



Signature Form for Notification Of Upcoming Event Street Closure

Name of the business or organization hosting the event: _____

Name of the beneficiary (non-profit organization) of the event: _____

Contact person name and phone number: _____

Name of the event: _____

The above listed are proposing a street closure for an event.

The closure of _____ between _____ and _____
Street street street

To be on: _____ from _____ until _____
date time time

By signing below, we, the abutting residents and/or business representatives affected by the proposed closure acknowledge notification and grant permission for the closure.

Printed Name	Signature	Address	Phone

Attach additional page if necessary