

BLOCK PARTY STREET USE PERMIT APPLICATION

FOR OFFICE USE ONLY: Permit # _____ Date Submitted _____

APPLICANT INFORMATION

Contact Name Kate Smith

Address 2449 Fox Avenue

City/State/Zip Madison, WI 53711

Home Phone — Cell Phone (608) 772-5658

E-mail Klubarsky@gmail.com

EVENT INFORMATION

Event Category

☒ Neighborhood Block Party ☐ Other _____

Location Requested

☒ Residential Street(s) _____ Street Names and Block #'s 2400 block Fox Avenue

Date(s) of Event 9/10/2016 Rain Date —

Annual Event? ☒ No ☐ Yes

Estimated Attendance 50 (CERTIFICATE OF INSURANCE MAY BE REQUIRED)

Time of Event

Set-Up 9 am Event Starts 10 am

Take-Down 9 pm Event Ends 8:30 pm

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

_____. (PLEASE INITIAL)

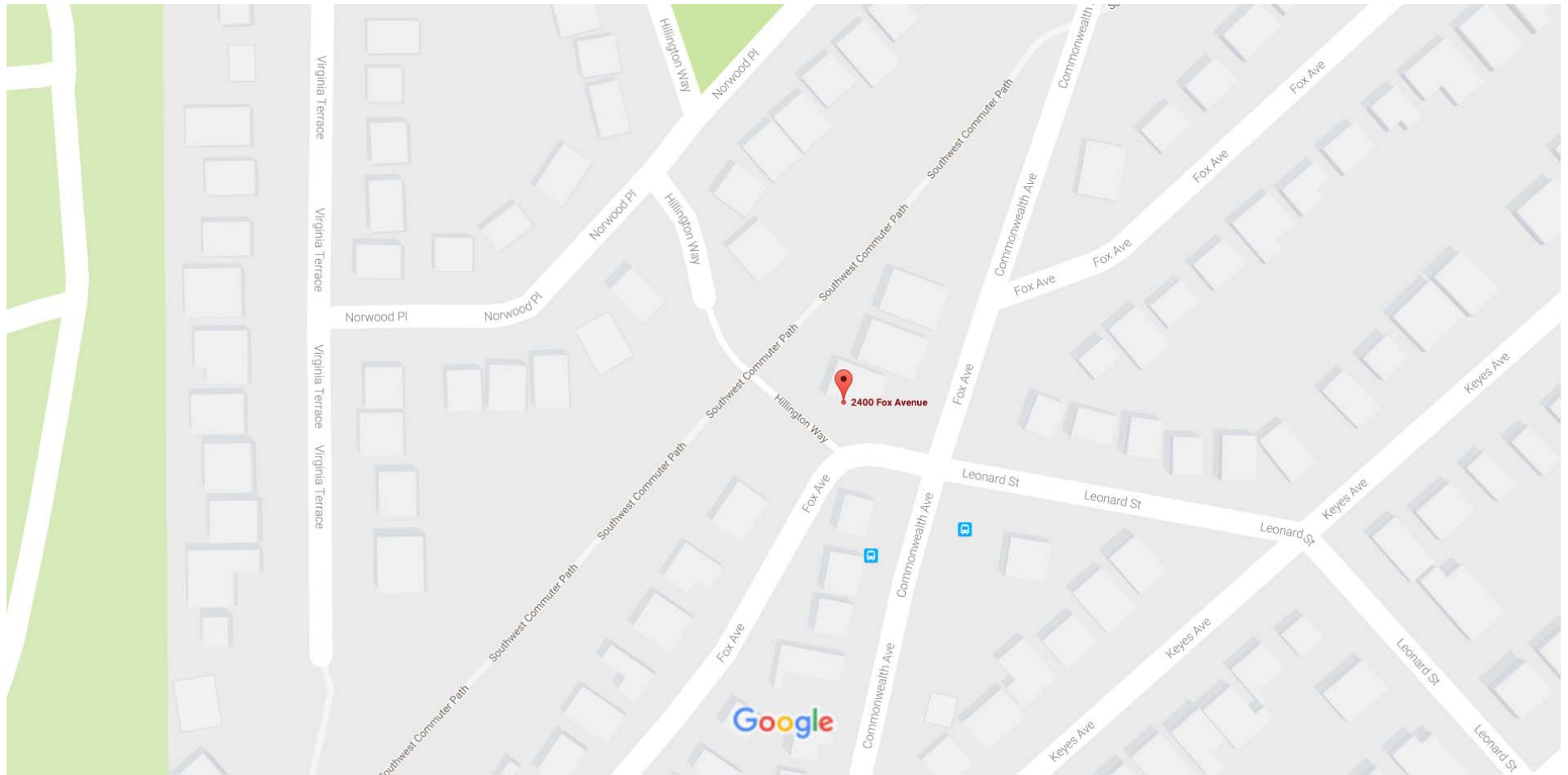
Your signature below indicates that you have read and understand the instructions and guidelines for a neighborhood block party. Further, the person/group named in this application will be responsible for the conduct of the group and for the condition of the reserved area. Falsification of information 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 K. Smith

Date 8/3/16

Google Maps 2400 Fox Ave



Map data ©2016 Google 50 ft

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 2400 block of Fox Avenue, a street in the city of Madison, request consent to the recreational use of this street between the hours of 9am and 9pm on Saturday/Sept. 10, 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 Kate Smith (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>Wilton Sanders</u>	<u>2433 Fox Ave, Madison</u>	<u>7/30/2016</u>
<u>Christoph Maus</u>	<u>2428 Fox Ave, Madison</u>	<u>7/30/2016</u>
<u>Kate E. Edwards</u>	<u>2422 Fox Ave, Madison</u>	<u>7/30/2016</u>
<u>Alvin Jay</u>	<u>2417 Fox Ave Madison</u>	<u>7/30/2016</u>
<u>Connor Murray</u>	<u>2421 Fox Ave "</u>	<u>7-30-2016</u>
<u>[Signature]</u>	<u>2412 Fox Ave Madison</u>	<u>7-30-2016</u>
<u>[Signature]</u>	<u>2414 Fox Ave Madison</u>	<u>7.30.2016</u>
<u>Annie Laurie Gaylor</u>	<u>2400 Fox Ave Madison</u>	<u>7-30-2016</u>
<u>Annie Laurie Gaylor</u>		
<u>Heather Keating</u>	<u>2427 Fox Ave Madison</u>	<u>7-30-2016</u>
<u>Kenneth Smith</u>	<u>2449 Fox Ave Madison</u>	<u>7/30/2016</u>
<u>[Signature]</u>	<u>2441 Fox Ave Madison</u>	<u>7/30/16</u>
<u>[Signature]</u>	<u>2440 Fox Ave Madison</u>	<u>7/30/16</u>
<u>[Signature]</u>	<u>2449 Fox Ave Madison</u>	<u>7/31/16</u>
<u>[Signature]</u>	<u>2404 Fox Ave Madison</u>	<u>7/31/16</u>
<u>[Signature]</u>	<u>2402 Fox Ave Madison</u>	<u>7-31-16</u>
<u>[Signature]</u>	<u>2430 Fox Ave Madison</u>	<u>7-31-16</u>
<u>[Signature]</u>	<u>2445 Fox Avenue Madison</u>	<u>7-31-16</u>

I, Sue Mitch, 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 Sue Mitch

Date 8/1/16