

NBP STREET USE PERMIT APPLICATION

FOR OFFICE USE ONLY: Permit # _____ Date Submitted _____

APPLICANT INFORMATION

Contact Name Amy Rogers
Address 446 Orchard Dr.
City/State/Zip Madison, WI 53711
Home Phone 608.236.0454 Cell Phone 608.774.1929
E-mail amy-e-rogers@yahoo.com

EVENT INFORMATION

Event Category

Neighborhood Block Party Other _____

Location Requested

Residential Street(s) Street Names and Block #'s 400 block of Orchard Dr.
between Keating Terrace + the pedestrian path

Date(s) of Event 8/25/12 Rain Date 8/26/12

Annual Event? No Yes

Estimated Attendance 60-80 (CERTIFICATE OF INSURANCE MAY BE REQUIRED)

Time of Event


Set-Up 3:00 Event Starts 4:00
Take-Down 9:00 Event Ends dusk

_____ 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  Date 7/30/12



Address **400 Orchard Dr**
Madison, WI 53711

Neighborhood Block Party
Sat, 8/25/2012, 3pm-Dusk, Rain Date: 8/26/2012
Amy Rogers

