

THE CITY OF LAKE FOREST BLOCK PARTY APPLICATION

NAME: _____

ADDRESS: _____
(Street) (City) (Zip Code)

HOME or CELL PHONE: _____ EMAIL: _____
(for confirmation) PLEASE PRINT

DATE OF BLOCK PARTY: _____ RAIN DATE (IF ANY): _____

START TIME: _____ END TIME: _____

EXACT LOCATION OF EVENT: _____

STREET(S) TO BE BLOCKED OFF: _____

Please note: for public safety purposes block parties must not block intersections, streets, cul-de-sacs, right-of-ways, or other roadways. Only moveable barricades may be used. Blocking streets with vehicles is prohibited.

CONDITIONS:

- Will observe capacity restrictions. (Subject to change based on latest data & guidance).
- Will not sell or serve Alcoholic Beverages on PUBLIC PROPERTY
- Will not block private driveways and fire hydrants
- All residents of the block have been informed about this party
- Barricades must be stored in a locked garage
- Must clean all party refuse and materials from the street, sidewalk areas and from yards.

The undersigned represents the participants in said "Block Party" and agrees to the conditions of the application:

Signature: _____ Date: _____

OFFICE USE ONLY

CC:
Police Fire Streets

Approved by: _____

Ward: _____