

**Incorporated Village of East Rockaway  
Block Party Application Form**

**FEE: \$25.00 PAYABLE TO INC. VILLAGE OF EAST ROCKAWAY**

**Date Submitted:** \_\_\_\_\_/\_\_\_\_\_/ 20  
**Total # of houses affected by the closing of Street (s) due to the Block Party:** ( \_\_\_\_\_ )  
**Total # of houses participating of the Block Party** ( \_\_\_\_\_ )  
**Total petitioners' signatures collected and attached** ( \_\_\_\_\_ )

**Rules to Obey for a Block Party**

1. **Your request must be presented at least one (1) month before the date of the Block Party**
2. **The majority of the block must agree to have the party. ALL neighbors must be notified. Please notify the village if any neighbors have a health issue so we can assure that there is clear access to their house.**
3. **If part of the street is in Lynbrook or Town of Hempstead, please attach that permit to this request.**
4. **Do not block off streets with any vehicles. Use barricades, cones, tape etc ..... All Emergency Vehicles must have access to street during Block Party. Failure to comply is subject to a fine.**
5. **MUSIC must end at 10 pm, NO LATER.**
6. Please be sure to clean up after your Block Party.
7. Please request barricades at the Department of Public Works at 85 Williamson Street: Monday to Friday 9 am to 3 pm. Barricades must be returned the Monday after the party during the same business hours.

We, the undersigned residents of \_\_\_\_\_ request  
Street Name

permission for a BLOCK PARTY on \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ with a  
Month/Day/Year

raindate of \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ from 12:00 pm to 11:00 pm. The  
Month/Day/Year

following streets will need to be blocked off \_\_\_\_\_  
Street Name

and \_\_\_\_\_ . Please call \_\_\_\_\_  
Street Name Name of Street Representative

who resides at \_\_\_\_\_ Phone Number:: \_\_\_\_\_ alternate

contact info: cell phone: \_\_\_\_\_ email: \_\_\_\_\_

for any information or questions regarding this Block Party.

Please collect signatures on the reverse side.

**Any questions, please call 887-6300.**

Please return this application to the Village Clerk's Office at Village Hall,

**APPLICATION MUST INCLUDE PAYMENT OF \$25.00.**

J:CLERKS OFFICE\Misc.Forms\Block Party Form

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**Signatures for the Block Party**

**\*\*\*\*Remember the Majority of the block must agree to the Block Party\*\*\*\***

**\*\*\*\*ALL Neighbors must be notified.\*\*\*\***

PLEASE PRINT NAME

*Attach additional sheet if necessary.*

<u>NAME</u>	<u>ADDRESS</u>	<u>SIGNATURE</u>

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