



TOWN OF ISLIP
655 Main St., Islip, NY 11751

OLGA H. MURRAY
Town Clerk & Registrar

Application for Block Party

**** \$75 FEE ****

FEEES MUST BE SUBMITTED WITH APPLICATION 45 DAYS IN ADVANCE OF THE PARTY.

****APPLICATION MUST BE NOTORIZED**

***APPLICANT MUST LIVE ON BLOCK WHERE PARTY IS TO TAKE PLACE**

Applicant Name*: _____

Address*: _____

Telephone #: _____ E-mail: _____

Date of Block Party: _____ Rain Date: _____ Time: _____
(No later than 11 p.m.)

Name of Street to be Closed: _____
(Specify Road, Avenue, Lane, Court, Etc.)

Cross Streets: _____ No. of Houses on Street: _____
(Specify Road, Avenue, Lane, Court, Etc.)

Specify whether barricades will be needed: YES NO if so how many? _____

****YOU MUST LEAVE ACCESS FOR EMERGENCY VEHICLES**

Certification that not more than one (1) block shall be closed and that there are no other block party applications pending within three (3) blocks there from.

Persons to be responsible for litter removal:

Name: _____ Telephone No.: _____

Name: _____ Telephone No.: _____

I (WE) AGREE THAT INFORMATION AS STATED ABOVE IS TRUE AND ACCURATE AND FURTHER THAT I (WE) HAVE READ A COPY OF AND WILL COMPLY WITH THE TOWN OF ISLIP NOISE AND BLOCK PARTY ORDINANCES AS SUMMERIZED BELOW:

- Barricades are only to be used for street closings.
- No fees shall be charged for any item, including but not limited to admission, food or beverage.
- No double parking on any surrounding streets.
- Ingress and egress shall be at all times available to emergency vehicles.
- Any street obstructions are prohibited.
- All forms of fireworks and/or alcoholic beverages are prohibited.

PLEASE NOTE THAT VIOLATION OF ANY OF THE FOREGOING CONDITIONS MAY RESULT IN IMMEDIATE REVOCATION OF THIS PERMIT.

SIGNATURE OF APPLICANT

SIGNATURE OF APPLICANT

SWORN BEFORE ME THIS

** _____ DAY OF _____ 20_____

** _____
NOTARY PUBLIC

**** FOR OFFICE USE ONLY****

Application Fee: _____ Clean-up Bond Fee: _____ Receipt #: _____

Application ID No.: _____ Checks/Cash/Money Order: _____ Check #: _____

Below please provide names, addresses and signatures of two-thirds (2/3) of homeowners on the block giving their approval for the block party (only one signature per household will be accepted). Please use the back of this page for additional space.

	NAME	SIGNATURE	ADDRESS
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