



# Block Party Application

Bureau of Communications ■ Office of Special Events ■ 585-428-6690  
30 Church St., 203A ■ Rochester, NY 14614-1287

## STREET CLOSING PETITION FORM

I, as a resident of (insert street name) \_\_\_\_\_ am aware of the

Block Party scheduled on (insert date) \_\_\_\_\_ from \_\_\_\_\_ (AM PM) to \_\_\_\_\_ (AM PM).

I have NO objections to the closing of (insert street name) \_\_\_\_\_ for this purpose, and am aware of the activities planned.

The street will be closed from \_\_\_\_\_ to \_\_\_\_\_ (insert street intersections)

**PRINT NAME**

**SIGNATURE**

**YOUR ADDRESS**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_
11. \_\_\_\_\_
12. \_\_\_\_\_
13. \_\_\_\_\_
14. \_\_\_\_\_
15. \_\_\_\_\_
16. \_\_\_\_\_
17. \_\_\_\_\_
18. \_\_\_\_\_
19. \_\_\_\_\_
20. \_\_\_\_\_

***Signatures of at least 60% of the residents/landowners are required. All Residents on the street must be notified of the street closing***