



PERMIT NO _____
FOR BICYCLE/EVENT/CONTEST/PROCESSION PARADE
IN UNINCORPORATED ST. CHARLES COUNTY
PURSUANT TO ST. CHARLES COUNTY ORDINANCES 10-091 & 11-006

APPLICATION
TO BE SUBMITTED TO THE ST. CHARLES COUNTY REGISTRAR

201 North Second Street 5th Floor – Room 541
St. Charles, Missouri 63301
(Tel: 636-949-7560) (Fax: 636-949-7562) (Email: registrar@sccmo.org)

Type of Permit: _____
(Single Event Permit or Annual Permit? – Note to Applicants: Annual permits may be issued only for four or more dates in any calendar year, and provided the same route will be followed on all dates)

Name of Event: _____

Date(s) of Event: _____

Hours of Event: _____

Number of Riders: _____

Applicant Provides Support Vehicle? _____
(Yes or No – if yes, specify vehicle)

Applicant Requests Road Closures? _____
(Yes or No – Note to Applicants: St. Charles County may not close State roads without concurrence of Missouri Department of Transportation)

If Yes, Roads or Segments Affected? _____

(Add additional sheet if necessary. Identify listed roads or segments of roads on route map submitted with this Application.)

Organizer of Event:

(Name of entity sponsoring or planning event)

(Address of entity's principal place of business)

(Name and telephone number of entity's agent making this application)

(Signature of entity's agent making this application)

(Date of this application)

Required Submittals: **MAP OF ROUTE**

SAFETY PLAN (including name and telephone number of entity's contact person and permit holder on day(s) of event)

NON-REFUNDABLE APPLICATION FEE: TWENTY-FIVE DOLLARS (\$25.00) - Payable to: St. Charles County

ENDORSEMENTS AND APPROVAL OR DENIAL BY CHIEF OF POLICE
(FOR CHIEF OF POLICE USE ONLY)

Changes to Safety
Plan if Needed:

(After consultation with applicant, Chief of Police may determine that its safety plan must be modified and request submission of modified safety plan.)

Road Closures as
Approved:

(Routes closed, dates and hours of closure)
(Note: after consultation with applicant, Chief of Police may determine road closures are needed whether or not requested by applicant.)

MoDOT Concurrence: _____
(Chief of Police may close a State road only with concurrence of Missouri Department of Transportation.)

Cost of Road Closures
or Crowd Control: _____
(If applicable – number of deputies x hours x hourly rate – payable by check to St. Charles County prior to Registrar’s issuance of permit)

Attachments: **MODIFIED SAFETY PLAN** received _____ (Date)
(if required by Chief)

MoDOT CONCURRENCE received _____ (Date)
(if applicable)

Approved: _____
Kurt Frisz, Chief of Police, St. Charles County
(Date)

Denied: _____
Kurt Frisz, Chief of Police, St. Charles County
(Date)

ISSUANCE OF APPROVED PERMIT BY REGISTRAR
(FOR REGISTRAR’S USE ONLY)

The Registrar of St. Charles County hereby acknowledges receipt of the Cost of Road Closures or Crowd Control and issues Permit No. _____ as endorsed and approved by the Chief, above.

ST. CHARLES COUNTY REGISTRAR

Brenda Hinton
St. Charles County Registrar

(Seal) Given under my hand & official seal this ____ day of _____, 20__.