NBP STREET USE PERMIT APPLICATION

FOR OFFICE USE ONLY: Permit # Date Submitted			
APPLICANT INFORMATION Contact Name Connie McElrone			
Address 603 S. Prospect Ave.			
city/state/Zip Madison WI 53711			
Home Phone 630 - 8706 Cell Phone 609 - 9691			
E-mail connie @ pfluger. org			
EVENT INFORMATION Event Category			
☐ Other			
Location Requested [Continued Regularization Regul			
Date(s) of Event Gunday, June 5,2016 Rain Date UNGure			
Annual Event? Y⊈ No ☐ Yes			
Estimated Attendance (CERTIFICATE OF INSURANCE MAY BE REQUIRED)			
Time of Event			
Set-Up 2 P. W. Event Starts 3 P. W.			
Take-Down 10 pm Event Ends 10 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 5.3.16			

NBP PETITION FOR STREET USE PERMIT APPLICATION

residential units on the street(s) for which closure is requested.			
We, the undersigned residents of the block of block of block of consent to the recreational use of this street between the hours of 2:30 p and 0 p on characteristic on the street between the hours of 2:30 p and 10 p on characteristic on 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			
SIGNATURE		DATE	
Circhia R. Airch	611 S. Prowers	5/2/16	
Cystha K. Arrich	611 S. Proyect	5/5/10	
I,			
the street(s) for which closure is requested. Signature of Circulator	lo	Date 5.1.16	



600 S Prospect Ave

Sunday, June 5th, 2016 - 2:00pm - 10:00pm



600 S Prospect Ave Madison, WI 53711

Google Maps