STREET CLOSURE APPLICATION

Date: _____

Applicant Name: _____

Mailing address: _____

Phone: _____ **Email:** _____

Name of Event: _____

Sponsoring Organization: _____

Date of Closure: _____ **Time From:** _____ **To:** _____

Brief Description of Event: _____

_____

_____

_____

_____

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_____

_____

Signature: _____

Please attach a detailed diagram of area including barricades.

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Application Fee paid: ☐ **City Street $25/event** ☐ **Main Street/Parade Route Detour $150/event**

Police Chief Recommendation: ☐ Approve ☐ Deny **Signature:** _____

Public Works Recommendation: ☐ Approve ☐ Deny **Signature:** _____

Signature: _____ **Date:** _____
 City Clerk or Designee

Application is: ☐ **Approved*** ☐ **Denied** ☐ **Emailed to Applicant/Police/Fire/Public Works**
 Barricades will be delivered to the location by the city. It is the applicants' responsibility to set them out at the approved time.