



**Lumpkin County  
Planning Department**  
25 Short Street, Suite 10  
Dahlonega, GA 30533  
(706) 864-6894

**Permit for  
Parades, Public Assemblies,  
Demonstrations, and Rallies  
In Public Places**

Date Received: \_\_\_\_\_

***Applicant answers all questions on pages 1-4; attach separate sheet(s) if necessary.***

**Application must be received a minimum of 30 days prior to event and must be complete and legible.**

PARADE    RALLY    PUBLIC DEMONSTRATION    PUBLIC ASSEMBLY    ROAD CLOSING    OTHER

1. Name of Event: \_\_\_\_\_
2. Location of Event: \_\_\_\_\_ TMP # \_\_\_\_\_
3. Date(s) of Event: \_\_\_\_\_  
Time of Event: Start: \_\_\_\_\_ a.m. / p.m.    End: \_\_\_\_\_ a.m. / p.m.
4. Provide information listed below for the **main contact person** responsible for the organization of this event:

Name:	Title:
Organization:	Telephone #:
Email Address:	Cell Phone #:
Address: _____ City: _____ State: _____ Zip Code: _____	

5. Provide information listed below for any key personnel involved in coordinating this event. Also, provide information listed below on each officer of the club, organization, corporation or partnership requesting this event. Attach a separate sheet if necessary.

Name:	Title:
Organization:	Telephone #:
Address: _____ City: _____ State: _____ Zip Code: _____	

Name:	Title:
Organization:	Telephone #:
Address: _____ City: _____ State: _____ Zip Code: _____	

Name:	Title:
Organization:	Telephone #:
Address: _____ City: _____ State: _____ Zip Code: _____	

Name:	Title:
Organization:	Telephone #:
Address: _____ City: _____ State: _____ Zip Code: _____	

- 6. Expected number of participants: \_\_\_\_\_
- 7. Physical description of materials to be distributed: \_\_\_\_\_
- 8. How do participants expect to interact with public? \_\_\_\_\_
- 9. Route of event: (attach a detailed map of the route) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- 9.a. Number and type of units in parade: \_\_\_\_\_
- 9.b. Size of the parade: \_\_\_\_\_

10. Will any part of this Event take place **within** the City Limits of Dahlonega? \_\_\_\_\_

If YES, do you have a permit for the event from the City? \_\_\_\_\_ Date Issued: \_\_\_\_\_ \* **Attach Copy**

11. Do you anticipate any unusual problems concerning either police protection or traffic congestion as a consequence of the event? \_\_\_\_\_ Yes \_\_\_\_\_ No If YES, please explain in detail: \_\_\_\_\_

\_\_\_\_\_

12. List all prior parades or public assemblies, demonstrations or rallies in a public place within Lumpkin County for which you obtained a permit: (Also include dates – attach separate sheet, if necessary). \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Details:** Please outline what your event will involve: (number of people / life safety issues / vendors / cooking / tents / rides / handicap parking / egress) – *attach separate sheet if necessary.*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

**Route or Lay Out:** *(attach a detailed site plan)*

What participation, if any, do you expect from **Lumpkin County Emergency Services**? \_\_\_\_\_

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What participation, if any, do you expect from the **Lumpkin County Sheriff Department**? \_\_\_\_\_

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**Insurance Requirements:**

In compliance with Ordinance Section VII (C), an applicant for a permit shall obtain liability insurance from an insurer licensed in the State of Georgia for the parade, public assembly, demonstration or rally in a public place, if one or more of the following criteria exists:

1. The use, participation, exhibition, or showing of live animals;
2. The use, participation, exhibition, or showing of automobiles of any size or description, motorcycles, tractors, bicycles, or similar conveyances;
3. The use of a stage, platform, bleachers, or grandstands that will be erected for the event;
4. The use of inflatable apparatus used for jumping, bouncing, or similar activities;
5. The use of roller coasters, bungee jumping, or similar activities; or
6. Vendors or concessions.

Does your parade, non-spontaneous private assembly, demonstration, or rally in a public place meet any of the criteria above?  Yes  No If yes, which one(s)? \_\_\_\_\_

Any applicant required to provide insurance shall provide Lumpkin County with a copy of the Certificate of Insurance from an insurer authorized and **licensed by the State of Georgia**. Lumpkin County shall be added as an additional named insured for the event on the Certificate of Insurance by the carrier. The minimum policy limits shall be **\$1,000,000.00 per incident** and **\$2,000,000.00 aggregate** for the entire event. All costs for insurance and naming Lumpkin County as an additional named insured shall be borne solely by the applicant. Such insurance shall protect Lumpkin County from any and all claims for damages to property and/or bodily injury or death.

Is the Certificate of Liability Insurance attached?  Yes  No  Not applicable to this event

Additional information/comments about liability insurance: \_\_\_\_\_

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Additional information/comments about this application: \_\_\_\_\_

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**APPLICANT'S SIGNATURE FOR THE PERMIT APPLICATION; RELEASE & WAIVER OF LIABILITY;  
AND AGREEMENT FOR FINANCIAL RESPONSIBILITY.**

**APPLICATION:**

OATH: I hereby swear and affirm that the information provided with this application for parade, public assembly, demonstration, or rally is true and correct to the best of my knowledge. In addition, I agree to abide by all regulations of the ordinance and to advise all participants of the conditions of the permit.

