

**CITY OF KENOSHA – DEPARTMENT OF PUBLIC WORKS
STREET PARTY/STREET CLOSING PERMIT REQUEST**

*****STREET PARTIES ARE ALLOWED IN RESIDENTIAL ZONES ONLY.*****

NAME: _____

ADDRESS: _____

- HOME OWNER
 RENTER

DAYTIME PHONE NUMBER: _____

HOME PHONE NUMBER: _____

STREET OR AVENUE TO BE BLOCKED OFF: _____

DATE OF PARTY: _____ START TIME: _____ END TIME: _____

In accordance with City Ordinance 5.04 (B) : “Street parties shall start no earlier than 10:00 A.M.” and “Street parties shall terminate no later than 11:00 P.M.”

PREFERRED TIME OF BARRICADE DELIVERY: _____

I have read and will comply with the rules of the ordinance governing street party permits. I have obtained the signatures of the majority of property owners fronting the street to be closed.

Signature of Applicant

NOTE: YOU MUST ALSO ENCLOSE A CHECK IN THE AMOUNT OF \$45.00 MADE OUT TO THE “CITY OF KENOSHA” FOR A STREET PARTY/STREET CLOSING PERMIT.

This Section for Office Use Only

Director, Public Works	
Alderman	
Police	
Transit	
Museum	
Library	
Map Quarter Section No.	
Cash/Check and Receipt No.	
Date Received	

