



# TOWN OF NORTH HEMPSTEAD

## APPLICATION FOR THE PURPOSE OF CONDUCTING A BLOCK PARTY

Print this form and complete it in writing. Answer all questions. Application must be filed 20 days prior to the date of event.

ORGANIZATION NAME (If applicable): \_\_\_\_\_ Phone # \_\_\_\_\_

### ORGANIZATION OFFICERS

Name: _____	Title: _____
Address: _____	Telephone: _____
Name: _____	Title: _____
Address: _____	Telephone: _____
Name: _____	Title: _____
Address: _____	Telephone: _____
Person in Charge: _____	
Address: _____	Telephone: _____

Location of block party (street): \_\_\_\_\_ between \_\_\_\_\_ and \_\_\_\_\_ . Community \_\_\_\_\_

Day and Date: \_\_\_\_\_ Rain Day and Date: \_\_\_\_\_

Hours: From \_\_\_\_\_ To \_\_\_\_\_

**Please Note: Chapter 38 of the town Code prohibits unreasonably loud noises after 10 PM**

Name of your local Fire Department: \_\_\_\_\_

*If barriers are required, arrangements must be made with the Highway Department Sign Shop, 285 Denton Avenue, New Hyde Park, call Telephone #739-6731. Barriers must be picked up before 2 p.m. on the Thursday or Friday before the event and returned the next working day after the event between 8 a.m. & 3 p.m., in good condition or there will be a charge.*

**AT NO TIME CAN ANY VEHICLE BLOCK ACCESS TO THE STREET. SAFETY-SCENE TAPE, CONSTRUCTION CONES OR REMOVABLE BARRICADES MAY ONLY BE USED TO BLOCK END OF THE STREETS. (SAFETY-SCENE TAPE IS AVAILABLE AT STAPLES OR HOME DEPOT) THE ROADWAY MUST HAVE A LANE FREE OF OBSTRUCTION, TO ALLOW EMERGENCY VEHICLES ACCESS TO THE ENTIRE BLOCK. THE PERSON IN CHARGE LISTED ON THIS APPLICATION IS RESPONSIBLE FOR INSURING THAT THE ABOVE CONDITIONS ARE MET.**

Will you be erecting any type of tent? \_\_\_\_\_

**If yes, you must contact the Nassau County Fire Marshall's Office and the Town of North Hempstead Building Department. (Enclose proof of approval)**

Town Code Section 44-4 Consumption of alcohol in a public place permission requested? (Yes / No)

**If "Yes," please contact the New York State Liquor Authority, 80 South Swan Street Albany, NY 12210 (518) 474-3114 to determine if you need a 24-hour SPECIAL EVENTS PERMIT. If so, please allow at least 15 days prior to the event for mailing of permit.**

*For Clerk use only*

Date Application Received: \_\_\_\_\_ Application- \_\_\_\_\_ Approved / Disapproved  
Clerk: \_\_\_\_\_

TOWN CLERK \_\_\_\_\_ DATE \_\_\_\_\_

Police Dept./Precinct \_\_\_\_\_  
PO Box 3000, 200 Plandome Road  
Manhasset, NY 11030  
516-869-7646

**A FALSE STATEMENT WILL RESULT IN THE DENIAL OF THIS OR ANY FUTURE PERMIT APPLICATIONS**



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## Signatory consent of the majority of residents residing on street

Total # of homes on street: \_\_\_\_\_

Name/Street: \_\_\_\_\_

Name/Street: \_\_\_\_\_

Name/Street: \_\_\_\_\_

Name/Street: \_\_\_\_\_

Name/Street: \_\_\_\_\_

Name/Street: \_\_\_\_\_

Name/Street: \_\_\_\_\_

Name/Street: \_\_\_\_\_

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Name/Street: \_\_\_\_\_

Name/Street: \_\_\_\_\_

Name/Street: \_\_\_\_\_

Name/Street: \_\_\_\_\_

Name/Street: \_\_\_\_\_

*Attach additional signature pages if necessary.*

### **ADDITIONAL REQUIREMENT**

Notify end-of-block residents who live on corner streets since their side yards face block-party street where they often park.

**I HEREBY CERTIFY THAT THE ABOVE SIGNATURES ARE THOSE OF THE RESIDENTS ON THE STREET(S) TO BE CLOSED. ALL RESIDENTS MUST BE NOTIFIED OF BLOCK PARTY.**

Applicant's Signature \_\_\_\_\_ Date Submitted \_\_\_\_\_