

NBP STREET USE PERMIT APPLICATION

FOR OFFICE USE ONLY: Permit # _____ Date Submitted _____

APPLICANT INFORMATION

Contact Name ~~LESA~~ ~~SCOTT - DREW~~ KAREN FASTER
Address 133 OHIO AVE.
City/State/Zip MADISON WI 53704
Home Phone 608-244-2324 Cell Phone ← Same
E-mail Karen@ohioavenue.com

EVENT INFORMATION

Event Category

Neighborhood Block Party Other _____

Location Requested

Residential Street(s) Street Names and Block #'s Ohio Avenue - 100 block
between La follette Avenue + Bashford Street

Date(s) of Event SATURDAY JUNE 18, 2016 Rain Date _____

Annual Event? No Yes

Estimated Attendance 50 (CERTIFICATE OF INSURANCE MAY BE REQUIRED)

Time of Event

Set-Up 3 pm Event Starts 4:30 p.m.
Take-Down 10:30 p.m. Event Ends 11 p.m.

Please provide four barricades - we have lots of cut-through traffic looking for Goodman Center + bars

_____/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.

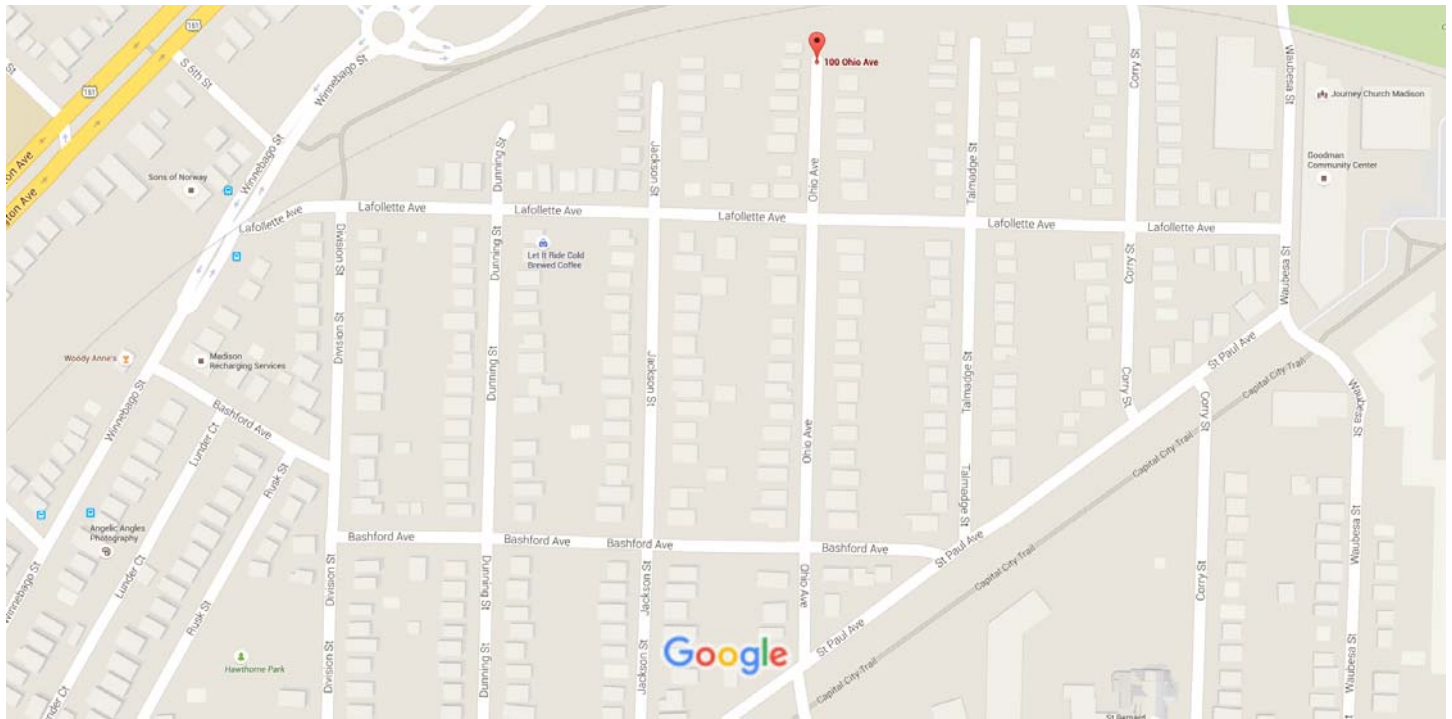
In addition to the rules and regulations detailed in the permit application instructions and guidelines, Street Use Permits are subject to all applicable ordinances, statutes and laws.

