## FOR OFFICE USE ONLY: Permit #\_\_\_\_\_ Date Submitted\_\_\_\_\_ APPLICANT INFORMATION Contact Name Sight McAndrew Address City/State/Zip\_ 9-0549 Cell Phone (608) 239-0905 Home Phone /608 Scott 549 @ yahoo . com E-mail **EVENT INFORMATION Event Category** ☐ Other\_\_\_\_\_ " but seighborhood Block Party Location Requested Street Names and Block #'s 1800 block Keyes he, Residential Street(s) Date(s) of Event 10-10-2015 Rain Date 10-11-2015 Annual Event? ☐ No Yes Estimated Attendance \_\_\_\_\_\_(CERTIFICATE OF INSURANCE MAY BE REQUIRED) Time of Event Set-Up $2 \cdot 00 p \cdot m$ Event Starts $2 \cdot 00 p \cdot m$ . Take-Down $10 \cdot 00 p \cdot m$ Event Ends $10 \cdot 00 p \cdot m$ (PLEASE INITIAL) I/We waive the 21-day decision requirement. 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. Date 9.10/11 Signature\_\_

NBP STREET USE PERMIT APPLICATION



Map of: **1800 Keyes Ave** Madison, WI 53711-2006

## Notes

800 Keyes Ave Saturday, October 10th 2:00pm-sunset Neighborhood Block Party



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