**RELEASE & WAIVER OF LIABILITY:**

The permit holder shall indemnify and hold Lumpkin County harmless from any claim, demand, or cause of action that may arise from activities associated with the event. I acknowledge that I understand this Release, and I hereby agree for myself and on behalf of the Applicant to indemnify and hold harmless Lumpkin County, Georgia and its agents, officers, and employees, individually and jointly, from and against any claim for injury (including, but not limited to, personal injury and property damage), loss, inconvenience, or damage suffered or sustained by any individual, including but not limited to, business owners, patrons, participants of the parade, public assembly, demonstration, or rally, and spectators participating in and/or occurring during the event, unless the claim for injury is caused by intentional misconduct of an individual, agent, officer, or employee of Lumpkin County.

**AGREEMENT FOR FINANCIAL RESPONSIBILITY:**

The undersigned agrees to be solely responsible for cleaning affected areas littered during the activity, providing sufficient parking and storage areas for motor vehicles, providing temporary toilet facilities, and providing other similar special and extraordinary items deemed necessary for the permitted activity by Lumpkin County to keep the area of the event safe and sanitary. However, Lumpkin County shall not require individuals, organizations, or groups of persons to provide personnel for normal governmental functions such as traffic control, police protection, or other activities or expenses associated with the maintenance of public order. If additional requirements are placed upon an applicant and if such requirements are not met, then Lumpkin County may revoke the issued permit and/or deny any subsequent permit requested by the applicant. Lumpkin County shall be entitled to recover from the applicant any sum expended by Lumpkin County for extraordinary expenses not provided by the applicant. The additional expense may include, but not be limited to, Lumpkin County utilizing off-duty personnel or providing equipment or resources from other areas of the county to supplement equipment or resources already present.

Sworn to and subscribed before me  
this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

\_\_\_\_\_  
Applicant's Printed Name

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Notary Public, State of Georgia

My Commission Expires: \_\_\_\_\_

**Note to Applicant: Once your permit is processed, Planning Department has ten days to process your application and render a decision.**



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**(EMERGENCY SERVICES)**

**EMERGENCY SERVICES:** Please complete this sheet and return it to Lumpkin County Planning Department. *(Please attach additional sheet, if necessary.)*

Name of Event: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

Any anticipated problems with proposed route? \_\_\_\_\_

\_\_\_\_\_

Any anticipated problems with the designated location for participants to assemble? \_\_\_\_\_

\_\_\_\_\_

How many personnel will be required for this event? \_\_\_\_\_

\_\_\_\_\_

Estimated cost for personnel: \_\_\_\_\_

\_\_\_\_\_

Number and type of vehicles required: \_\_\_\_\_

\_\_\_\_\_

Type of procedures or equipment needed for the health and safety needs of the participants and the viewing public: \_\_\_\_\_

\_\_\_\_\_

Estimated cost for equipment: \_\_\_\_\_

\_\_\_\_\_

Additional comments/concerns: \_\_\_\_\_

\_\_\_\_\_

**Emergency Services: APPROVED:**  YES  NO *(Please also sign off on page 8 of application.)*

**By:** \_\_\_\_\_ **Date:** \_\_\_\_\_



**Lumpkin County  
Planning Department**  
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**Permit for  
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In Public Places**  
**(SHERIFF DEPARTMENT)**

**SHERIFF DEPARTMENT: Please complete this sheet and return it to Lumpkin County Planning Department. (Please attach additional sheet, if necessary.)**

Name of Event: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

Any anticipated problems with proposed route? \_\_\_\_\_

\_\_\_\_\_

Any anticipated problems with the designated location for participants to assemble? \_\_\_\_\_

\_\_\_\_\_

How many officers will be required for this event? \_\_\_\_\_

\_\_\_\_\_

Estimated cost for officers: \_\_\_\_\_

\_\_\_\_\_

Number of vehicles required: \_\_\_\_\_

\_\_\_\_\_

Type of procedures and equipment needed for the health and safety needs of the participants and the viewing public: \_\_\_\_\_

\_\_\_\_\_

Estimated cost for equipment: \_\_\_\_\_

\_\_\_\_\_

Additional comments/concerns/recommendations: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Sheriff Department: APPROVED:  YES  NO (Please also sign off on page 8 of application.)**

**By: \_\_\_\_\_ Date: \_\_\_\_\_**



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*(Planning/Public Works Department)*

**PLEASE PROVIDE COMMENTS AND APPROVALS BELOW (Attach additional sheet if necessary)**  
*(Please also sign off on page 8 of the application.)*

Planning Department \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
APPROVED:  YES  NO By: \_\_\_\_\_ Date: \_\_\_\_\_

PUBLIC WORKS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
APPROVED:  YES  NO By: \_\_\_\_\_ Date: \_\_\_\_\_



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**(APPROVALS)**

**Office Use Only:**

If applicable to the event, the following departments have reviewed and approved this event:

Department	Printed Name	Signature for Approval	Date
Sheriff's Department			
Emergency Services			
Planning Department			
Public Works Department			
GDOT			

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PERMIT # \_\_\_\_\_

DATE ISSUED: \_\_\_\_\_