Signature _____ Date _____



100 Ohio Ave

(between Lafollette & Bashford) - Saturday 6/18/16 - 3:00pm - 11:00pm



Map data ©2016 Google 100 ft

100 Ohio Ave
Madison, WI 53704

Google Maps

NBP PETITION FOR STREET USE PERMIT APPLICATION

This signature petition must be signed by an adult resident/occupant of at least 75% of the residential and/or non-residential units on the street(s) for which closure is requested

We, the undersigned residents of the 100 block of Ohio Ave ^{between La Fayette + Bushford}, a street in the city of Madison, request consent to the recreational use of this street between the hours of 3 pm and 11 pm on Salvador Ave 18 (day/date) and do hereby petition the Street Use Staff Commission to grant a Street Use Permit for us to use said street for said purpose and do hereby agree to abide by the conditions of the permit.

We designate _____ (contact person) as the responsible person or persons who shall sign an application for a Street Use Permit on our behalf.

Please attach pages if additional signatures are required.

	SIGNATURE	ADDRESS	DATE
19		177 Ohio Ave	4/18/16
20		181 Ohio Ave	4-23/16
21		185 Ohio Ave	4/23/16
22		162 Ohio Ave	5/23/16
23		166 Ohio Ave #2	5/23/16
24		158 Ohio Ave (#1)	5/23/16
25		153 Ohio Ave #1	5/23/16
26		134 Ohio Ave #2	5/23/16
27		178 Ohio Ave	5/23/16
28		174 Ohio Ave	5/23/16
29		161 Ohio Ave #2	5/23/16
29		173 Ohio Ave	5/27/16
		165 Ohio Ave	5/27/16

I, _____, am personally acquainted with the persons who have signed the foregoing petition and know them to be residents of the street(s) proposed to be closed. I further certify that the foregoing petition is signed by an adult resident/occupant of at least 75% of the residential and/or non-residential units on the street(s) for which closure is requested.

Signature of Circulator _____ Date _____

NBP PETITION FOR STREET USE PERMIT APPLICATION

This signature petition must be signed by an adult resident/occupant of at least 75% of the residential and/or non-residential units on the street(s) for which closure is requested.

We, the undersigned residents of the 100 block of Ohio Ave ^{between} Bainford ^{and} Foote Ave, a street in the city of Madison, request consent to the recreational use of this street between the hours of 3 pm and 11 pm on Saturday June 18 (day/date) and do hereby petition the Street Use Staff Commission to grant a Street Use Permit for us to use said street for said purpose and do hereby agree to abide by the conditions of the permit.

We designate _____ (contact person) as the responsible person or persons who shall sign an application for a Street Use Permit on our behalf.

Please attach pages if additional signatures are required.

	SIGNATURE	ADDRESS	DATE
1		133 Ohio Ave	4-17-16
2		137 Ohio Ave	4-17-16
3		" #2	"
4	WP	134 Ohio Ave #2	4-17-16
5		157 Ohio Ave	4-17-16
6		141 Ohio	4-17-16
7		136 Ohio	4-17-16
8		145 Ohio	4-17-16
9		137 1/2 Ohio	4/17/16
10		161 Ohio Ave #1	"
11		120 Ohio Ave #1	4/17/16
12		134 Ohio Ave #1	4/17/16
13		142 Ohio Ave	4/17/16
14		154 Ohio Ave	4/17/16
15		149 Ohio Ave	4/17/16
16		186 Ohio Ave	5/2/16
17		182 Ohio	5/21/16
18		170 Ohio Ave	6/21/16

I, _____, am personally acquainted with the persons who have signed the foregoing petition and know them to be residents of the street(s) proposed to be closed. I further certify that the foregoing petition is signed by an adult resident/occupant of at least 75% of the residential and/or non-residential units on the street(s) for which closure is requested.

Signature of Circulator _____ Date _____