CICERO BLOCK PARTY APPLICATION/PETITION

PREFERRED DATE FOR THE BLOCK PARTY: _____
BACK UP DATES FOR THE BLOCK PARTY: _____
ORGANIZER'S NAME: _____ **AGE:** _____ **(must be at least 21 years old)**
TELEPHONE NUMBER: _____ **ADDRESS:** _____
ENTERTAINMENT: (circle one) Band DJ RADIO

This application must be fully completed and submitted at least thirty days before the date of the block party to be considered. A non-refundable security and processing fee of $250.00 (cash, certified check or money order) must be submitted to the Town of Cicero with this Application. Block parties shall only be permitted on Saturdays and Sundays between Memorial Day and Labor Day, inclusive. One block party will be permitted per block in any given year and a maximum of two block parties will be permitted on any single day. No block parties will be permitted on any state or national holiday.

WE, THE RESIDENTS OF THE _____ BLOCK OF _____ REQUEST THE TOWN OF CICERO TO ISSUE A PERMIT TO HOLD A BLOCK PARTY ON _____ FROM 12:00 P.M. (NOON) TO 7:00 P.M.

(75% of the households in the designated location must sign the petition stating that they would like to hold the block party on the above date; use additional forms if necessary.)

ADDRESS (list every address on the block in numerical order)	**TELEPHONE NUMBER OF THE HOUSEHOLD**	**SIGNATURE OF ONE RESIDENT OF THE HOUSEHOLD**	**DO YOU WANT A BLOCK PARTY ON THE ABOVE DATE? (Mark yes, no, not home or vacant house)**

I, the abovementioned organizer, agree to remain at the block party for the duration of the block party and will comply with all applicable federal, state and local laws, statutes, ordinances, rules, regulations and orders. I understand that I must clean up and restore all public property to the condition that it was in prior to the block party, and return all Town-owned barricades and/or signs to the Town when due. I acknowledge and understand that if I fail to comply with the foregoing or if any attendee of the block party receives a ticket in connection with acts or omissions undertaken at the block party, then I will be ineligible to apply for a block party permit during the next calendar year.

Organizer's Signature: _____ Date: _____

WE, THE RESIDENTS OF THE ___________ BLOCK OF _______ REQUEST THE TOWN OF CICERO TO ISSUE A PERMIT TO HOLD A BLOCK PARTY ON _________ FROM 12:00 PM (NOON) TO 7:00 PM.

ADDRESS (LIST EVERY ADDRESS ON THE BLOCK IN NUMBERICAL ORDER)	TELEPHONE NUMBER OF THE HOUSEHOLD	SIGNATURE OF ONE RESIDENT OF THE HOUSEHOLD	DO YOU WANT A PARTY ON THE ABOVE DAY? (MARK YES, NO, NOT HOME OR VACANT HOUSE)

CICERO BLOCK PARTY CHECKLIST

(To be Completed by the Community Service Officer Assigned to the Block Party)

DATE AND TIME OF BLOCK PARTY: _____

LOCATION OF THE BLOCK PARTY: _____

ORGANIZER'S NAME: _____ TELEPHONE NUMBER: _____

ADDRESS: _____

COMMUNITY SERVICE OFFICER ASSIGNED: _____

Requirement	Completed	
	Yes/No	Time
Were temporary barricades removed from the roadway?		
Were temporary "No Parking" signs and street closure signs taken down/removed?		
Was trash picked up and thrown in proper receptacles?		
Was food disposed of or brought inside someone's residence?		
Were all alcoholic beverages properly disposed of or brought inside someone's residence?		
Were flyers and decorations removed?		
Were all tents, tables, chairs, grills, coolers and similar items removed from public property?		
Were all games, activities and music equipment removed from public property?		
Was the property generally cleaned up?		
Was the property restored to its previous condition?		

Additional Information	YES	NO
Did the block party end by 7:00 p.m.? If not, describe the reasons why _____		
Did the organizer and participants comply with your requests? If not, describe the circumstances _____		

List any issues (including, without limitation, criminal activity, fights, noise complaints, use of fireworks or property damage) that occurred at the block party: _____

_____

_____

_____

_____

_____

Signature of CSO: _____ Date: _____

Signature of Water Department: _____ Date: _____