



CITY OF HAZEL PARK BLOCK PARTY PERMIT

Contact Name:	Driver's License #:
Address:	Email:
Phone #:	Date of Party:
Start Time:	End Time (no later than 10:00 p.m.)
Location of Party:	
Reason for Party:	
Forms of Entertainment:	

- **IN ORDER FOR PERMIT TO BE ISSUED, ALL RESIDENTS OF BLOCK MUST EXPRESS WRITTEN CONSENT (see back of form).**
- **THE DEPT. OF PUBLIC WORKS WILL BRING BARRICADES TO THE END OF THE BLOCK BUT WON'T SET THEM UP FOR YOU.**
- **MAKE SURE TO OBSERVE THE FOLLOWING RULES:**
 - Be considerate of your neighbors.
 - No loud music.
 - No alcohol consumption on City property, sidewalks and/or streets.
 - The City of Hazel Park may revoke or refuse this permit at any time.
 - If complaints arise, the Police Department may revoke this permit.

FOR OFFICE USE ONLY

City Manager's Office Approval: _____ Date: _____

- cc: - Police Dept.
 - Fire Dept.
 - DPW

