BLOCK PARTY PERMIT APPLICATION

Name: ______________________________________________________________

Address: ____________________________________________________________

Phone: __________________ Fax: __________________ E-mail: __________________

Sponsoring Organization (if any): _______________________________________

Street(s) requiring barricades: __________________________________________

Date of Event: _______________ Rain Date: _______________ Time: _______________

Barricades Requested (City to deliver/pick up) _____ Yes     _____ No

CONDITIONS FOR APPROVAL

- Applicant is responsible for placing and removing barricades. Please note, streets may not be CLOSED. Barricades must be placed so that vehicles may get through in case of emergency. If barricades are required, please designate one location for the Department of Public Works (914-967-7464) to deliver and pick up the barricades ____________________________.

- No alcoholic beverages may be sold, served, or carried on the street.

- Applicant is responsible for maintaining and leaving the area in a safe and clean condition.

I certify that I have read and understand all of the conditions and procedures that are required in order to obtain a block party permit and I agree to comply with each of those conditions and procedures. I agree to indemnify and hold harmless the City of Rye and all City of Rye officers, employees, agents and representatives, from any claims (including costs of defending such claims) or damages that may arise from the occurrence of the block party or from related events. I understand that a block party permit does not authorize violation of city or state laws, except to the limited extent that it allows a street to be temporarily closed in conformity with permit conditions. I also understand that a block party permit does not excuse failure to comply with orders of law enforcement personnel, firefighters, other emergency workers or city officials, and that it does not provide immunity from civil claims of third parties that are based upon damages occurring at, or in conjunction with, block party events. I affirm under penalty of perjury that the statements and representations made in connection with this application are true and correct to the best of my knowledge.

______________________________________________  ______________________
Applicant Signature                                Date

Permit Approved No. ____________  Permit Disapproved ____  Date: ________________

______________________________________________  ______________________
City Official Signature                            Date

cc: _____ City Manager    _____ Police    _____ Fire    _____ DPW    _____ Engineer