

Block Party Neighborhood Street Closure Petition Form

| I, the undersigned, understand that | | | _is requesting permission from Plain Township to have a Block Party | | |
|---|---------------------------|---------------------------------------|---|-----------------------------------|--------------------|
| and/or close streets in our neighborhood on (da | | | to | (hours). By signing below, I am a | acknowledging this |
| | event and giving my appro | oval for these closures. Streets to b | e blocked | | |
| | | | | | |
| | Contact perso | n/ Coordinator | _, Type/Purp | ose of Event | |
| Date | Name (Print) | Street Address | | Signature | Phone Number |
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