



BLOCK PARTY PERMIT APPLICATION

Block party permits are for neighborhood parties that would like to shut down a City street for use during the event. Please return the completed application to the City Manager's Office at City Hall (749 Main Street or by email to MeredythM@LouisvilleCO.gov or by fax to 303.335.4550.

APPLICANT INFORMATION:

Name: _____ Cell Phone: _____

Email: _____

Address: _____

City: _____ State: _____ Zip Code: _____

EVENT DESCRIPTION: _____

DAY & DATE OF EVENT: _____

PROPOSED CLOSURE AREA: _____

PROPOSED CLOSURE TIME (INCLUDING SET-UP & BREAKDOWN) _____ AM/PM _____ AM/PM

PROPOSED EVENT START TIME AND FINISH TIME: _____ AM/PM _____ AM/PM

ESTIMATED NUMBER OF PARTICIPANTS AT THE EVENT: _____

Are any fees, charges, or other donations to be received for the event? If so, how are the funds to be used? _____

Required attachments:

1. Signed Application Form _____ Yes _____ N/A

2. A map showing the proposed street closure _____ Yes _____ N/A

3. Are you requesting to use City of Louisville barricades? _____ yes _____ no

The City offers barricades on a limited basis for block parties. Barricades are delivered on the last working day prior to the event and picked up the first working day after the party, generally Friday and Monday for weekend events. The applicant is responsible for the placement, monitoring, and maintenance of the barricades during the event, the removal of the barricades from the street following the event, and the safety of the barricades while they are in your possession.

Barricade delivery address and phone number: _____

4. A petition form showing the approval of those affected by the closure. _____ Yes _____ N/A

Will live music be provided? _____ yes _____ no

If live music is to be played in a residentially zoned area, a permit is required. There is a \$20.00 permit fee. Please contact the Deputy City Clerk (303.335.4574 or CarolH@LouisvilleCO.gov) for the application.

Conditions:

- The applicant agrees to comply with all of the terms, conditions, and stipulations of this permit, all ordinances of the City, and all other applicable laws, and understands that failure to comply will result in immediate revocation of this permit. Final conditions will be sent to the applicant with the approved permit.
- The City has no liability for bodily injury or property damage arising from this event. Any liability arising from the event shall be the sole responsibility of the applicant and participants. The City's insurance does not cover the applicant. The Applicant agrees to comply with all of the terms, conditions and stipulations of this permit, all ordinances of the City, other applicable laws and understands that failure to comply will result in immediate revocation of this permit.
- Adequate crowd control, including ingress and egress control, noise control, restroom facilities, space for anticipated number of participants, clean-up, and parking are all the responsibility of the applicant.
- Events sponsors who hold an event without a permit will not be eligible for a permit again for 12 months.
- Failure to clean up from an event as required in the permit will make the applicant/sponsor ineligible for a permit for 12 months.
- The City has the discretion to limit the number of events in one area (downtown, Community Park) to mitigate the impact on residents and property owners.

APPLICANT SIGNATURE

DATE

Should you have questions, please contact the City Manager's Office at 303.335.4536 or MeredythM@LouisvilleCO.gov.

EVENT DESCRIPTION/DATE: _____

INTERNAL REVIEW:

- | | | |
|---|------------------------------|------------------------------|
| <i>Operations Division Review on File</i> | <input type="checkbox"/> Yes | <input type="checkbox"/> N/A |
| <i>Public Works Engineering Review on File</i> | <input type="checkbox"/> Yes | <input type="checkbox"/> N/A |
| <i>Police Department Review on File</i> | <input type="checkbox"/> Yes | <input type="checkbox"/> N/A |
| <i>Parks & Recreation Department Review on File</i> | <input type="checkbox"/> Yes | <input type="checkbox"/> N/A |
| <i>Fire District Review on File</i> | <input type="checkbox"/> Yes | <input type="checkbox"/> N/A |

Comments:

APPROVAL CONDITIONS

SPECIAL TERMS/CONDITIONS/STIPULATIONS: _____

This application is approved, subject to all terms, conditions, and stipulations stated above.

DEPUTY CITY MANAGER

DATE

