & Public Assembly - Part II, Chapter 209**

The undersigned hereby applies for a license to hold a parade or public assembly involving streets or sidewalks within the Township under **Parades & Public Assembly - Part II, Chapter 209** - of Springettsbury Township, York County, Pennsylvania.

TYPE OF ACTIVITY: (Describe in detail, including plans for assembly and dispersal, including setup and takedown times):

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DATE AND TIME: \_\_\_\_\_

RAIN DATE AND TIME: \_\_\_\_\_

LOCATION: \_\_\_\_\_

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Will the parade or public assembly be commencing, terminating, or otherwise partially occurring within another municipality? Yes No

If yes, list said municipality and whether a permit is required and has been obtained from said municipality.

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Are you requesting closure of a public street or roadway? Yes No

Will the parade or public assembly require the closure of a state highway? Yes No

If yes, has a permit or other authorization been obtained from the Pennsylvania Department of Transportation? Yes No

Are you requesting to traverse a public street or roadway without closure of said public street or roadway?  
Yes      No

Are you requesting use of a sidewalk?    Yes      No

Map Attached:            Yes      No

Detail provisions being made for sanitation facilities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you requesting any special assistance from the Township?    Yes      No      If yes, please detail:

\_\_\_\_\_  
\_\_\_\_\_

Estimated number of persons expected to attend: \_\_\_\_\_

Number and kind of vehicles or other equipment or animals expected to participate: \_\_\_\_\_

\_\_\_\_\_

Name, address and telephone number of person in attendance responsible for the event on the day of activity: \_\_\_\_\_

\_\_\_\_\_

In case of cancellation or postponement, person responsible for notifying the police department:

\_\_\_\_\_

\_\_\_\_\_

NAME OF APPLICANT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PH#: \_\_\_\_\_

ORGANIZATION: \_\_\_\_\_

ADDRESS AND PHONE NUMBER OF ORGANIZATION: \_\_\_\_\_

\_\_\_\_\_

HEAD OF ORGANIZATION: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

**License Fee for Application \$10.00 (non-refundable)**

Application and feesreceived by: \_\_\_\_\_

Date received: \_\_\_\_\_

Approved                      Rejected

Township Approval:

By: \_\_\_\_\_

Title: \_\_\_\_\_

Township Rejection:

By: \_\_\_\_\_

Title: \_\_\_\_\_

Reasons For Rejection: \_\_\_\_\_

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