

REQUEST FOR ROAD CLOSING

1) Name of applicant: _____

2) Address of applicant: _____

3) Home phone number _____ Cell phone number _____

4) Street to be closed: _____

5) Description of function or activity (Block Party, Parade, etc) _____

6) Months, days and hours of proposed activity: _____

7) Approximate number of persons attending activity: _____

8) Using reverse side of this request, provide a detailed diagram of activity showing location, parking, sanitary facilities, location of barricades, and tables/chairs or structures.

9) Comply with A or B below:

A) If objects are to be placed in the roadway, evidence of personal liability insurance (at least \$300,000) must be provided at least one week prior to the event by applicant or owner of objects

B) No objects will be placed in a public road or right-of-way (therefore no evidence of insurance is provided) and the closing is for safety purpose only.

Signature of Applicant: _____ Date: _____

Signature of Applicant: _____ Date: _____

Mayor or Chief of Police: _____ Date: _____

Recreation Committee
(needed only if on park land): _____ Date: _____