

MT. PLEASANT POLICE DEPARTMENT

Special Event Form

Event Date: _____ **Time Start:** _____ **Est. End:** _____

Event Type: _____

Point of Contact: _____

Phone Number: _____

Business Address: _____

Event Description:

Insurance Binder: Y/N

Special Request Information: _____

Office Use Only

Unit Notification	Date Notified	Unit Notification	Date Notified
Fire Department	_____	Motors Sergeant	_____
Honor Guard Sergeant	_____	Patrol Supervisor	_____
Clerical Supervisor	_____	Bike Sergeant	_____
Sergeant Murch	_____	Ofc. Assigned	_____

Insurance binder must be attached to the Request Form. The amount of the binder cannot be less than \$1,000,000.00. Please attach any maps or any additional information about the event. Application must be submitted 30 days prior to the event. For any additional information contact Officer Dave Sabuda, (989) 779-5145, E-Mail: dsabuda@mt-pleasant.org