BLOCK PARTY STREET USE PERMIT APPLICATION

APPLICANT INFORMATION

Contact Name:			
Address:			
City:	S	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

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: _____

Time of Event.

RESIDENT PETITION FOR BLOCK PARTY PERMIT APPLICATION

This signature petition must be signed by an adult resident/occupant of at least 75% of the residential and/or non-residential units on the street(s) for which closure is requested.

We, the undersigned residents of the _	block of	, a street in the	e city of Madison,
request consent to the recreational use	of this street between the hours of	and	on
	(day/date) and do hereby petition the Street	Use Staff Commission	to grant a Street
Use Permit for us to use said street for said purpose and do hereby agree to abide by the conditions of the permit.			

We designate _____ (contact person) as the responsible person or persons who shall sign an application for a Street Use Permit on our behalf.

Please attach pages if additional signatures are required.

SIGNATURE	ADDRESS	DATE

Ι, _

_____am personally acquainted with the persons who have signed

the foregoing petition and know them to be residents of the street(s) proposed to be closed. I further certify that the foregoing petition is signed by an adult resident/occupant of at least 75% of the residential and/or non-residential units on the street(s) for which closure is requested.

Signature of Circulator

Date_____