

**BLOCK PARTY NOTIFICATION**  
**CITY CLERK OFFICE**

**BLOCK PARTY INFORMATION**

Ward #: \_\_\_\_\_ Alderman Name: \_\_\_\_\_ Block Party Date: \_\_\_\_\_  
 Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_ Expected Attendance: \_\_\_\_\_  
 Street Closure Location: From - \_\_\_\_\_ To - \_\_\_\_\_  
 Deliver Barricades to: \_\_\_\_\_ Time: \_\_\_\_\_  AM  PM

**REQUESTER INFORMATION**

Requester Name: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Requester Address: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**NEIGHBOR INFORMATION**

1. Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Address: \_\_\_\_\_  Waukegan  Wadsworth  
 Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_
  
2. Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Address: \_\_\_\_\_  Waukegan  Wadsworth  
 Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_
  
3. Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Address: \_\_\_\_\_  Waukegan  Wadsworth  
 Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**REMARKS**

\_\_\_\_\_  
 \_\_\_\_\_  
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\_\_\_\_\_ Alderman Name                      \_\_\_\_\_ Alderman Signature                      \_\_\_\_\_ Date

FOR OFFICE USE ONLY	
DATE OF COUNCIL APPROVAL:	
DATE SENT TO DEPARTMENT HEADS:	