

CITY OF WESTERVILLE

REQUEST FOR BLOCK PARTY
(Read Instructions on reverse side before filling out)

Date of Application _____

We are requesting approval to block _____ to through vehicular traffic between
_____ Street and _____ Street
Street Street

On _____ for the purpose of conducting a block party.
Day Date

The street will be closed from _____ to _____.

Number of homeowners in blocked off area affected _____.

All residents in the area have been contacted by _____ and do not object.

Person making request and deposit: _____
(An approved copy will be mailed to the person requesting the permit)

Deposit Paid _____ Address: _____
Street Zip code

Phone # _____

Remarks: _____

There will be entertainment in the form of _____

Number of expected participants: _____

Cones requested for blocking? _____

INSTRUCTIONS

- 1. This request is to be submitted at least 10 days prior to the requested date to the Office of the City Manager.**
- 2. For approval, a minimum of 90% of the homeowners in a 4 block area affected, must favor this request after they have knowledge of any forms of entertainment to be used and the amount of people to be present.**
- 3. The street shall be at all times accessible to emergency vehicles.**
- 4. Permits shall terminate at 12:00 midnight and blockades shall be removed and people will be out of the street.**
- 5. This permit is subject to revocation anytime during its operation when 5 or more complaints are received.**
- 6. A deposit of \$25.00 will be made and will be forfeitable upon breach of any of the conditions agreed hereto or for any damages.**
- 7. This request is for a block party, i.e., for the block, not for a particular class or group within or without the block.**
- 8. All Music or noise above normal conversations shall cease at 9:00 P.M.**
- 9. The person to whom this permit is granted is held responsible for any violations of the provision herein.**

I certify that I have read the above instructions and hereby agree to follow and obey them. I also accept all responsibility for any breaches of the provisions herein.

Signature

Please submit application to: Ashley Burgess, 21 S. State St., Westerville, OH 43081 or E-mail: Ashley.Burgess@westerville.org fax: 614-901-6401