



## CITY OF GILLETTE APPLICATION FOR A STREET CLOSURE PERMIT

NAME OF APPLICANT: <u>LAURA CHAPMAN</u>	
ADDRESS: <u>204 S. GILLETTE AVE , 82716</u>	
PHONE NUMBER: <u>480-205-9879</u>	
DESCRIBE AREA TO BE CLOSED. PLEASE ATTACH A MAP OF CITY STREETS TO BE CLOSED	
<u>3RD STREET PLAZA - 3RD ST FROM GILLETTE AVE TO KENDRICK</u>	
DESCRIBE THE PURPOSE OF THE STREET CLOSURE	
<u>GILLETTE MAIN STREET'S "THIRD &amp; MAIN FESTIVAL OF THE ARTS"</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>SAT JUNE 11 2016</u> TIME OF CLOSURE <u>8am</u> <input checked="" type="checkbox"/> am <input type="checkbox"/> pm to <u>6pm</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>[Signature]</u> Date <u>5/4/16</u>	
REVIEW COMMENTS	
Police Department	
Signature _____ Date _____	
Public Works (Contact the Street Division at 686-5278 to make arrangements for barricades)	
Signature <u>[Signature]</u> Date <u>5/9/2016</u>	
City Clerk	
Signature <u>[Signature]</u> Date <u>5-10-16</u>	
City Council Action	
Approved _____ Denied _____	

White Copy: Clerks

Yellow Copy: Police Department

Pink Copy: Customer

# NOTIFICATION OF STREET CLOSURE

Date: 5/4/16

necessary to close the following street(s):

3RD STREET PLAZA - 3RD ST FROM GILLETTE AVE TO KENDRICK

The closure will be on June 11, 2016 beginning at 8 am until 6 pm  
Date Time Time

Your cooperation and consideration is appreciated.

[illegible]