

NBP STREET USE PERMIT APPLICATION

FOR OFFICE USE ONLY: Permit # _____ Date Submitted _____

APPLICANT INFORMATION

Contact Name Sheryl Lilke
Address 640 Sprague St
City/State/Zip Madison WI 53711
Home Phone 608 442 6984 Cell Phone 33 608 322 8865
E-mail slilke@hotmail.com

EVENT INFORMATION

Event Category

Neighborhood Block Party Other _____

Location Requested

Residential Street(s) Street Names and Block #'s 600 Block Sprague

Date(s) of Event 7/4/12 Rain Date n/a

Annual Event? No Yes

Estimated Attendance 40 (CERTIFICATE OF INSURANCE MAY BE REQUIRED)

Time of Event

Set-Up 9am Event Starts 9am

Take-Down 9pm Event Ends 9pm

I/We waive the 21-day decision requirement.

See (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.

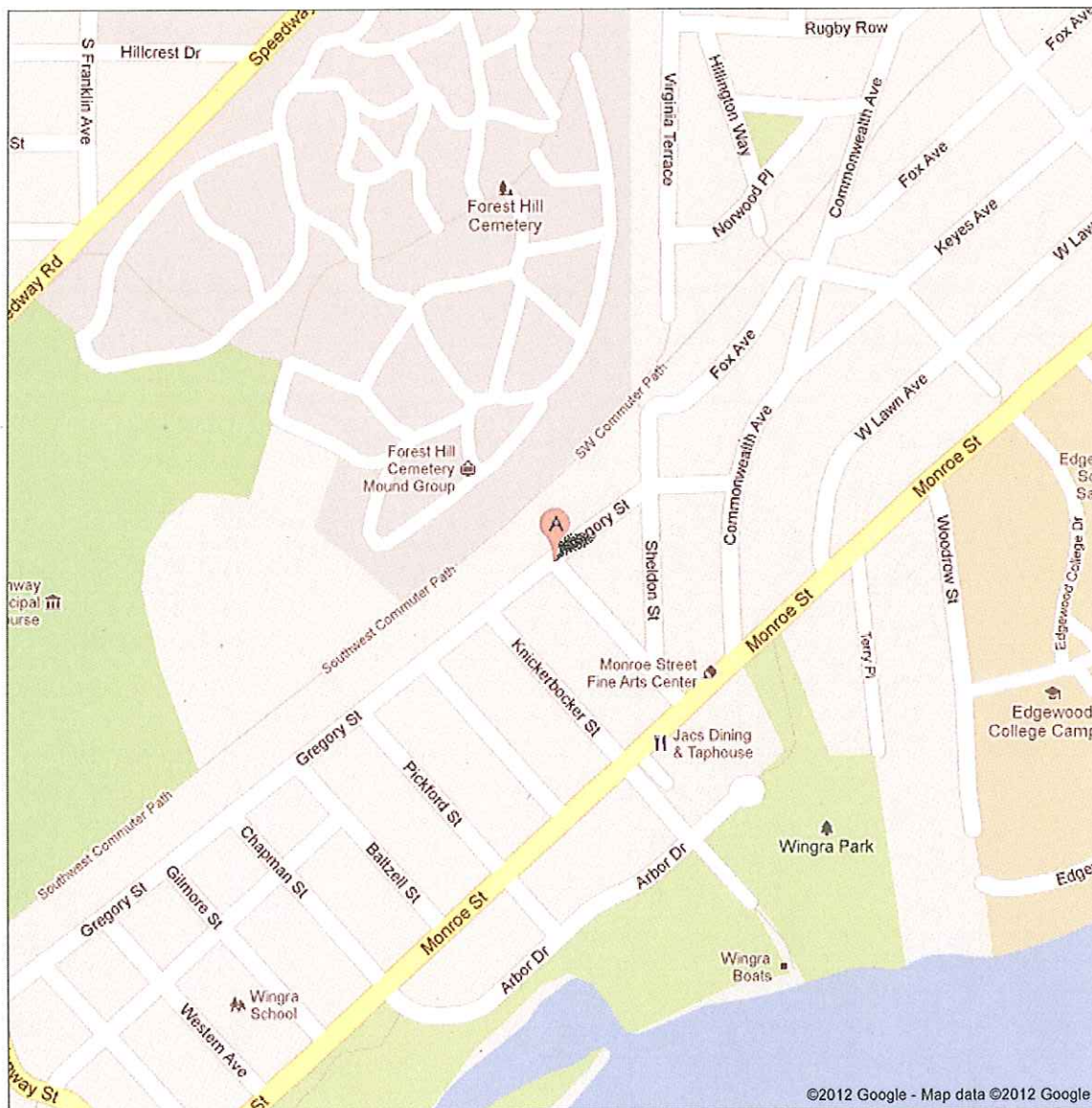
In addition to the rules and regulations detailed in the permit application instructions and guidelines, Street Use Permits are subject to all applicable ordinances, statutes and laws.

Signature [Signature] Date 6/6/12



Address 600 Sprague St
Madison, WI 53711

Neighborhood Block Party
7/4/2012, 9am-9pm
Sheryl Lilke



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