

NBP STREET USE PERMIT APPLICATION

FOR OFFICE USE ONLY: Permit # _____ Date Submitted _____

APPLICANT INFORMATION

Contact Name Tom Kasper
Address 1217 Elizabeth St
City/State/Zip Madison WI 53703
Home Phone 108-257-8695 Cell Phone _____
E-mail +Kasper2@aol.com

EVENT INFORMATION

Event Category

Neighborhood Block Party Other _____

Location Requested

Residential Street(s) Street Names and Block #'s 1200¹²²⁹ block of Elizabeth St.

Date(s) of Event July 4, 2012 Rain Date July 7, 2012

Annual Event? No Yes

Estimated Attendance 400 (CERTIFICATE OF INSURANCE MAY BE REQUIRED)

Time of Event

Set-Up 6:00 am Event Starts 9:00 am

Take-Down 10:00 pm Event Ends 9:00 pm

I/We waive the 21-day decision requirement.

TBK (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 Tom Kasper Date 5/29/12



Address **1200 Elizabeth St**
Madison, WI 53703

Neighborhood Block Party
7/4/2012, 6am-10pm
Tom Kasper

