



CINNAMINSON TOWNSHIP



APPLICATION FOR BLOCK PARTY PERMIT

Location of Street Closing Request:			
Date of Closing:		Rain Date:	
		Time of Closing (max 8a to 10p)	

APPLICANT PRIMATE CONTACT INFORMATION: (if more than one contact person, provide information for each person at the end of application)

Name:			
Address:			
Telephone:		Cell Phone:	
Explanation of Activity:			

BLOCK PARTY DETAILS

Will there be any temporary structures, rides, etc. in roadways:	Yes	No
Anticipated number of participants:		Will alcohol be permitted:
		Yes
		No
If yes, identify location and access limitations on required sketch		
Method of Closing Street:		

NOTE: A sketch must be provided, showing houses (with numbers), barricades, cooking facilities, alcohol serving locations and temporary obstructions, etc.

Attach a listing of names and addresses of all individuals directly affected by the closure area including signature of at least one property owner for each address identified acknowledging closure. (see attached sheet)

I, _____ as applicant for this permit, acknowledge that (1) no motor vehicles will be permitted during the block party except for vehicles used in connection with the block party, municipal vehicles and emergency vehicles; (2) that the street will not be obstructed for emergency vehicles; and (3) that the roadway will be free of litter and debris at the conclusion of the event.

I further acknowledge and agree to save and hold the Township of Cinnaminson harmless of and from any and all obligations and liabilities which may arise from the temporary street closing which represents the subject matter of the application. I further agree that as part of these provisions to hold harmless the Township and to defend at his/her own cost and expense any claims or lawsuits instituted by participants, spectators or other third parties, which obligations or liabilities might otherwise exist or be assessed against the Township

Signature

Date



CINNAMINSON TOWNSHIP



FOR OFFICIAL USE ONLY

Date Application was received	
-------------------------------	--

POLICE DEPARTMENT

Cinnaminson PD Reviewed by:		Date:	
Submission deemed acceptable:		YES	NO
Reason for rejection			

TOWNSHIP BUILDING

Township Admin. Reviewed by:		Date:	
Submission deemed acceptable:		YES	NO
Reason for rejection			

DEPARTMENT OF PUBLIC WORKS

Township Admin. Reviewed by:		Date:	
Submission deemed acceptable:		YES	NO
Reason for rejection			

Notification to Applicant	
Method of Notification	