

Supervisor: Damian M. Ulatowski

BLOCK PARTY PERMIT APPLICATION

Block parties are only permitted on a Saturday or Sunday. No weekdays. No holidays.

A \$100.00 Deposit is required and will be refunded upon return of the Town's Barricades.

Checks Only. No Cash.

The following is required for **ALL** Block Party Permit Applications:

- 1. Applicant must be a resident of the street.
- 2. All original paperwork must be completed and received at the Highway Department Offices thirty (30) days prior to the party date. Applications may be mailed; no copies or faxes will be accepted.
- 3. The attached *Hold Harmless Clause* must be signed by **every** house on the street to be closed, including corner houses. Every home having property within the party area must sign. If a home is vacant, please note the number on the form and mark "vacant."
- 4. All gatherings, activities, and equipment (i.e. tables, chairs, tents) must be kept to one side of the road
- 5. Emergency vehicles <u>must</u> be allowed ingress and egress at all times via the open lane.
- 6. Highway Department barricades may be used and can be picked up a day or two before the event. Barricades must be manned at all times by residents of the street blocked. You **may not under any circumstances**, use any sort of vehicle to block the road.
- 7. Barricades must be returned to the Highway Department within one week after the event.
- 8. Entertainment such as bands, music, and any auxiliary amplifying equipment should be restricted so that sound does not disturb residences beyond the perimeters of the block party. Town Code Noise Ordinance 152-4 will apply.
- 9. Clean up of the street after the party is the responsibility of the residents. Do not dump any liquid in storm water drains.
- 10. You must notify your mail carrier to make arrangements for mail delivery to your street(s).
- 11. You must notify the Onondaga County Sheriff's Office and the local Fire Department of your event.

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Failure to com	ply with these rules may result in future permits of this kind being denied.						
Person applyir	ng for permit on behalf of the block party (PLEASE PRINT)						
Name:Telephone #:							
Street Address	::						
City:	Zip Code:						
Date of Party:	Rain Date:						
Times: *From *No e	*To: *To: arlier than 9:00 a.m. and no later than 11:00 p.m.						
Name of stree	t to be closed: (Specify Road, Lane, Avenue, Court, etc.)						
 All forms of fireworks are prohibited. Any street obstructions are prohibited. No double parking on any surrounding streets. Barricades are only to be used for street closings. Ingress and egress shall be at all times available to emergency vehicles. No fees shall be charged for any item, including but not limited to admission, food or beverage. It is the sole discretion of the Highway Superintendent to allow or disallow blocking of any street based on the information provided. 							
	ting this application, have all the residents of the neighborhood who are being asked to consider y, agree or disagree by signing the attached document? Yes No						
Signature of a	oplicant: Date:						
Highway Supe 6/2023	rintendent approval: Date:						

BLOCK PARTY APPLICATION AND HOLD HARMLESS AGREEMENT

The applicant(s) shall be liable for all losses, damages or injuries sustained by any person, whether a participant or guest at the block party or recreational event, whether or not said losses, damages or injuries arise by reason of the negligence of the person, persons or organization to whom such permit shall have been issued. The applicant(s) jointly and severally agree to save and hold the Town of Clay harmless of and from any and all obligations and liabilities which may arise from the temporary street closing described above and further agree to hold harmless the Town of Clay and to defend at his/her/their own cost and expense any claims or lawsuits instituted by third parties, which obligations or liabilities might otherwise exist or be asserted against the Town in connection with the block party, excluding liability for negligence by the Town.

Party Date:	Rain Date:	

NAME	ADDRESS	SIGNATURE	DATE	PHONE #	Yes	No

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