



Department of Public Works
BLOCK PARTY PERMIT APPLICATION
 (Please type or print in black ink; this form will be reproduced)

OFFICE USE ONLY	
Ald:	_____
File:	_____

After completing, please return to: Special Event Permit Office, 841 North Broadway, Room 501, Milwaukee, WI 53202
 FAX: (414) 286-3953 Phone: (414) 286-3329

Note: This permit is subject to the Milwaukee Code of Ordinances, the City Charter and all rules and regulations governing street rights-of-way. The applicant agrees to indemnify and save harmless the City from and against all liabilities, claims, demands, judgments, losses and all suits at law or in equity, cost and expenses, including reasonable attorney fees, for injury or death of any person or loss or damage to the property of any person, firm, organization or corporation, including both parties thereto and their employees, arising as a consequence of the granting of the permit for such special event. The applicant agrees that the sponsoring organization will not exclude any person from the public area described in the permit because of race, color, national origin or disability. Please allow four weeks for processing. During June, July and August, applications are not accepted any later than two weeks before the event. Signatures of consent must be obtained from neighbors affected by the event.

Date of Event				Raindate (day after original request)	<input type="checkbox"/> No		<input type="checkbox"/> Yes
Time of street closure (include set-up and take-down)							
Name of Sponsor							
Permit Applicant Information				Alternate Applicant Information (required)			
Name				Name			
Address				Address			
City/State			Zip	City/State			Zip
E-Mail				E-Mail			
Phone				Phone			
Cell				Cell			
FAX				FAX			
Purpose of Event:							
We would like to block off (name of street) _____ (Street) from _____ (Street) to _____ (Street)							
Barricades may be delivered to (address required):							
Applicant's signature (permittee):					Date:		
Aldermanic Approval:					Date:		

For DPW use only: Application Received: _____

Equipment:	Fee:	Distribution:	
	\$	MPD	
	\$	Traffic Engineering	
	\$	Common Council	
	\$	Public Works Approval:	
Classification:	\$		
TOTAL	\$	Date:	

