

BLOCK PARTY STREET USE PERMIT APPLICATION

FOR OFFICE USE ONLY: Permit # _____ Date Submitted _____

APPLICANT INFORMATION

Contact Name John Zach Johnson

Address 522 McCormick Ave.

City/State/Zip Madison, WI 53704

Home Phone 847-567-3314

Cell Phone _____

E-mail j.zach.johnson@gmail.com

EVENT INFORMATION

Event Category

☐ Neighborhood Block Party

☒ Other Street Painting Event

Location Requested

☒ Residential Street(s)

Street Names and Block #'s Commercial Ave between McCormick Ave
and the Starkweather Creek Trail

Date(s) of Event June 5th 2021

Rain Date June 12th 2021

Annual Event? ☒ No ☐ Yes

Estimated Attendance 25 people at a time (CERTIFICATE OF INSURANCE MAY BE REQUIRED)

Time of Event

Set-Up 9am

Event Starts 10am

Take-Down 9pm (there needs to be a lot of
drying time before the pavement is driven on)

Event Ends 2pm

____ 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 4/7/21

