

CITY OF GERMANTOWN
BLOCK PARTY APPLICATION

APPLICANT: Please complete the following information A through G.

A. Today's Date: _____

B. Applicant: _____
Name Address Phone Number

C. Purpose or Occasion: _____

D. Describe Activities: _____

E. Date of Activity: _____ Time: FROM _____ TO _____

F. If barricades are needed, note location(s): _____

G. Please check that you agree to the following requirements:

- All bouncy houses and/or other children's toys shall be properly secured
- The city will be reimbursed for any missing/damaged barricades
- The named street shall be opened and closed at the designated times
- Road will be kept accessible for emergency vehicles at all times

Applicant's Signature

Date

PLEASE MAKE ADDITIONAL COMMENTS ON REVERSE SIDE

FOR OFFICE USE ONLY

APPLICATION NOTED BY:	Approve	Disapprove
Police Department _____	_____	_____
Fire Department _____	_____	_____
Service Department _____	_____	_____

City Manager's Permission for Block Party: GRANTED _____ DENIED _____

City Manager

cc: Police Department
Fire Department
Service Department
File