



STREET EVENT APPLICATION

CITY OF PHILADELPHIA
STREETS DEPARTMENT
HIGHWAY DIVISION - RIGHT-OF-WAY UNIT
1401 JOHN F. KENNEDY BOULEVARD
MUNICIPAL SERVICES BUILDING ROOM 940
PHILADELPHIA, PA 19102-1676 (215) 686-5500

HUNDRED BLOCK (S) AND STREET TO BE CLOSED		FROM (STREET)		TO (STREET)	
DATE OF EVENT	<i>USE FOLLOWING SPACES FOR MULTIPLE DATES</i>	DATE OF EVENT	DATE OF EVENT	DATE OF EVENT	DATE OF EVENT
RAIN DATE		RAIN DATE	RAIN DATE	RAIN DATE	RAIN DATE

Event Type

A. Block Party (Weekend, Memorial Day, July 4th, or Labor Day Only)
Hours are 8:00AM to 8:30PM

Event Fees

A. \$25.00 if application received within 21 calendar days of event
\$60.00 if application received less than 21 calendar days of event

B. Other Events

B. \$150.00

(Including Birthday Celebrations, Weddings, Proms, Serenades & other non-block party events)
Maximum 6 hours and there are no rain dates for these events

PLEASE READ THE FOLLOWING BEFORE SUBMITTING YOUR APPLICATION:

- **NO APPLICATIONS WILL BE PROCESSED WITHIN FOUR (4) WORKING DAYS OF THE EVENT.**
- Street events will only be approved for five (5) dates a year, per block.
- Rain dates should occur within one (1) week of the original event date. No rain dates will be permitted on holidays.
- This application must be accompanied by a check or money order (non-refundable) payable to the "City of Philadelphia". (NO CASH WILL BE ACCEPTED)
- Applicant must be a resident of the block being closed.
- If the street being closed for an event is the only entrance/exit to another street (a "T" street), a petition to close the "T" street is also required.
- Applications for block parties must have a petition signed by 75% of the households (including 75% of any apartment complex) on the block and non-block party events must have a petition signed by 90% of the households (including 90% of any apartment complex) on the block.
- Photocopies of this application or petition will not be accepted.
- If the event is being held on a street that doesn't have any residents, a copy of an insurance certificate to cover the cost of any damages from the event must be submitted with this application.
- The residents will assume responsibility for the proper disposal of all trash and recyclables associated with the event. However, should you wish to have these items collected in advance of the regular collection day, contact the Streets Department at 215-686-5502 to arrange for this service.
Note: A five (5) day advance notice and an additional fee of \$50 is required for this service. This fee should be made by check or money order made payable to the "City of Philadelphia".
- The Streets Department reserves the right to implement new policies that are not included on the permit guide.

APPLICANT'S NAME			DAYTIME TELEPHONE NUMBER		
APPLICANT'S ADDRESS			ZIP CODE		
SPONSORING ORGANIZATION (IF ANY)		ADDRESS		DAYTIME TELEPHONE NUMBER	
TIME OF EVENT (S)		TYPE OF EVENT		WILL A RELIGIOUS EVENT BE CONDUCTED ON STREET?	
A.M. P.M.	A.M. P.M.			YES	NO
DOES A BUS OR TROLLEY TRAVEL ON THE STREET TO BE CLOSED?			POLICE DISTRICT		NUMBER OF PEOPLE ATTENDING
YES	NO				

WHEN APPROVED, A STREET EVENT PERMIT SHALL BE ISSUED AUTHORIZING THE APPLICANT TO CLOSE THE STREET. IT IS SUBJECT TO REVOCATION IF THE APPLICANT DOES NOT COMPLY WITH ALL PERTINENT LAWS, RULES AND REGULATIONS INCLUDING ANY CONDITIONS OR RESTRICTIONS IMPOSED BY THE CITY OF PHILADELPHIA.

I hereby certify that the statements contained herein are true and correct to the best of my knowledge and belief. I understand that if I knowingly make any false statement herein I am subject to such penalties that may be prescribed by law or ordinance.

APPLICANT'S SIGNATURE: _____ THIS FORM WILL BE RETURNED IF NOT SIGNED BY APPLICANT _____ DATE _____

SIGNATURES AND ADDRESSES OF ALL PETITIONERS

ONE ADULT SIGNATURE PER HOUSEHOLD FROM 75%* OF RESIDENTS LIVING ON THE BLOCK IS REQUIRED FOR APPROVAL
USE ADDITIONAL SHEETS IF NECESSARY

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WE AGREE TO BE RESPONSIBLE FOR ALL INJURIES TO PERSONS OR DAMAGE TO PROPERTY

NUMBER OF HOUSES ON BLOCK	NUMBER OF VACANT HOUSES ON BLOCK	NUMBER OF SIGNATURES
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PLEASE PRINT AND SIGN LEGIBLITY WHEN COMPLETING INFORMATION BELOW

FIRST NAME, LAST NAME	SIGNATURE	ADDRESS	FIRST NAME, LAST NAME	SIGNATURE	ADDRESS
1.			30.		
2.			31.		
3.			32.		
4.			33.		
5.			34.		
6.			35.		
7.			36.		
8.			37.		
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23.			52.		
24.			53.		
25.			54.		
26.			55.		
27.			56.		
28.			57.		
29.			58.		