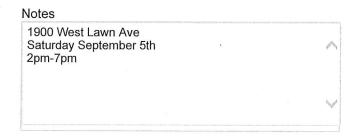
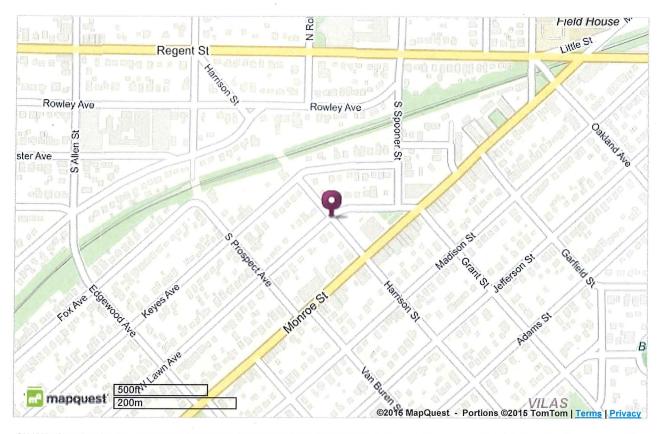
BLOCK PARTY STREET USE PERMIT APPLICATION	
FOR OFFICE USE ONLY: Permit # Date Sub	mitted
APPLICANT INFORMATION	
Contact Name Same Benish	<u> </u>
Address 1918 West Lawr	
City/State/Zip MidiSon, WI	53711
	Cell Phone
E-mail Sarahbenish (a) gm	nil.com
EVENT INFORMATION	
Event Category	
▼ Neighborhood Block Party □ O	ther
Location Requested	
Residential Street(s) Street	et Names and Block #'s LUCSH LOWN QUE
	900 block
Date(s) of Event	Rain Date_ <u>OOC</u>
Annual Event? ⊠No ☐ Yes	
Estimated Attendance3a	(CERTIFICATE OF INSURANCE MAY BE REQUIRED
Time of Event	
Set-Up	Event Starts_ 3.00
Take-Down 6 00	Event Ends 7.00
•	
I/We waive the 21-day decision requirem	ent
our signature below indicates that you have read	I and understand the instructions and guidelines for a neighborhood his application will be responsible for the conduct of the group and for
	information on the application will result in forfeiture of up to \$200 per
n addition to the rules and regulations detailed in re subject to all applicable ordinances, statutes a	the permit application instructions and guidelines, Street Use Permits and laws.
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Map of: **1900 W Lawn Ave** Madison, WI 53711-2010





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