



# Polk County Sheriff's Office

## Boat and Water Patrol Unit

PERMIT NO. _____
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WILL ALCOHOLIC BEVERAGES BE SOLD? YES \_\_\_\_\_ NO \_\_\_\_\_

WILL FOOD BE SOLD? YES \_\_\_\_\_ NO \_\_\_\_\_

WILL SECURITY BE PROVIDED? YES \_\_\_\_\_ NO \_\_\_\_\_

WILL MEDICAL SERVICES BE AVAILABLE? YES \_\_\_\_\_ NO \_\_\_\_\_

WILL TRAFFIC/PARKING CONTROL BE NEEDED? YES \_\_\_\_\_ NO \_\_\_\_\_

WHAT (IF ANY) STRUCTURES DO YOU INTEND ON PLACING ON THE WATER/ICE: \_\_\_\_\_  
\_\_\_\_\_

WHAT TYPE AND NUMBER OF VEHICLES/WATERCRAFT WILL BE PROVIDED BY ORGANIZERS FOR SAFETY PURPOSES: \_\_\_\_\_  
\_\_\_\_\_

ON-SITE CONTACT PERSON AND PHONE NUMBERS: \_\_\_\_\_  
\_\_\_\_\_

OTHER DETAILS THAT SHOULD BE CONSIDERED FOR APPROVAL OF YOUR EVENT: \_\_\_\_\_  
\_\_\_\_\_

**PLEASE NOTE:** In order for this special event application to be granted, the guidelines of *Special Event Permit Application Guide* must be followed.

I certify that I am authorized to represent the organization holding this event and hereby agree that this event will comply with all Statutes, Rules, Regulations and Special Requirements as they apply to this special event. I acknowledge that any violation of Statute, Rule, Regulation and/or Special Requirement of this event will be cause for immediate revocation this *Special Event Permit* and thereby terminate the event activities.

### **86B.121 RACES, COMPETITIONS, AND EXHIBITIONS.**

(a) A person may not hold or sponsor any scheduled or public race, regatta, tournament or other competition or exhibition, or trial race on water or ice, whether or not involving watercraft, without first having obtained a written permit from the sheriff of the county where the event is to originate.

(b) The sheriff, in the permit, may exempt watercraft from any of the provisions of this chapter relating to the licensing, operation, and equipment of watercraft while participating in the event authorized.

(c) The county's issuance of a permit under this section does not make the county liable for any injury occurring at the event. **History:** 1990 c 391 art 9 s 7; 1992 c 584 s 2; 1997 c 204 s 1

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

\*\*\*\*\*

-Office Use Only-

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

Approved: Yes \_\_\_\_\_ No \_\_\_\_\_

Issued By: \_\_\_\_\_

Badge No. \_\_\_\_\_

**SPECIAL REQUIREMENTS:** \_\_\_\_\_

\*\* Upon completion turn into Boat and Water Supervisor\*\*



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### ***SPECIAL EVENT APPLICATION and PERMIT***

The following application form must be filled out in its entirety to insure consideration and the proper and accurate issuance of your permit, Pursuant to MN Statute 86B.121 Subd. (a). This form **MUST** be returned and filed with the Polk County Sheriff's Office at 600 Bruce St., Crookston, MN 56716, at least 14 days prior to your event.

**Please PRINT or TYPE**

NAME OF EVENT: \_\_\_\_\_

DATE(S) OF EVENT: \_\_\_\_\_

TIME(S) OF EVENT: \_\_\_\_\_

EVENT LOCATION: \_\_\_\_\_

WAS THIS EVENT HELD LAST YEAR?    YES \_\_\_    NO \_\_\_

SPONSORING ORGANIZATION: \_\_\_\_\_

CONTACT PERSON: _____ <small>First Name                      Middle                      Last Name</small>
DOB: _____    DRIVERS LICENSE #: _____
ADDRESS: _____ <small>Street address                      City                      State                      Zip</small>
TELEPHONE (S): _____ <small>Home                      Work                      Cell                      Fax</small>
E-MAIL ADDRESS: _____
EVENT WEB ADDRESS: _____

PROPOSED EVENT ACTIVITIES: \_\_\_\_\_

\_\_\_\_\_

EVENT ESTIMATED ATTENDANCE:    Participants \_\_\_\_\_    Organizers \_\_\_\_\_    Spectators \_\_\_\_\_

EVENT ACCESS LOCATION(S): \_\_\_\_\_

\_\_\_\_\_

EVENT PARKING LOCATION(S): \_\_\_\_\_

\_\_\_\_\_