

BLOCK PARTY STREET USE PERMIT APPLICATION

FOR OFFICE USE ONLY: Permit # _____ Date Submitted _____

APPLICANT INFORMATION

Contact Name Francesco + Jeanne Vitale
(Frank)
Address 3906 Fern Court
City/State/Zip Madison, WI 53711-1615
Home Phone 608-233-8908 Cell Phone _____
E-mail jfvitale3906@gmail.com

EVENT INFORMATION

Event Category

Neighborhood Block Party Other _____

Location Requested

Residential Street(s) Street Names and Block #'s 3900 Fern Court (only one block)

Date(s) of Event July 16, 2016 Rain Date _____

Annual Event? No Yes

Estimated Attendance ~125 (CERTIFICATE OF INSURANCE MAY BE REQUIRED)

Time of Event

Set-Up 1200 (Noon) Event Starts 1200
Take-Down 1800 (6PM) Event Ends 1800

NA

_____/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 Jeanne M. Vitale Date 7/7/2016

STREET USE PERMIT APPLICATION

Conditions and Approval

OFFICE USE ONLY	
Conditions:	
<input type="checkbox"/> Per Attached	<input checked="" type="checkbox"/> Must maintain 20' emergency access lane
<input type="checkbox"/> Noise must be kept at reasonable levels at all times	<input checked="" type="checkbox"/> Barricades placement as per plan on file with City TE
<input type="checkbox"/> Event cannot displace licensed city vendors	<input checked="" type="checkbox"/> Call 267-8756 to arrange for meter bags and street signs.
<input type="checkbox"/> No Amplification before 12:30 p.m.	<input type="checkbox"/> Special-duty officer(s) required for event, call 266-4022 to arrange.
<input type="checkbox"/> Maintain access to Metro stops / bus routes rerouted for event	<input type="checkbox"/> Coordinate activities with Street Vending Coordinator, 261-9171
<input checked="" type="checkbox"/> Organizer must clean up event area. Charges will be assessed for any City staff time or resources required for clean up.	<input type="checkbox"/> Coordinate activities with Dane County Farmers' Market Manager, 444-1999
<input checked="" type="checkbox"/> Call Sayle Street Garage, 266-4767, to arrange for pick up and return of barricades.	<input checked="" type="checkbox"/> Other: Indemnification
<input checked="" type="checkbox"/> No permanent markings, including spray chalk or stickers, of streets, sidewalks, paths or city landscaping	<input checked="" type="checkbox"/> Resident petition – on file
	<input type="checkbox"/> No inflatables on City property
_____ Approved _____ Denied Per MGO 10.056 Date: _____	

OFFICE USE ONLY			
Capitol Police		Parks	
City Police		Parking	
City Engineering		Risk Manager	
Event Coordinator		Streets	
Fire		Traffic Engineering	
Metro			
Insurance	REQ Y N RCVD _____	SU MTG DATE	