Permit No.	



## SPECIAL EVENT PERMIT APPLICATION (Block Party/Street Closure)

## **Event Information:**

Location of Block Party/Stree	et Closure:			
Event Date(s):	Start Time:	am/pm End Time:am/pm		
Description of event:				
Alcohol/CMB Served: Yes or No		Amplified Music: Yes or No		
		t. Marys City Code – Chapter 13-206.) Marys City Code – Chapter 13-201.)		
	Diagram of the event a	rea is required.		
Explain Event Clean Up:				
<b>Event Contact Information</b>	<u>!</u>			
Company/Group/Person:				
Address:	City:	Zip Code:		
Phone Number:	Phone Number: E-Mail Address:			
knowledge. The permit, if gra of the City of St. Marys. I he intent of this application. I un	nted, is not transferable and reby affirm that the above inderstand that the issuance s and requirements. I,			
PRINT Name of applicant		Number of barricades requested		
Signature of applicant		Date		
For City Staff Use:				
Signed hold harmless agre				
Map of event area attached				
Approved at	City Commission r	neeting		