

NBP STREET USE PERMIT APPLICATION

FOR OFFICE USE ONLY: Permit # _____ Date Submitted _____

APPLICANT INFORMATION

Contact Name TIM PARKS

Address 3537 STONEBRIDGE DR

City/State/Zip MADISON, WI 53719

Home Phone 848.7495 Cell Phone 354.1829 / 261.9632 OFFICE:

E-mail tparks@cityofmadison.com

EVENT INFORMATION

Event Category

Neighborhood Block Party Other _____

Location Requested

Residential Street(s) Street Names and Block #'s 3500-BLOCK OF STONEBRIDGE DRIVE

Date(s) of Event 29 SEPTEMBER 2012 Rain Date N/A

Annual Event? No Yes, HOPEFULLY

Estimated Attendance 50-75 (CERTIFICATE OF INSURANCE MAY BE REQUIRED)

Time of Event

Set-Up 12⁰⁰ PM Event Starts 2⁰⁰ PM

Take-Down B> 12⁰⁰ AM Event Ends 11⁰⁰ PM

_____ 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 9/10/12



Address **3500 Stonebridge Dr**
Madison, WI 53719

Neighborhood Block Party
Saturday, September 29, 12pm-12am
Tim Parks

