

748 River Road Fair Haven NJ 07704 (732) 747-0241 www.fairhavennj.net

APPLICATION FOR BLOCK PARTY/DANCE

Location:	The state of the s
Name of Applicant:	
Address of Applicant:	
Telephone #	Rain Date:
Date:	Rain Date:
Time: From	To:
Name of the Street or Street closed if less than the entire	s proposed to be closed, and/or the portion to be length of the street:
Please indicate area of stre	eet(s) to be closed on map provided.
Will any booths, rides of other use during the event? ☐ Ye If so, please describe:	er structures or mechanical equipment be erected for some No
What arrangements are bein the event?	ng made for collection and removal of litter created by
and will serve as the liaison the block party. Name:	Il be responsible for the conduct of the block party between the Chief of Police and the participants of Phone Number:
	attendees and exact street residence, including s, of those attending the party:
Do you need a barricade? □ If so, would you like one deli	Yes □ No vered to the intersections or to your address?

Please provide any additional information which the Chief of Police will find helpful in deciding whether a permit should be issued.

I/We hereby agree to the following:

- 1. Access shall be maintained for all emergency vehicles in the area and all residents.
- 2. I/We will be responsible for placing the necessary barricades in a safe and neat manner and properly lighting them if the function is held after dark.
- Barricades shall be removed immediately after the conclusion of the function.
- 4. All activities must cease by 11:00 pm.
- 5. The Borough shall not be responsible for injuries.
- 6. Area must be left in a neat and orderly condition.
- 7. Written approval and addresses of residents affected must be submitted whether they are attending or not. You may use the back of this sheet or attach a separate sheet if you need more space.
- 8. Streets and sidewalks cannot be closed to pedestrian traffic.

Note: It shall be the duty and responsibility of all persons participating in the block party to agree to hold the Borough of Fair Haven, its offices, employees and/or agents harmless from any costs, damages and liabilities which may accrue or be claimed to accrue by reason of the block party.

Signature:
Street Address:
Phone Number
Please allow at least six weeks for approval by the Chief of Police and Borough Council by resolution.
Permit #
Authorized Signature:
CHIEF OF POLICE Date

I/W	e, residing at	, hereby
	Give permission for the event to be held	Do not give permission for the event to be held
	Will be attending # of attendees:	Will not be attending
	Signature:	Date:
I/W	e, residing at	 , hereby
	Give permission for the event to be held	Do not give permission for the event to be held
	Will be attending # of attendees:	Will not be attending
	Signature:	Date:
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	Will be attending # of attendees:	Will not be attending
	Signature:	Date:
I/W		, hereby
	Give permission for the event to be held	
	Will be attending # of attendees:	Will not be attending
	Signature:	

