

### **Block Party/Special Event Application**

#### CITY OF ALEXANDRIA

8236 West Main Street Alexandria, Kentucky 41001

Phone: (859) 635-4125 Fax: (859) 635-4127 Email: forms@alexandriaky.org www.alexandriaky.org

#### PROCEDURE FOR HAVING A BLOCK PARTY

- Confirm your tentative date and time.
- Collect names and signatures of all residents affected by the event blockage. A listing of a name on this form confirms permission for the event.
- All names signed on this form <u>agree to indemnify and hold the city harmless</u> in any liability issue related to the activity described on these forms, including bodily harm and any damage to public infrastructure, such as but not limited to, streets, curbs, and utilities.
- An alternate "rain date" may also be selected.
- <u>No</u> event will be approved to be held, or run later, than 11 p.m. as pursuant to the city's noise ordinance 24-95.
- Pay \$10 application fee.

**NOTE:** A special event permit is not a permit to violate City codes, ordinances, rules or regulations, IE: noise or nuisance. If a violation occurs, it may result in citation(s) issued to the event applicant/responsible person.

**Processing Procedure:** Please submit the completed Special Event and Block Party/Street Closure application (if it applies) to the City of Alexandria Clerk not less than <u>60 days</u> prior to the date of the event and no more than one year prior to the event date. This will allow sufficient time for processing the application. There will be a \$10 application fee for all events. This fee is to cover administrative costs.

The Special Event application, in addition to the list of signatures, should be submitted to the City Clerk either in person or to <a href="mailto:starter@alexandriaky.org">starter@alexandriaky.org</a>. Names will be checked, and the Police and Fire Departments will be notified of your event. All residents on your street should be made aware of the necessity to provide access for emergency vehicles should the need arise.



# Special Event Information CITY OF ALEXANDRIA

| Name of Event:   |   |  |  |                            |                              |                                  |                                 |  |
|--|---|--|--|----------------------------|------------------------------|----------------------------------|---------------------------------|--|
|  |   |  |  |                            |                              |                                  |                                 |  |
|  |   |  |  |                            |                              |                                  |                                 |  |
| and time(s):   |   |  |  |                            |                              |                                  |                                 |  |
| and time(s):time(s):   |   |  |  | Street                     | Closu                        | re Date                          | (s) and                         |  |
| ume(s):  |   |  |  |                            |                              |                                  |                                 |  |
| Type of temporary street b   | parricade (no parked vehicles):   |  |  |                            |                              |                                  |                                 |  |
| Will the event require Sou   | nd Amplification Equipment:   | Yes  | (or)                                   | No                         | If so,                       | please                           | describe:                       |  |
| ROUTE INFORMATION (for   | parades, races, etc.)   |  |  |                            |                              |                                  |                                 |  |
| Attach Route or Event Ma   | o: A map is required for all eve  | nts.   |  |                            |                              |                                  |                                 |  |
| Assembly Location:   |   | _ Asse   | embly T                                | ime: _                     |                              |                                  |                                 |  |
| Specific type of event, plea   | ase check all that apply:   |  |  |                            |                              |                                  |                                 |  |
| Festival   | Fundraiser  |  |  |                            |                              |                                  |                                 |  |
| Parade   | Political   |  |  |                            |                              |                                  |                                 |  |
| Fair/Carnival  | •   |  |  |                            |                              |                                  |                                 |  |
| Private Party  | Filming   |  |  |                            |                              |                                  |                                 |  |
| Sports Event   | Community   |  |  |                            |                              |                                  |                                 |  |
| Event Anticipated attenda  | nce: Prior year   | attenda  | ance, if                               | applic                     | able: _                      |                                  |                                 |  |
| including residences above arrangements have been r residents and/or businesse provide the city clerk with | and/or businesses: Required for businesses (i.e.: Washington nade with the City Clerk's Offices three (3) weeks prior to strea list of who you notified about | Street of the control | downto<br>will ne<br>dewalk<br>losure. | own ar<br>ed to s<br>block | ea) unl<br>send le<br>ages o | less oth<br>tters or<br>r closur | er<br>notify the<br>es. Please, |  |
| Applicant Signature:   |   |  | Date                                   | ·:                         |                              |                                  |                                 |  |



## **Block Party/Street Closure Application**

| Applicant Name:  | Phone #:            |                        | Application Date: | // |
|--|---------------------|------------------------|-------------------|----|
| Address:   |                     |                        |                   |    |
| Email Address:   |                     |                        |                   |    |
| We the undersigned residents he blocking of the street area in, betwee, betwee | n front of my house | e for the purpose of a | Block Party on    |    |
| Name (please print)  | House Number        | Phone number           | Signature         |    |
|  |                     |                        |                   |    |
|  |                     |                        |                   |    |
|  |                     |                        |                   |    |
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|  |                     |                        |                   |    |
|  |                     |                        |                   |    |

| Official Us | e Only   |                        |        |               |
|-------------|----------|------------------------|--------|---------------|
| Police:     | Approved | Approved w/ conditions | Denied |               |
|             | 11       | ••                     |        | Date/Initials |
| Fire:       | Approved | Approved w/ conditions | Denied |               |
|             | **       | **                     |        | Date/Initials |
| Admin:      | Approved | Approved w/ conditions | Denied |               |
|             |          | <del></del>            |        | Date/Initials |