BLOCK PARTY STREET USE PERMIT APPLICATION	
FOR OFFICE USE ONLY: Permit # Date	e Submitted
APPLICANT INFORMATION	
Contact Name 5+eve Me	ters
Address 158 DIXUD St	
Address 158 Dixon St City/State/Zip Madison	UI 53704
Home Phone 241~3460	Cell Phone_608 695-4472
E-mail Metersstère C Q	Cell Phone 608 695-4472
EVENT INFORMATION	
Event Category	
Neighborhood Block Party	□ Other
Location Requested	
Residential Street(s)	Street Names and Block #'s(()() \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
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Date(s) of Event September 2	4, 2016 Rain Date
Annual Event? ☐ No Ø Yes	
Estimated Attendance	(CERTIFICATE OF INSURANCE MAY BE REQUIRED)
Time of Event	
Set-Up	Event Starts
Take-Down	Event Ends
•	
I/We waive the 21-day decision requir	rement(PLEASE INITIAL)
nock party. Further, the person/group named in	ead and understand the instructions and guidelines for a neighborhood n this application will be responsible for the conduct of the group and for n of information on the application will result in forfeiture of up to \$200 per
n addition to the rules and regulations detailed are subject to all applicable ordinances, statute	I in the permit application instructions and guidelines, Street Use Permits es and laws.
Signature Heven Melens	Date_Sept 2.2010

9/7/2016 4:28 PM

