

NBP STREET USE PERMIT APPLICATION

FOR OFFICE USE ONLY: Permit # _____ Date Submitted _____

APPLICANT INFORMATION

Contact Name Sarah Daines
Address 1329 Dewey Ct.
City/State/Zip Madison WI 53703
Home Phone 608-249-1342 Cell Phone 608-556-3274
E-mail sarahdaines@hotmail.com

EVENT INFORMATION

Event Category

☒ Neighborhood Block Party ☐ Other _____

Location Requested

☒ Residential Street(s) Street Names and Block #'s 1300 block Dewey's
of Dewey Ct. (only one block long...)
Date(s) of Event 5/28/11 Rain Date 5/29/11

Annual Event? ☒ No ☐ Yes

Estimated Attendance 90 or so (CERTIFICATE OF INSURANCE MAY BE REQUIRED)

Time of Event

Set-Up 9am Event Starts 11:00^{am}
Take-Down 9pm Event Ends 9:00 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.

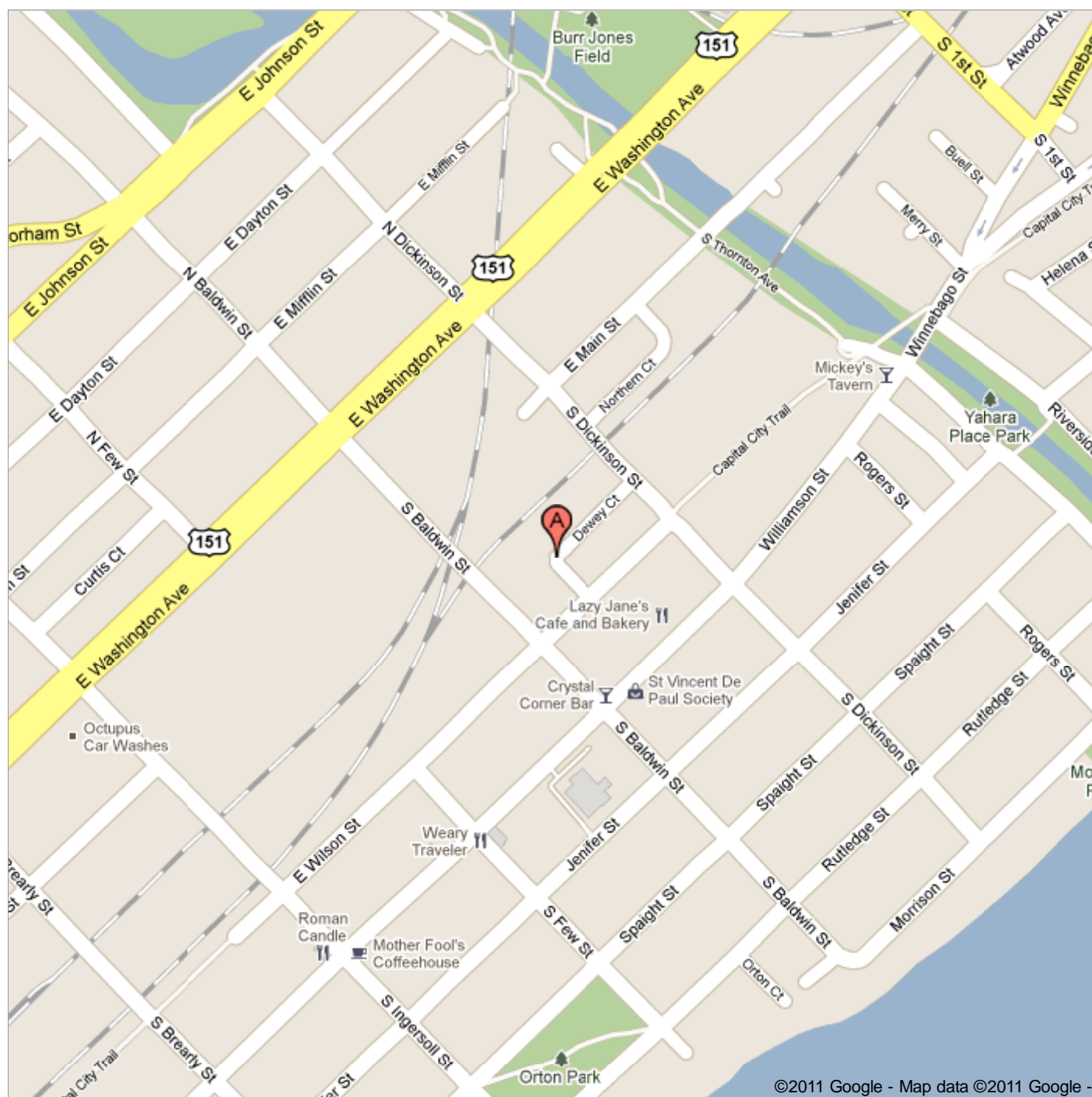
In addition to the rules and regulations detailed in the permit application instructions and guidelines, Street Use Permits are subject to all applicable ordinances, statutes and laws.

Signature Sarah Daines Date 5/1/11



Address **1300 Dewey Ct**
Madison, WI 53703

Notes Neighborhood Block Party
Saturday, May 28, 2011
Sarah Daines



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