

BLOCK PARTY STREET USE PERMIT APPLICATION

FOR OFFICE USE ONLY: Permit # _____ Date Submitted _____

APPLICANT INFORMATION

Contact Name JON DAHL
Address 679 Knickerbocker St.
City/State/Zip MADISON, WI 53711
Home Phone 608-236-0076 Cell Phone 608-251-0001
E-mail jdahl2@gmail.com

EVENT INFORMATION

Event Category

Neighborhood Block Party Other _____

Location Requested

Residential Street(s) _____ Street Names and Block #'s 600 block of Knickerbocker St.

Date(s) of Event Sept. 12 Rain Date Sept. 13

Annual Event? No Yes

Estimated Attendance 42 20 (CERTIFICATE OF INSURANCE MAY BE REQUIRED)

Time of Event

Set-Up 9⁰⁰ am Event Starts 9⁰⁰ am
Take-Down 9⁰⁰ pm Event Ends 9⁰⁰ pm

JD I/We waive the 21-day decision requirement. JD (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.

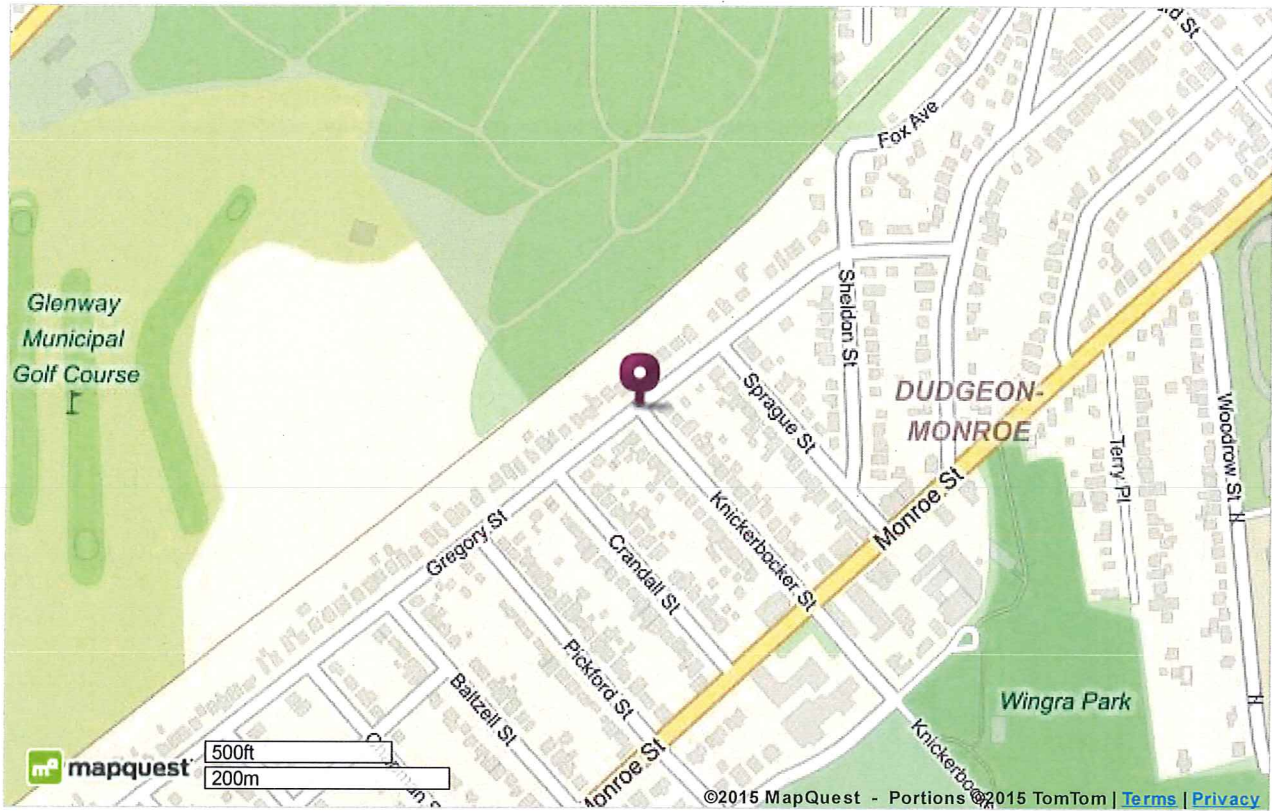
Signature [Signature] Date _____



Map of:
600 Knickerbocker St
Madison, WI 53711-1849

Notes

600 Knickerbocker St.
Saturday, September 12th
9:00am - sunset



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