

REQUIREMENTS AND CONDITIONS

THE PERMIT, IF ISSUED UNDER THIS APPLICATION, AUTHORIZES APPLICANT TO HOLD A BLOCK PARTY AT THE LOCATION SPECIFIED AND ON THE DATE AND TIME INDICATED. IF BARRICADES HAVE BEEN REQUESTED, THE ISSUED PERMIT FURTHER AUTHORIZES APPLICANT TO BARRICADE SPECIFIC PORTIONS OF STREET(S) NAMED IN THIS APPLICATION FOR THE PURPOSE OF DENYING ACCESS TO THROUGH-TRAFFIC DURING THE TIME OF THE EVENT. APPLICANT MAY ONLY USE TOWN APPROVED/SUPPLIED BARRICADES.

DEADLINE:

THIS APPLICATION MUST BE RECEIVED FOR REVIEW AT LEAST FIVE (5) FULL BUSINESS DAYS (EXCLUSIVE OF HOLIDAYS AND WEEKENDS) PRIOR TO THE EVENT. APPLICATIONS RECEIVED IN LESS THAN THE TIME SPECIFIED MAY AUTOMATICALLY BE DENIED, WITHOUT ADDITIONAL REASON.

FEES AND DEPOSITS:

THERE IS NO FEE FOR A BLOCK PARTY; HOWEVER, THERE IS A \$50.00 SECURITY DEPOSIT FOR THE BARRICADES. THE SOLE EXCEPTION FOR A SECURITY DEPOSIT IS WHEN BARRICADES ARE RESERVED FOR A BLOCK PARTY THAT IS HELD ON THE DATE, AND DURING THE TIMES SPECIFIED, BY THE LITTLE ELM POLICE DEPARTMENT FOR THE ANNUAL NATIONAL NIGHT OUT (NNO) CELEBRATION. FOR NNO, THE SECURITY DEPOSIT IS NORMALLY WAIVED, AT THE SOLE DISCRETION OF THE CHIEF OF POLICE. NNO APPLICANTS SHOULD SUBMIT THE APPLICATION WITHOUT THE DEPOSIT. THEY WILL BE NOTIFIED IF ONE IS REQUIRED AT WHICH TIME, THEY MAY PAY THE DEPOSIT OR WITHDRAW THIS APPLICATION

ONLY CHECKS OR MONEY ORDERS ARE ACCEPTED (NO CASH). CHECKS MUST BE MADE PAYABLE TO "TOWN OF LITTLE ELM" AND A NOTATION PLACED ON THE CHECK OR MONEY ORDER INDICATING IT IS FOR A "BLOCK PARTY – (ADDRESS)"

LOCATION TO DELIVER APPLICATION:

UPON COMPLETION, THE FORM AND ANY REQUIRED DEPOSIT MAY BE MAILED OR HAND DELIVERED TO:

LITTLE ELM POLICE DEPARTMENT, 100 W. ELDORADO PARKWAY, LITTLE ELM, TEXAS 75068

APPLICATIONS THAT DO NOT REQUIRE A DEPOSIT, EITHER BECAUSE NO BARRICADES ARE REQUESTED, OR BECAUSE THE APPLICATION IS FOR NNO, MAY IN ADDITION TO THE OPTIONS ABOVE, EMAIL OR FAX THE COMPLETED APPLICATION TO:

EMAIL: POLICE@LITTLEELM.ORG

FAX: (972) 377-5548

REQUIREMENTS AND CONDITIONS:

- 1.) APPLICANT AND/OR THEIR DESIGNATED REPRESENTATIVE MUST HAVE A VALID PERMIT ON-SITE AND PRESENT IT TO ANY TOWN OFFICIAL OR POLICE OFFICER UPON REQUEST. NOTE: IF AN EMAIL ADDRESS IS FURNISHED BY THE APPLICANT ON THIS FORM, A COPY OF THE APPROVED/DENIED PERMIT WILL BE RETURNED IN THAT MANNER. IF NO EMAIL ADDRESS IS FURNISHED, APPLICANT MUST COME TO THE LITTLE ELM POLICE DEPARTMENT TO PICK UP A COPY OF THE APPROVED/DENIED PERMIT. APPLICANT SHOULD CALL (214) 975-0460 PRIOR TO COMING TO BE CERTAIN THE APPLICATION IS READY TO BE PICKED UP.
- 2.) APPLICANT IS RESPONSIBLE FOR ROADWAY PLACEMENT OF THE DELIVERED BARRICADES AT THE LOCATIONS STATED IN THIS APPLICATION, AT THE TIMES SPECIFIED AND IS FURTHER RESPONSIBLE FOR REMOVAL FROM THE ROADWAY AT THE CONCLUSION OF THE EVENT.
- 3.) ACCESS MUST BE GRANTED TO AUTHORIZED EMERGENCY VEHICLES WITHIN THE BLOCKED OFF AREA, IF NEEDED.
- 4.) ACCESS MUST BE GRANTED TO RESIDENTS WHO RESIDE WITHIN THE BLOCKED OFF AREA, IF NEEDED.
- 5.) AT LEAST SIXTY PERCENT (60%) OF THE RESIDENTS WHO LIVE IN THE BLOCKED OFF AREA MUST SIGN THE APPLICATION AND INDICATE THEY ARE IN FAVOR OF THIS PROPOSED NEIGHBORHOOD BLOCK PARTY.
- 6.) ALL PARTICIPANTS MUST COMPLY WITH ALL APPLICABLE TOWN ORDINANCES AND STATE LAWS INCLUDING, BUT NOT LIMITED TO, THOSE GOVERNING NOISE, SIGNS, ALCOHOL AND FIREWORKS.
- 7.) APPLICANTS ARE RESPONSIBLE FOR CLEAN-UP OF ALL STREETS AND SIDEWALKS. FAILURE TO PROPERLY CLEAN-UP MAY JEOPARDIZE FUTURE PERMIT PRIVILEGES.
- 8.) **BLOCK PARTIES MAY BE CONDUCTED ONLY BETWEEN THE HOURS OF 8:00 AM AND 10:00 PM.**
- 9.) **NO MAJOR ROADWAYS, THOROUGHFARES OR HIGHWAYS MAY BE BLOCKED OFF AT ANY TIME.**

