Community in Motion

CITY OF CRETE
APPLICATION FOR SPECIAL EVENT PERMIT

Event Title: Halloween street block

Date of Event October 31, 2026

Start Time of Event 6:00 PM

Finish Time of Event 8:00 PM

Location of Event West entrance into neighborhood.
Corner of Iris Ave and St. Andrew's Dr.

DO NOT WRITE IN THIS SPACE

Application #_____

City Admin. Review _____

Public Works Review _____

Emergency Services Review _____

Parks & Recreation Review_____

Council Meeting Date

_____

Approved _____

Denied _____

Insurance Certificate Required _____

Ins. Cert. Received _____

☑ This request is for temporary occupation of the street or sidewalk right-of-way.

Streets or Alleys requesting to be closed . West entrance into neighborhood. St. Andrew's Dr.

Special Equipment traffic barricade

Organization Neighborhood

Responsible Party Erika Newmyer

Address 2005 Fairway Dr. Crete, NE 68333

Phone 402-699-8661

(COMPLETE REVERSE SIDE)

By signing this application, Applicant agrees to indemnify and hold the City of Crete and all of its officers and employees harmless from and against any and all claims made by any person or any loss or damage sustained by any person as a direct result of the acts or omissions of the Applicant, its employees, agents, invitees, or guests or as a direct result of the event set forth in the application and any activities related thereto (the "Event"). Applicant agrees to abide by all applicable laws, rules, and regulations pertaining to Applicant's event, including those relating to copyright and intellectual property. Applicant shall bear the sole responsibility for securing any necessary licenses, including music licenses, prior to the event and shall indemnify and hold the City of Crete and all of its officers and employees harmless from and against any and all claims made by any person alleging intellectual property infringement or other claims related to licensure or lack thereof.

Signature of Responsible Party

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:

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☐ Copy of insurance covering event with City of Crete as named insured.