

BLOCK PARTY STREET USE PERMIT APPLICATION**APPLICANT INFORMATION**

Contact Name:					
Address:					
City:		State:		Zip Code:	
Phone:					
E-mail:					

EVENT INFORMATION**Location*:**

Street name(s) and Block number(s):	
Date(s) of Event:	
Estimated Attendance:	

Location must be residential street(s) and include 2 or less blocks*Time of Event:**

Set-Up:		Take Down:	
Event Starts:		Event Ends:	

☐ I/We waive the 21-day decision requirement.

_____ (PLEASE INITIAL)

Your signature below indicates that you have read and understand the instructions and guidelines for a neighborhood block party. Further, the person/group named in this application will be responsible for the conduct of the group and for the condition of the reserved area. Falsification of information on the application will result in forfeiture of up to \$200 per falsified item.

In addition to the rules and regulations detailed in the permit application instructions and guidelines, Street Use Permits are subject to all applicable ordinances, statutes and laws.

Signature: _____ Date: _____