

City of **BROOKVILLE**

BLOCK PARTY REQUEST

This form must be completed and returned to the City Manager's Office at least 14 days in advance of the request party date. You will then be notified if your request has been approved or denied. Requests not made 14 days prior to the event date may be denied. Return to: 301 Sycamore Street, PO Box 10, Brookville, Ohio 45309, or by email jkuntz@brookvilleohio.com

Requester's Information:

Name: _____

Address: _____

Phone No.: _____

Event Information:

Date: _____ Starting/Ending Times: _____

Event Location: _____

Reason for Event: _____

Is this a private or neighborhood event? _____

(For City use only below)

Date Received by CMO: _____

Police Chief Approval: Yes _____ No _____

Comments: _____

Fire Chief Approval: Yes _____ No _____

Comments: _____

Council Approval: Yes: _____ No: _____