

BLOCK PARTY/TEMPORARY STREET CLOSURE APPLICATION

Street closures in the Village of South Elgin are approved pursuant to Title IX, Section 94 of the Village Code of Ordinances (Temporary Street Closures). Applications must be approved 30 days prior to event date.

SECTION A: EVENT DETAILS AND PERSON-IN-CHARGE INFORMATION

Event Address:				
	(Describe street, block or interse	ction to be closed)		
Date of Event:	Between the hours of	:am/pm	n and	am/pm
Rain Date (if applicable):	Estimated Numb	er of Participants		
If sound amplification equipme	ent will be used, please describe:			
Will charity, gratuity or offerin	gs be sold, please describe:			
Applicant Name:				
Address:				
Home Phone:	Cell Phone:	Email:		
	N OF BARRICADES partment will provide residents loa Municipal Annex, 1 W. State Street		•	
Pick Up Date:	Return Date:	No. of Barrica	des Requested:	
SECTION C: POLICE DEPARTM	ENT AND FIRE DISTRICT			
Parks and Recreation Staff will	inform Police and Fire District of ev	vent details.		
Assigned Reviewer Name and	Date for PD:			
Assigned Reviewer Name and	Date for FD:			
SECTION D: ACKNOWLEDGEM	ENT AND SIGNATURE			

I the undersigned have contacted all residents immediately adjacent to the streets and parkways to be used for the event and have received no objections. I understand that in the event of an objection, the party will be cancelled or terminated. (Attached to this application is a signature sheet for all affected residents of the street – this signature must be returned with the application).

I further understand that I will be responsible for the removal of any litter caused by the event; damage to loaned barricades and that drinking alcoholic beverages on Village streets is prohibited.

Signature:	Date:			
		For Office Use Only		
Date Received:	Approved by:	Chief of Police		Director of Parks and Recreation

BLOCK PARTY/TEMPORARY STREET CLOSURE APPLICATION ADDENDUM

By signing this application addendum, I/we are confirming that we have been notified of the request to close the street on the day and times noted on the application and have no objection to the closure. We also understand that as a participant of the event we are agreeing to abide by all policies and ordinances of the Village of South Elgin.

Resident Name (printed)	Resident Address	Resident Signature