



RCIPS

APPLICATION FOR MOTOR RACING ON ROADS

Name Of Organizer: _____ Name Of Organization: _____

Email Address: _____

Telephone Number / Mobile: _____

Purpose Of Event: _____ Purposed Date: ____ / ____ / ____

Starting Time: _____ Starting Place: _____

Route to be followed(Attch map/photograph if available): _____

Estimate Number Of Participants: _____

Estimate Number Of Vehicals,if any: _____

Any Other additional information _____

Finishing Point _____ Estimate finishing time _____

I have read and understand the conditions attached to this form relating to Section 91 (1) of the Traffic Law (2011) Revision.

Signature of Applicant

Permission is hereby granted/refused to hold such meeting:

A. In accordance with the details as requested.

B. Subject to the following conditions:

Dated: _____

Signature: _____
Police Commissioner

Please note that if an application is not submitted, to the Commissioner of Police, at least three (3) business days before such intended procession, the application will be refused.