

2025

Hayride Application





City of Rockford
PW Engineering
425 E. State St., Rockford, IL 61104



PERMIT/LICENSE APPLICATION – HAYRIDE

THIS APPLICATION **MUST** BE ACCOMPANIED BY THE LICENSE FEE OF \$50.00

Name of Applicant: _____ Date of Application: _____

Applicant Address: _____
Street City/State/Zip

Applicant Phone #: _____ Email: _____

Business Information for who is providing the equipment.

Business Name: _____

Business Address: _____
Street City/State/Zip

Business Phone #: _____ Email: _____

Description of Business (use additional paper if necessary):

1. Number of Vehicles: _____ Number of Animals: _____ Type of Animal: _____

2. Type of Vehicles: _____ Hours of Operation: _____

3. Location and Manner of Stabling the Animals: _____

4. Method of Transporting the Animals: _____

5. Describe the cleanup methods and the frequency of cleanup being used to clear the area of animal waste:

Additional Information that is needed:

- A copy of the animal insurance coverage & medical records must be included with the application.
- Insurance coverage is a \$1,000,000.00 minimum policy.
- Copy of Driver's License
- Site Map of the Location that will be used for the Hayride. Including drop off and pick up locations.

MUST BE IN COMPLIANCE WITH ALL TERMS OF THE HUMAN CARE OF ANIMALS ACT: 510 ILCS70