SIGNS AND BARRICADES

IF BARRICADES HAVE BEEN REQUESTED A COPY OF THIS APPLICATION, (ONCE RECEIPT OF THE REQUIRED DEPOSIT IF ANY HAS BEEN VERIFIED AND APPLICATION IS APPROVED), WILL BE FORWARDED TO THE STREET DEPARTMENT FOR RESERVATION, DELIVERY AND PICKUP OF THE BARRICADES. BARRICADES WILL BE DELIVERED AS NEARLY AS POSSIBLE TO THE LOCATION REQUESTED IN THIS APPLICATION AND ON THE DATE REQUESTED, WHEREVER POSSIBLE. BARRICADES WILL BE PICKED UP AT THE SAME LOCATION WHERE THEY WERE DELIVERED AS SOON AFTER THE CONCLUSION OF THE EVENT AS IS PRACTICAL.

SHOULD APPLICANT HAVE ANY QUESTIONS OR ISSUES OF ANY NATURE REGARDING THE BARRICADES THEY SHOULD CONTACT THE STREET DEPARTMENT DIRECTLY AT (972) 377-5556. APPLICANT MUST HAVE THEIR APPROVED PERMIT NUMBER AVAILABLE.

ALL SIGNS MUST COMPLY WITH THE TOWN ORDINANCE CONCERNING SAME.

CERTIFICATION BY APPLICANT:

"BY MY SIGNATURE ON THIS APPLICATION, I CERTIFY THAT:

- 1.) I AM A RESIDENT OF THE NEIGHBORHOOD IN WHICH THIS BLOCK PARTY WILL BE CONDUCTED, AND;
- 2.) AT LEAST SIXTY PERCENT (60%) OF THE RESIDENTS WHO LIVE IN THE BLOCKED-OFF AREA ARE IN FAVOR OF THIS BLOCK PARTY, AND;
- 3.) THAT THE INFORMATION SUBMITTED IN CONNECTION WITH THIS APPLICATION IS TRUE AND ACCURATE, AND;
- 4.) THAT I HAVE READ AND AGREE TO ADHERE TO ALL THE REQUIREMENTS AND CONDITIONS CONTAINED HEREIN, AND;
- 5.) I UNDERSTAND THAT FAILURE TO DO SO WILL RENDER ANY THIS BLOCK PARTY PERMIT, IF ISSUED, VOID IMMEDIATELY."



NEIGHBORHOOD BLOCK PARTY

APPLICATION FOR PERMIT

TOWN OF LITTLE ELM



PRESS THE F1 KEY FOR HELP WITH ANY FIELD – USE THE "TAB" KEY TO MOVE FROM FIELD TO FIELD, NOT THE ENTER KEY.

