

SPECIAL EVENT PERMIT APPLICATION

City of Isanti 110 First Avenue NW • PO Box 428 Isanti, MN 55040

Phone: 763.444.5512 • Fax: 763.444.5560

www.cityofisanti.us

Special Event Equipment Request Form

Event Name:	
Date(s) of Event:	
Contact Person:	
Equipment Drop Off/Pick Up Locat	ion:
Equipment Drop Off Date/Time:	
Please list the number of each item requested. Isanti Public Works will determine the availability of equipment for each event, and reserves the right to deny requests. <i>All equipment must be returned no later than 24 hours after the end of the event. The replacement of any broken or missing equipment will be billed to the event organizers.</i>	
Construction Cones:	Picnic Tables:
Barricades:	Stage:
Road Closed Signs:	No Parking Signs:
Office Use Only	
Date Delivered:	By:
Date Checked In:	By: