

BLOCK PARTY STREET USE PERMIT APPLICATION

FOR OFFICE USE ONLY: Permit # _____ Date Submitted _____

APPLICANT INFORMATION

Contact Name Deb Bachmann
Address 2330 Willard Ave #1
City/State/Zip MADISON, WI 53704
Home Phone (608) 257-4663 Cell Phone _____
E-mail debberrannie@gmail.com

EVENT INFORMATION

Event Category

Neighborhood Block Party Other _____

Location Requested

Residential Street(s) Street Names and Block #'s Ohio Avenue between Center Ave and Willard Ave.

Date(s) of Event June 14, 2015 Rain Date NONE

Annual Event? No Yes

Estimated Attendance 30-40 (CERTIFICATE OF INSURANCE MAY BE REQUIRED)

Time of Event

Set-Up 10 Event Starts 12
Take-Down 7 Event Ends 5

I/We waive the 21-day decision requirement.

not quite understand this question, if needed, DB (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.

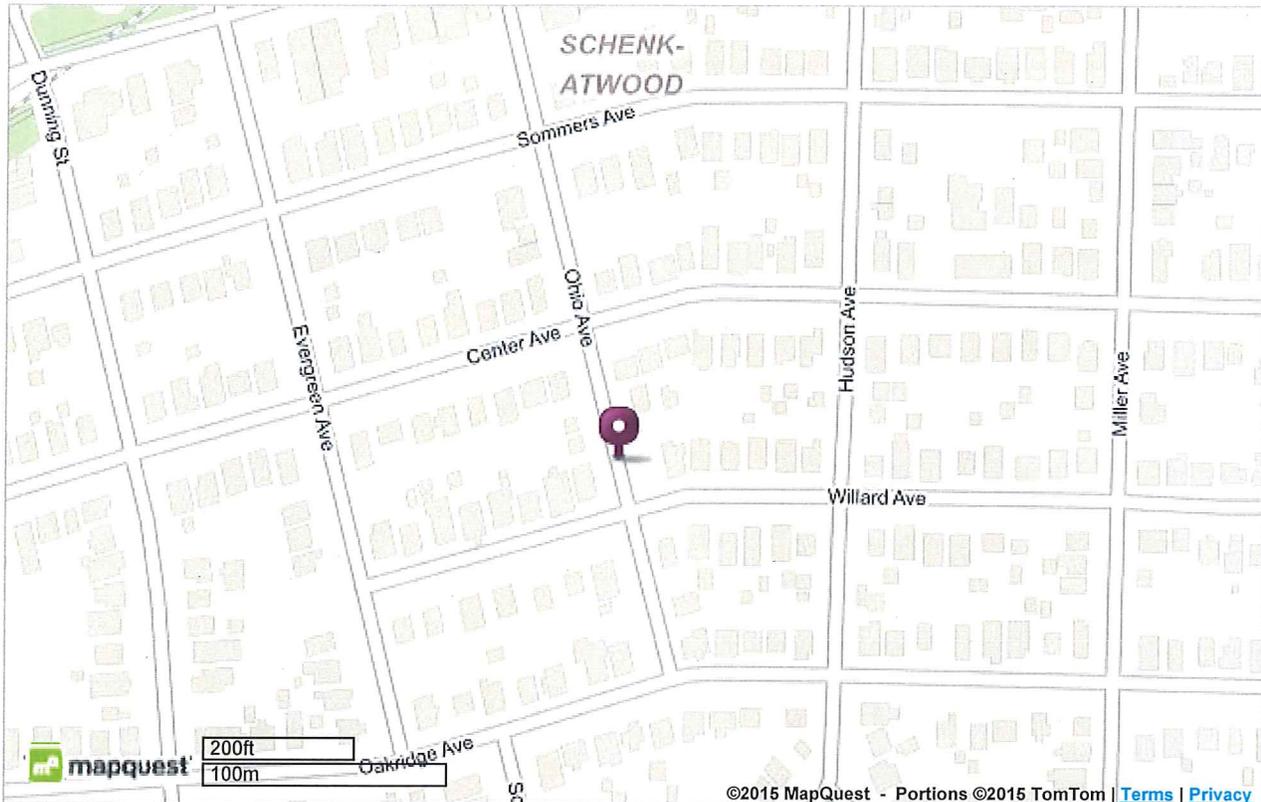
Signature Deb Bachmann Date 5/29/15



Map of:
500 Ohio Ave
Madison, WI 53704

Notes

500 Ohio Ave (between Center Ave & Willard Ave)
Sunday June 14th 2015
10am-5pm



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