

10 N. Water Street  
847-741-2151  
847-888-0052 Fax

## Village of South Elgin Police Department

www.southelgin.com

Hours of Operation  
Monday - Friday  
8:30 am - 5:00 pm  
**24-Hour 911**

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### 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).

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

Event Address: \_\_\_\_\_  
(Describe street, block or intersection to be closed)

Date of Event: \_\_\_\_\_ Between the hours of: \_\_\_\_\_ am/pm and \_\_\_\_\_ am/pm

Rain Date (if applicable): \_\_\_\_\_ Estimated Number of Participants \_\_\_\_\_

If sound amplification equipment will be used, please describe: \_\_\_\_\_  
\_\_\_\_\_

Will charity, gratuity or offerings be sold, please describe: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

#### SECTION B: TEMPORARY LOAN OF BARRICADES

The Public Works Department will provide residents loan of barricades for a street closure providing they are picked up and return to the Public Services Facility, 1000 Bowes Road between the hours of 7:30am-11am or 1pm-3pm, M-F.

Pick Up Date: \_\_\_\_\_ Return Date: \_\_\_\_\_ No. of Barricades Requested: \_\_\_\_\_

#### SECTION C: ACKNOWLEDGEMENT 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: \_\_\_\_\_

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#### For Office Use Only

Date Received: \_\_\_\_\_ Approved by: \_\_\_\_\_  
Chief of Police Director of Public Works

