

NBP STREET USE PERMIT APPLICATION

FOR OFFICE USE ONLY: Permit # _____ Date Submitted _____

APPLICANT INFORMATION

Contact Name BILLY LARIMORE
Address 725 CHAPMAN ST
City/State/Zip MADISON WI 53711
Home Phone 608-238-7938 Cell Phone 608-345-9180
E-mail billyfx@aol.com

EVENT INFORMATION

Event Category

Neighborhood Block Party Other _____

Location Requested

Residential Street(s) Street Names and Block #'s 6-700 Block Chapman St.
3000-3100 Block of Cross St.

Date(s) of Event SEPT 9, 2012 Rain Date NO

Annual Event? No Yes

Estimated Attendance 50 (CERTIFICATE OF INSURANCE MAY BE REQUIRED)

Time of Event

Set-Up 3 PM Event Starts 5 PM
Take-Down 8:30 PM Event Ends 8 PM

_____ 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 7/7/12



Address **600 Chapman St**
Madison, WI 53711

Neighborhood Block Party
9/9/2012
Billy Larimore

