



CITY OF GILLETTE APPLICATION FOR A STREET CLOSURE PERMIT

NAME OF APPLICANT: <u>Gillette Main Street</u>	
ADDRESS: <u>PO Box 7256</u>	
PHONE NUMBER: <u>689-8369</u>	
DESCRIBE AREA TO BE CLOSED. PLEASE ATTACH A MAP OF CITY STREETS TO BE CLOSED	
<u>3rd Street Plaza</u>	
DESCRIBE THE PURPOSE OF THE STREET CLOSURE	
<u>Gillette Main Street Ice Fest</u>	
DOES THE EVENT INCLUDE ALCOHOL? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (If yes, then fill out attached form from the Police Department.)	
DATE OF CLOSURE: <u>2/20/16</u> TIME OF CLOSURE <u>9:00</u> <input checked="" type="checkbox"/> am <input type="checkbox"/> pm to <u>5:30</u> <input type="checkbox"/> am <input checked="" type="checkbox"/> pm	
SPECIAL CONSIDERATIONS: THE APPLICANT IS REQUIRED TO CONTACT ALL PERSONS OR BUSINESSES AFFECTED BY THE PROPOSED STREET CLOSURE AND A SIGNED NOTIFICATION SHEET MUST BE ATTACHED TO THE APPLICATION	
Signature of Applicant <u>Jessica Seders</u> Date <u>1-4-16</u>	
REVIEW COMMENTS	
Police Department <u>[Signature]</u> Date <u>1-7-16</u>	
Public Works (Contact the Street Division at 686-5278 to make arrangements for barricades) Signature <u>[Signature]</u> Date <u>1-8-16</u>	
City Clerk Signature <u>Karene Cabello</u> Date <u>1/8/16</u>	
City Council Action Approved _____ Denied _____	

NOTIFICATION OF STREET CLOSURE

Date: 1-4-16

To facilitate the event Gillette Main Street Ice Fest, it will be

necessary to close the following street(s):

3rd Street Plaza

The closure will be on 2-20-16 beginning at 9am until 5:30 pm
Date Time Time

Your cooperation and consideration is appreciated.

[illegible]