CITY OF GALESBURG

Administration

Operating Under Council - Manager Government Since 1957

Block Party Application

First Last

Name of Contact Person: _____

Mailing Address: _____ Phone: _____

Date of Block Party: _____ Start Time: _____ End Time: _____

Area requested to be closed off: (specifically - which street/alley from which street/alley and/or between which street/alley to which street/alley):

_____

_____

Barricades requested: ◯ yes ◯ no If yes, drop off address: _____

Tables requested: ◯ yes ◯ no If yes, # needed: _____

Delivery Date: _____ Date City to pick up barricades: _____

Date People's pick up tables: _____

Other City services requested: _____

Applicant does hereby promise and agree to indemnify and save harmless the City of Galesburg from any and all claims, demands, causes of action or judgments made by any person and arising in any manner from the granting of Block Party Agreement. **The applicant will be responsible for the replacement of damaged or stolen barricades, trash barrels, tables and chairs. The applicant is also responsible for coordinating the pickup of equipment after the event. Barricade and trash barrels (trash barrels must be empty to be picked up) - 309/345-3621. Tables and chairs - 309/342-6151.**

IN WITNESS WHEREOF, said parties have executed this agreement on behalf of themselves, their heirs, personal representatives, successors and assigns as of the day and year first hereinbefore written.

Name (print): _____

Signature: _____

Questions? Please contact:
Administration
309/345-3628

Completed applications shall be submitted to:
Administration Office
55 West Tompkins Street
Galesburg, IL 61401

For Office Use Only:

☐ Approved PD FD PW CM

☐ Denied

☐ Faxed ☐ Emailed

NOTE: The Police and or Fire Departments reserve the authority to terminate the event if complaints are received, City ordinances are violated, or if public safety or peace is compromised.

The Applicant affirms to the City the persons whose signatures are included is evidence of their approval of the block party and are all of the persons residing in the area described:

Name	Address *Please print*