BLOCK PARTY/ROAD CLOSING REQUEST

ROAD CLOSING REQUESTS MUST BE SUBMITTED AT LEAST SEVEN (7) DAYS BEFORE THE DATE OF THE REQUESTED ROAD CLOSING.

The road listed on this request may be closed to through traffic as long as provisions are made to interrupt your block party/road closing if an emergency vehicle needs to get through.

Our Public Works Department will provide you with the appropriate "Road Closed" signs on or before the date of your road closing. These signs will be picked up the following week. The signs must be in place for the duration of your event and moved to the side of the road (onto the grass) when it is over.

Please Note: You are responsible for the clean up of debris on the closed street after the party is held. All noise (music, etc.) must be kept to a reasonable level throughout the day. Be courteous to nearby neighbors not in attendance. **Please Note: Signing this form states you accept financial responsibility for these signs, if they are damaged or stolen.**

Montgomery Township will notify the following Emergency services of the road closing:

Police Department	Public Works Department
VMSC (ambulance)	Fire Department of Montgomery Township

This permit is issued under authority of the Code of the Township of Montgomery, Chapter 222, Article I, Section 222-7.

Please have this permit available for inspection on the date of the block party.

Requested By: _____

Address: _____

_____

Telephone: _____

Purpose of Road Closing: _____

Road to be Closed: _____

ENTIRE LENGTH or PORTION
(circle one)

You must attach a map showing area requested to be closed.

Date of Closing: _____

Time: _____ until

Rain Date: _____

Have all residents on the street been invited?
YES NO (circle one)

Has this road been dedicated to Montgomery Township?
YES NO (circle one)

If NO, the developer must sign below.

As Owner of the above referenced non-dedicated road and Developer of the properties on that road, I hereby give my permission for the closing of this road on the date(s) and times(s) listed above.

_____
Applicant Date

_____
John B. Nagel, Township Manager Date

_____
Developer/Owner Date

_____
Developer/Owner (PLEASE PRINT) Date