

Event of Municipal Significance Application

Application Fee: \$50

Municipal Law Enforcement and Licensing Services 50 Centre St. S Oshawa ON L1H 3Z7

Last Name	Given Name(s)
Address (including postal code)	

Email

Organization Name	Event Name	
Home Phone	Business Phone	
Event Address	Event Date(s)	
Estimated Attendance	Event Time(s)	
Please provide details of the event (attach on separate form if necessary)		

Please include a site map with your application

I hereby declare that I have the authority to submit this request on behalf of the above organization.

Signature of Applicant	Date

Personal information contained on this form is collected under the authority of Section 11 of the Municipal Act, 2001 and will be used to determine the eligibility of requests for an event of municipal significance and contact applicants regarding the status of their request. Questions concerning collection of personal information should be directed to the City of Oshawa's Freedom of Information and Privacy Coordinator at 50 Centre St. S, Oshawa, Ontario, L1H 3Z7 or 905-436-3311.

Please submit the application to the Licensing Services Department by email or fax which is below.

licensing@oshawa.ca

Fax: 905-436-5655

		For Internal Use Only	
Date application received:			
Decision		Denied	
Director's Sig	gnature	Date:	

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