

BLOCK PARTY STREET USE PERMIT APPLICATION

FOR OFFICE USE ONLY: Permit # _____ Date Submitted _____

APPLICANT INFORMATION

Contact Name Jessica Small

Address 3901 Euclid Avenue

City/State/Zip Madison, WI 53711

Home Phone 608 692 2644 Cell Phone 608 692 2644

E-mail jessica.a.small@gmail.com

EVENT INFORMATION

Event Category

☒ Neighborhood Block Party ☐ Other _____

Location Requested

☐ Residential Street(s) _____ Street Names and Block #'s 3800-3900 Euclid Avenue

Date(s) of Event July 16, 2016 Rain Date July 17, 2016

Annual Event? ☐ No ☒ Yes

Estimated Attendance ~50 ppl (CERTIFICATE OF INSURANCE MAY BE REQUIRED)

Time of Event

Set-Up 3 pm Event Starts 4 pm

Take-Down 9 pm Event Ends 9 pm

☒ I/We waive the 21-day decision requirement. JS (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 Jessica A. Small Date 06-16-2016

