



Block Party Application

Type of Application

- New Reoccurring

Block Party Information

- Street to be closed must be residential with minimal traffic and may not be a major traffic artery.
- Adequate barricades are required (Applicant must supply their own); after dusk flashers are required. Barricades must be removed by 10:00 pm.
- Residents have the right to drive to and from their homes, providing any vehicular movement does not interfere with the block party.
- All residences on the street must be freely accessible to emergency traffic
- Consumption of alcoholic beverages on City streets or sidewalks is not permitted.
- Fireworks are not permitted.
- Amplified sound will not be allowed for block parties. Applicants may use a radio, tape, CD or other similar devices for music, but it must not disturb the peace, quiet and comfort of the neighborhood.
- The block party permit may be revoked for cause by the City of Campbell at any time before or during the event.
- The City of Campbell may impose Disturbance Response Fees for police response to a disturbance as a result of a violation of these conditions.

Applicant Identifying Information

Last Name:	First Name:	MI:
Address (No P.O. Box):		

Applicant Contact Information

Home Phone #:	Work Phone #:
Cell Phone #:	Email Address:

Event Information

Event Description:	
Event Date:	
Start Time:	End Time (Must be by 10:00 pm):
Number of people expected to attend:	
Event Location:	
Describe how area will be barricaded:	

Attachment Checklist

- Signatures of the majority of residents directly affected by the closure. Residents must grant permission for temporary street closure. Signatures are required before a permit may be issued.
- Electronically generated map of areas or intersections that will be blocked.
- Proof of insurance as set forth in Chapter 11.30 of the Campbell Municipal Code. Include the following wording on your policy: **"The City of Campbell City, its agents, officers, servants and employees including members of the Campbell City Council, individually and collectively."** Limits are:
 - o Each occurrence: \$1M
 - o General Aggregate: \$2M
 - o Personal & Advertising Injury: \$1M
 - o Products/Completed Operations Aggregate: \$2M
 - o Damage to Premises Rented to You: \$100K
 - o Medical Payments: \$5K
 - o Policy Length: 1 day

Signature & Verification

- I affirm that the information provided in this application, including in all attachments, is true, correct, complete and accurate.
- I have read, understand and agree to comply with the above conditions.
- I understand that failure to abide by these conditions or any other violation of the law can result in immediate revocation of my permit by the Police Department.
- I further understand that the City of Campbell may charge me with a Disturbance Response Fee for police services, if the Police Department responds to any disturbance which is directly or indirectly caused by a violation of the permit conditions.

Print Name: _____

Signature: _____

Date: _____

FOR CAMPBELL PD INTERNAL USE ONLY

Application Received	COP Approval	Public Works Notified	Patrol Notified	Fire Notified	Permit Issued
_____	_____	_____	_____	_____	_____
Date	Date	Date	Date	Date	Date
_____	_____	_____	_____	_____	_____
Name	Name	Name	Name	Name	Name

