

# NBP STREET USE PERMIT APPLICATION

FOR OFFICE USE ONLY: Permit # \_\_\_\_\_ Date Submitted \_\_\_\_\_

## APPLICANT INFORMATION

Contact Name Sarah Benish  
Address 1918 West Lawn Ave  
City/State/Zip Madison WI 53711  
Home Phone 608-335-9022 Cell Phone \_\_\_\_\_  
E-mail SarahBenish@gmail.com

## EVENT INFORMATION

### Event Category

☒ Neighborhood Block Party ☐ Other \_\_\_\_\_

### Location Requested

☒ Residential Street(s) Street Names and Block #'s 1900 block West Lawn

Date(s) of Event 8-27-16 Rain Date N/A

Annual Event? ☒ No ☐ Yes

Estimated Attendance ~40 (CERTIFICATE OF INSURANCE MAY BE REQUIRED)

### Time of Event

Set-Up 2:00 Event Starts 3:00

Take-Down 8:00 Event Ends 7:00

X I/We waive the 21-day decision requirement.

SB (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 Sarah Benish Date 6-30-16

# 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 1900 block of West Lawn, a street in the city of Madison, request consent to the recreational use of this street between the hours of \_\_\_\_\_ and \_\_\_\_\_ on 8/27/16 (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 Sarah Benish (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.

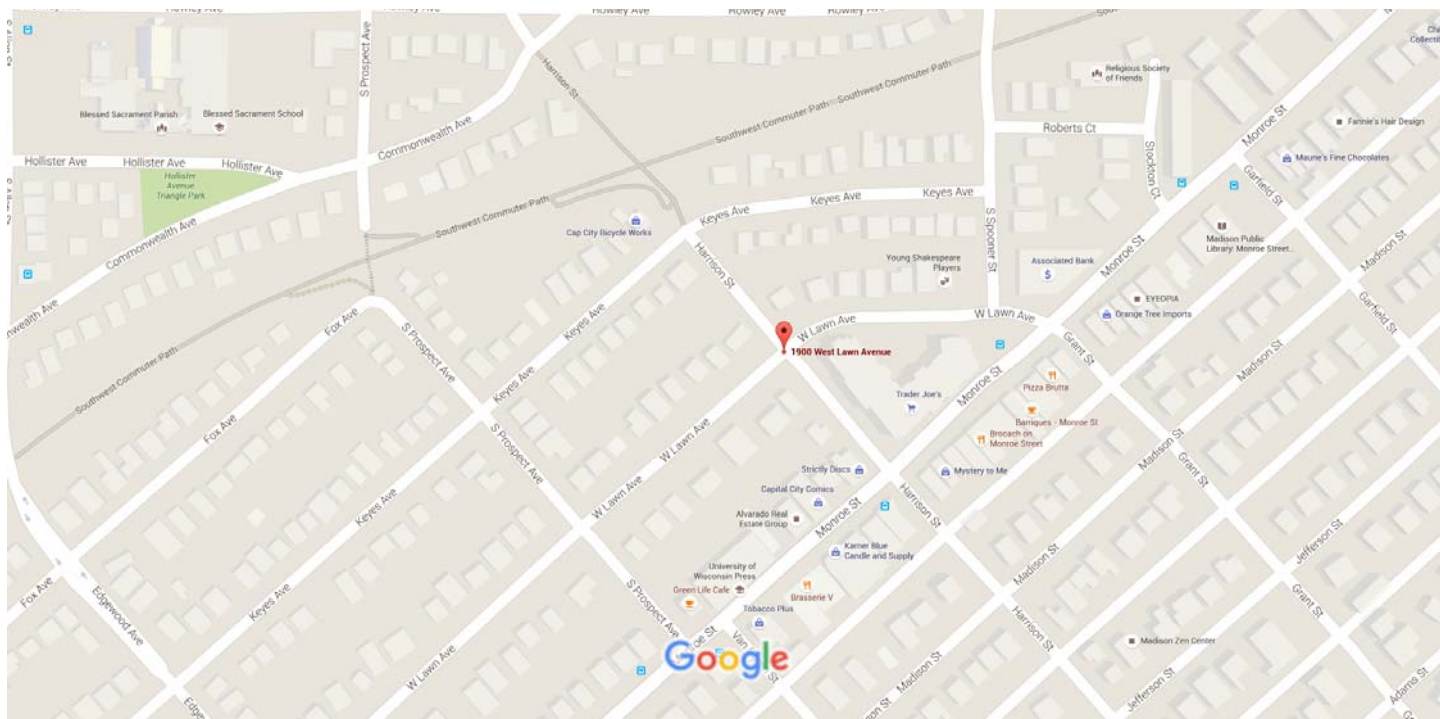
SIGNATURE	ADDRESS	DATE
<u>Sarah Benish</u>	<u>1918 West Lawn ave</u>	<u>6-15-16</u>
<u>Seth Tamm</u>	<u>1912 West Lawn</u>	<u>6-15-16</u>
<u>Ken Wush</u>	<u>1906 West Lawn</u>	<u>6/15/16</u>
<u>Kyle</u>	<u>1902 West Lawn</u>	<u>6/15/16</u>
<u>Jim</u>	<u>1934 West Lawn</u>	<u>6/15/16</u>
<u>Arnold Algren</u>	<u>1927 West Lawn</u>	<u>6/15/2016</u>
<u>Frank Schrag</u>	<u>1910 W. Lawn</u>	<u>6-15-16</u>
<u>Dolly Schrag</u>	<u>1921 W Lawn</u>	<u>6/16/16</u>
<u>Jerry Saffron</u>	<u>1921 W Lawn</u>	<u>6/17/16</u>
<u>Michael Albrecht</u>	<u>1912 West Lawn</u>	<u>6/17/16</u>
<u>David B. Vance</u>	<u>1932 West Lawn</u>	<u>6/17/16</u>
<u>Carl Saffron</u>	<u>1915 West Lawn</u>	<u>6/17/16</u>
<u>Ruth Cuth</u>	<u>1909 West Lawn</u>	<u>6/20/16</u>
<u>Barbara Samuel</u>	<u>1905 West Lawn</u>	<u>6/20/16</u>
	<u>1920 West Lawn</u>	<u>6/23/16</u>

I, Sarah Benish, 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 Sarah Ri

Date 6-30-16

## Google Maps 1900 W Lawn Ave



Map data ©2016 Google 100 ft

1900 W Lawn Ave

Madison, WI 53711