Village of Mokena
Block Party Application

Please fill out this form completely. Any missing information may delay the approval of your application. **All applications must be submitted at least 3 weeks in advance for review.** For more information, or if you have any questions, please contact the Mokena Police Department at (708) 479-3912.

Date of Application: _____/_____/_____

Party Organizer(s) Contact Information

1. Name:_____ Phone Number (__ __ __) __ __ __ - __ __ __ __

Address: _____

2. Name:_____ Phone Number (__ __ __) __ __ __ - __ __ __ __

Address: _____

3. Name:_____ Phone Number (__ __ __) __ __ __ - __ __ __ __

Address: _____

Block Party Date: _____/_____/_____ Block Party Time: __:__ __ am/pm - __:__ __ am/pm

Block Party Location:_____

Street to be closed: _____

From: _____ To: _____

Describe Event (i.e. nature of event, safeguards, supervision, etc.)

_____

_____

_____

Are you requesting Police Department attendance? *(dependent on availability)* □ Yes □ No

Are you requesting Fire Department attendance? *(dependent on availability)* □ Yes □ No

Guidelines for Block Parties

1. Any amplified music, etc. must be concluded by 8:00 p.m.
2. No amplified music, etc. is allowed on Sundays
3. "Cover charges" or "admission fees" charged to cover the costs of alcoholic beverages are prohibited.

To Complete Your Application

1. Save a copy of completed form for your records.
2. Submit completed form to Village of Mokena for processing using one of the options below:
   - E-mail to administration@mokena.org
   - Mail or hand deliver to Mokena Village Hall, 11004 Carpenter Street or Mokena Police Department, 10300 W. 191st Street.
3. A Village representative will contact you once approved to confirm and coordinate event details.

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I (we), the undersigned have a full understanding it is my (our) responsibility to monitor and supervise the requested event. I (we) agree to abide by the above guidelines for Block Parties and will do everything in my (our) power to ensure the event is considerate of both participants and neighbors in the surrounding area.

Applicant's Signature: _____

Applicant's Signature: _____

Applicant's Signature: _____

Department Review / For Office Use Only

Police Chief _____ Date _____/_____/_____

Fire Chief _____ Date _____/_____/_____

ESDA _____ Date _____/_____/_____

Public Works Director _____ Date _____/_____/_____

Village Administrator _____ Date _____/_____/_____