

LIMITED DURATION LICENSE APPLICATION

Supplemental Plan Information – Super Celebration Sites

Emergency Weather Evacuation Plan

Emergency Contact Designee: _____ Emergency Designee Phone #: _____

Alternate Phone #: _____ Email: _____

Plan Details (snow and ice removal, location where patrons will be evacuated, etc.):

Waste Disposal and Cleanup Plan:

Waste Cleanup Contact: _____ Phone #: _____

Portable Toilets: _____ # Accessible Toilets: _____

Toilet Vendor: _____ # Hand Washing Stations: _____

Plan Details (will street sweeping be completed, etc.):

Security Plan:

Security Organization(s): _____ Security Contact: _____

Security Contact Phone #: _____ Security Contact Alt Phone #: _____

ILEA Guards: _____ Non-ILEA Guards: _____

Police Officers: _____

Plan Details (locations of officers and guards, barricades provided, etc):

Medical Plan:

Plan Details (ambulances, EMTs on site, first aid, etc):

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