



Village of Midlothian

Block Party/Street Closure/Multi-Residence Event Permit Request



Requested by: Event must have one primary sponsor with a minimum of three co-sponsors

Name: _____ Date: _____

Address: _____

Phone: _____ Date of Event: _____

Time of Event: _____ - _____ Block to be closed: _____

Request for Attendance - requests will be honored based upon availability of officials

Fire Department: Yes _____ No _____ Time of arrival/departure _____ - _____

Elected Official: Name/Position of Official _____

Provide contact information for at least three other residents of the block who are requesting closure for event

Name	Address	Phone

Approved by: _____

Office use only

_____ \$10.00 deposit received for barricades Method of payment: _____

_____ Resident notified that barricades must be picked up by 3:00 at PW garage (employee initials _____)

_____ Public Works notified

_____ Fire Department Notified

_____ Public Official Notified

Public Works, Fire Department and Public Officials may be contacted in one email with all officials copied

_____ Resident informed of approval by: _____ Method: _____

_____ Barricades returned by: _____ Date: _____

Return a copy of this document to the sponsor as a receipt of closure once all actions are completed