PURPOSE OF EVENT:			
PROPOSED EVENT START DATE:	DAY:	PROPOSED EVENT ENDING DATE:	DAY:
EVENT START TIME:	☐ A.M. / ☐ P.M.	EVENT END TIME:	☐ A.M. / ☐ P.M.
MAXIMUM POSSIBLE DURATION OF EVENT			
APPLICANT'S NAME:		BEST CONTACT PHONE #:	
ADDRESS:	(CITY)	(STATE) TX	(ZIP CODE)
EMAIL:	ALTERNATIVE PHONE #:		
ENTER THE LOCATION OF THE BLOCK PARTY BELOW. LIST ALL STREETS INVOLVED, INDICATING PRIMARY LOCATION FIRST.			
FROM BLOCK #	STREET NAME:	TO BLOCK #	STREET NAME:
FROM BLOCK #	STREET NAME:	TO BLOCK #	STREET NAME:
WILL ANY PORTION OF ANY PUBLIC STREET BE CLOSED OR BARRICADED AT ANY TIME DURING THE EVENT? ☐ Yes ☐ No			
IF "YES" IS CHECKED, IN THE BLANKS THAT FOLLOW, ENTER THE STREET AND BLOCK NUMBERS OF ALL AFFECTED STREETS, IN THE ORDER AFFECTED. IF SAME AS ABOVE WRITE "SAME". (A \$50.00 REFUNDABLE DEPOSIT MAY BE REQUIRED) IF "NO" SKIP NEXT FIVE LINES.			
FROM BLOCK #	STREET NAME:	TO BLOCK #	STREET NAME:
IF MORE THAN ONE STREET WILL BE BLOCKED OR BARRICADED ENTER THAT BELOW.			
FROM BLOCK #	STREET NAME:	TO BLOCK #	STREET NAME:
REQUESTED BARRICADE DELIVERY DATE:		PICK-UP BARRICADE DATE:	
SPECIFY LOCATION FOR BARRICADE DELIVERY: BLOCK #		STREET NAME:	
ARE POLICE OFFICERS REQUESTED TO ATTEND? ☐ Yes ☐ No		ARE FIRE /EMS PERSONNEL REQUESTED TO ATTEND? ☐ Yes ☐ No	
SIGNATURE		DATE:	

THIS SECTION FOR TOWN OF LITTLE ELM USE

DATE RECEIVED: _____ 20____ / TIME RECEIVED: _____ AM / PM / RECEIVED BY: _____ (NAME/BADGE #)

CHIEF OF POLICE: INITIALS: _____

☐ APPROVED AS SUBMITTED ☐ APPROVED WITH CHANGES REQUIRED ☐ DENIED

IF CHANGES ARE NEEDED, DESCRIBE HERE: _____

IF DENIED, BRIEFLY EXPLAIN REASON: _____

ROUTE APPROVED FORM TO: ☐ TOWN MANAGER ☐ FIRE DEPARTMENT ☐ PUBLIC WORKS ☐ PATROL/TRAFFIC SUPERVISORS

☐ COMMUNITY SERVICES COORDINATOR ☐ OTHER – SPECIFY: _____

THIS SECTION FOR STREET DEPARTMENT USE

DATE BARRICADES DELIVERED: _____ 20____ CONDITION WHEN DELIVERED: ☐ NEW ☐ FAIR ☐ POOR ☐ NOT REQUESTED

DATE BARRICADES PICKED UP: _____ 20____ CONDITION WHEN PICKED UP: ☐ NEW ☐ FAIR ☐ POOR ☐ N/A

CONDITION OF STREETS AND SIDEWALKS AFTER COMPLETION: _____ ☐ UNCHANGED

RETURN DEPOSIT: ☐ YES ☐ NO APPROVED BY: _____

ADDITIONAL COMMENTS BY ANY TOWN EMPLOYEE: _____

NAME: _____

PERMIT NUMBER: _____ ISSUED DATE: _____ 20____ By: _____

NOTE: APPLICANT'S SIGNATURE ATTESTS TO THE ACCURACY OF ALL THE INFORMATION CONTAINED IN THIS REQUEST AND CERTIFIES AND ATTESTS THAT THEY HAVE READ THE RULES AND STIPULATIONS CONTAINED ON THE FOLLOWING PAGE(S) AND WILL FULLY COMPLY WITH THEM.

AFFECTED RESIDENT SIGNATURE FORM

REQUEST FOR PERMISSION TO SCHEDULE USE OF A PUBLIC ROADWAY

TOWN OF LITTLE ELM

NOTE: AT LEAST SIXTY PERCENT (60%) OF THE RESIDENTS WHO LIVE IN THE BLOCKED OFF AREA, OR THAT LINE THE STREET OF THE PARADE ROUTE, MUST SIGN THIS APPLICATION AND MUST INDICATE THEY ARE IN FAVOR OF THE PROPOSED EVENT OR PARADE.

APPLICANT USE:	STREET NAME:	INDICATE THE STREET AND RANGE OF BLOCK NUMBERS HERE: BEGIN END	
	NUMBER OF OCCUPIED RESIDENCES ON STREET:	NUMBER OF AFFIRMATIVE SIGNATURES REQUIRED (60% OF OCCUPIED RESIDENCES):	

	PRINT NAME	STREET ADDRESS	TELEPHONE	SIGNATURE	DATE SIGNED	IN FAVOR	CONTACT ATTEMPTED DATE/TIME
1						☐ YES ☐ NO	
2						☐ YES ☐ NO	
3						☐ YES ☐ NO	
4						☐ YES ☐ NO	
5						☐ YES ☐ NO	
6						☐ YES ☐ NO	
7						☐ YES ☐ NO	
8						☐ YES ☐ NO	
9						☐ YES ☐ NO	
10						☐ YES ☐ NO	
11						☐ YES ☐ NO	
12						☐ YES ☐ NO	
13						☐ YES ☐ NO	
14						☐ YES ☐ NO	
15						☐ YES ☐ NO	
16						☐ YES ☐ NO	
17						☐ YES ☐ NO	
18						☐ YES ☐ NO	
19						☐ YES ☐ NO	
20						☐ YES ☐ NO	