BLOCK PARTY STREET USE PERMIT APPLICATION FOR OFFICE USE ONLY: Permit #_ ___ Date Submitted_ APPLICANT INFORMATION Contact Name Cell Phone (608) 658-4878 Home Phone Vandermeerjane 2 Jahoo.com **EVENT INFORMATION Event Category** ☑ Neighborhood Block Party ☐ Other_ Location Requested Street Names and Block #'s ☐ Residential Street(s) Date(s) of Event Sat. Sept. 3 Annual Event? ☐ No ☐ Yes (CERTIFICATE OF INSURANCE MAY BE REQUIRED) Estimated Attendance 50 Time of Event Set-Up_____ Take-Down 10 6 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.

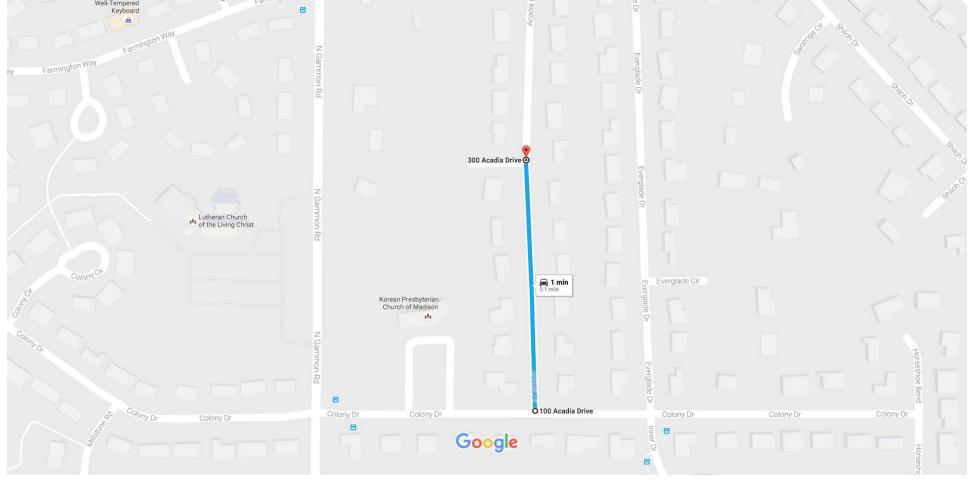
Signature

Date 8-1-2016

Google Maps

100 Acadia Dr, Madison, WI 53717 to 300 Acadia Drive, Madison, WI 53717

Drive 0.1 mile, 1 min



Map data ©2016 Google 100 ft ■

via Acadia Dr 1 min

1 min without traffic 0.1 mile

1 of 1 8/8/2016 11:07 AM

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 100-300 block of Acadia Drive, a street in the city of Madison, request consent to the recreational use of this street between the hours of 2 pm and 10 pm on 3 cm. Sept. 3 (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.		
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
ann wilde	204 Acadea DI.	8-7-16
- Sandine	301 Acadia Dr.	8-2-16
& mallum	109 Acadia DV	5.2.16
Ray & Dohna Unger	110 acadia Drive	8-2-16
	206 Acadia Pro	8/2/16
A Maria	210 Acadia Dr	\$/2/16/
Stay V. Frahmen	306 AcAdia, DR.	8/2/16
Helion	309 Acadie Dr	8/2/16
Jem Deda	309 Admin	8/2/16
Bobbe Snittle	310 Acadis Dy	8-2-11
	317 Acadia Dr	8-2-16
Mit Kan	322 Acalia Dr	4.2.16
Chlefon	326 Acadia De.	08/02/2016
Fusit Hardy	330 Acadia DV	8/2/2016
July M	318 Acrow DR	8/2/16
" Min horsey	202 Acadia Drive	8/2/2016
A NO	205 Acadia Dr	8/2/16
I M Auber	105 Geodia Dr	8/2/16
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		×
,, 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		Date 8 - \$ 2016