

BLOCK PARTY STREET USE PERMIT APPLICATION

FOR OFFICE USE ONLY: Permit # _____ Date Submitted _____

APPLICANT INFORMATION

Contact Name WAYNE PLANT
Address 921 LAWRENCE ST.
City/State/Zip MADISON, WISC. 53715
Home Phone _____ Cell Phone (608) 256-0614
E-mail wbplant@gmail.com

EVENT INFORMATION

Event Category

☒ Neighborhood Block Party ☐ Other _____

Location Requested

☐ Residential Street(s) _____ Street Names and Block #'s 900 block Lawrence St.

Date(s) of Event Sept. 17, 2016 Rain Date Sept. 17, 2016

Annual Event? ☐ No ☒ Yes

Estimated Attendance 75 (CERTIFICATE OF INSURANCE MAY BE REQUIRED)

Time of Event

Set-Up 1pm Event Starts 2pm
Take-Down 1AM Event Ends 12pm

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

wp (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 Wayne Plant Date 7/14/16

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 900 block of Lawrence St., a street in the city of Madison, request consent to the recreational use of this street between the hours of 1pm and 12 midnight on Sept 17, 2016 (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 WAYNE PLANT (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.

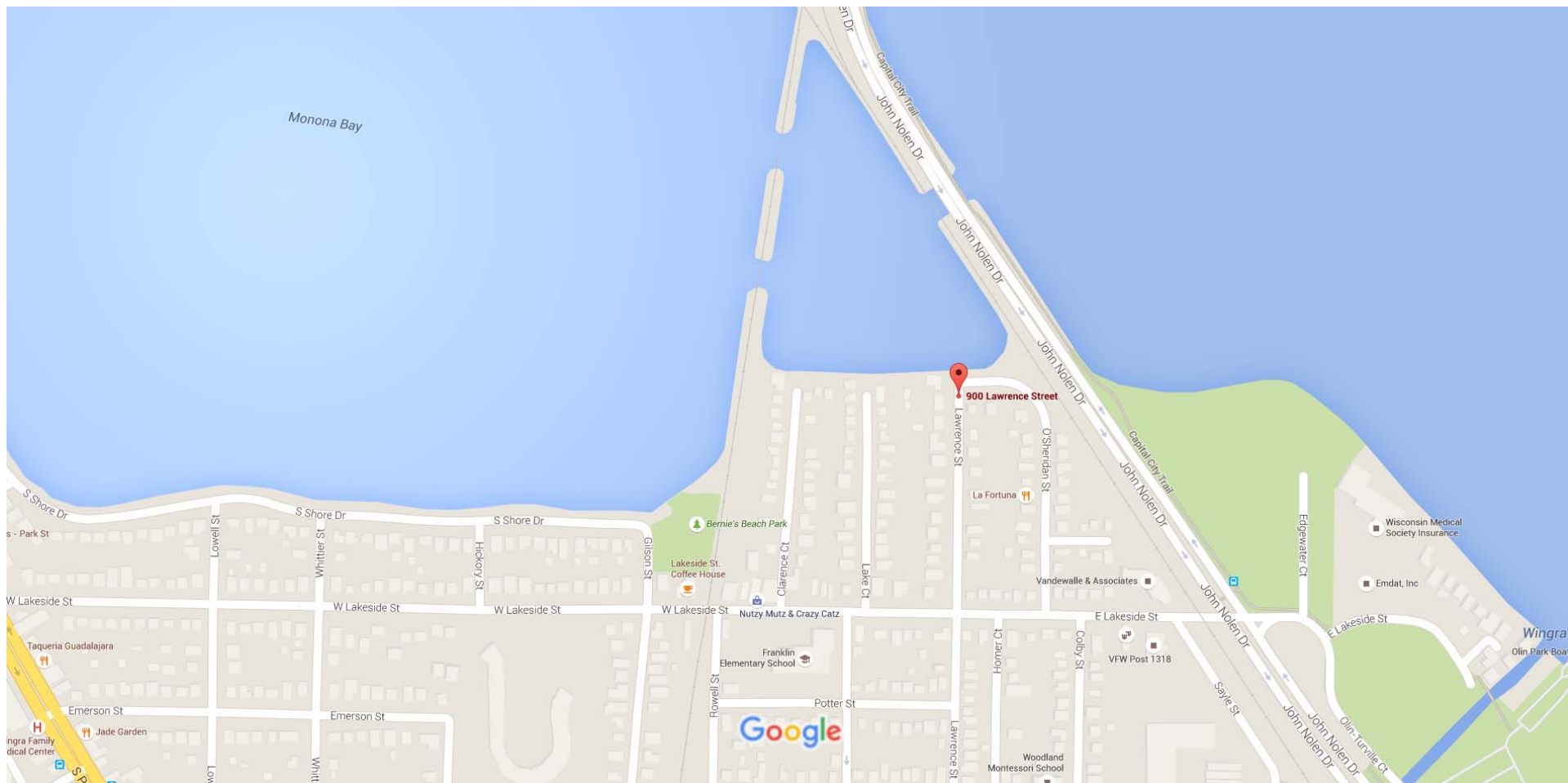
SIGNATURE	ADDRESS	DATE
	917 Lawrence St.	7/10/16
	913 Lawrence St.	7/10/16
	902 Lawrence St.	7/10/16
Tony Schmudlach	908 Lawrence St.	July 10 2016
	914 Lawrence St.	7/10/16
Lia Ellinide	946 Lawrence St.	7/10/16
	953 Lawrence St.	7/10/16
	962 Lawrence St.	7/10/16
	964 Lawrence St.	7/10/16
Todd Norman	968 Lawrence St.	7/10/16
Ryan Baily	959 Lawrence St.	7/10/16
	940 LAWRENCE ST	7-10-2016
	947 Lawrence St.	7-10-16
	923 Lawrence St.	7-10-16
Mia McL	957 Lawrence St.	7/10/16
Wayne Plant	921 Lawrence St.	7/14/16

I, WAYNE PLANT, 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 Wayne Plant

Date 7/14/16

Google Maps 900 Lawrence St



Map data ©2016 Google 200 ft

900 Lawrence St
Madison, WI 53715