

CITY OF FLORISSANT BLOCK PARTY PERMIT

Name of Applicant: _____

Address of Block Party: _____

Date: _____ Time: _____

Authorization to block off your street for a Block Party on the above date during the above stated time is contingent upon the following stipulations:

- 1. Although the street will be closed, provision must be made for **EMERGENCY VEHICLES**
- 2. Music will be allowed but it must be maintained at a reasonable volume so as not to disturb nearby neighbors.
- 3. No debris or litter is to remain following the Block Party.
- 4. Signatures of the residents of each house on the block where said Block Party will be held must be attached.

Barricades will be provided by the City's Street Department.

______ is authorized by the City of Florissant to hold a Block Party as

stated above.

Mayor, City of Florissant

Cc: Police Department Public Works Department Street Department We the undersigned residents of Florissant, Missouri, residing on

(Street Name)

wish to request that the above named street between ______ block and ______ block be <u>CLOSED</u> for a Block Party. We agree to all the terms contained in the attached application.

Name	Address	Phone #