



### CONTRACTOR/CONSTRUCTION - STREET CLOSURE PERMIT APPLICATION

#### EVENT INFORMATION

|  |        |       |                      |                       |
|--|--------|-------|----------------------|-----------------------|
| EVENT TITLE & DESCRIPTION:               |        |       |                      |                       |
|  |        |       |                      |                       |
| EVENT DATE(S):                           |        |       |                      |                       |
| STREET(S) AND/OR AVENUE(S) TO BE CLOSED: |        |       |                      |                       |
|  |        |       |                      |                       |
| TIME OF EVENT:                           | START: | END:  | SET-UP TIME (START): | TEAR-DOWN TIME (END): |
| NAME OF ORGANIZATION:                    |        |       |                      |                       |
| ADDRESS:                                 |        | CITY: | STATE:               | ZIP CODE:             |
| CONTACT NAME:                            |        |       | EMAIL:               |                       |
| CELL PHONE:                              |        |       | OTHER PHONE:         |                       |
| ADDRESS:                                 |        | CITY: | STATE:               | ZIP CODE:             |

\_\_\_\_\_  
APPLICANT/ORGANIZER SIGNATURE

\_\_\_\_\_  
DATE

#### OFFICIAL USE ONLY

|  |                         |
|--|-------------------------|
| PERMISSION IS HEREBY GIVEN TO:                       |                         |
| TO CLOSE THE FOLLOWING STREET(S)/AVENUE(S)/ALLEY(S): |                         |
|  |                         |
|  |                         |
|  |                         |
|  |                         |
|  |                         |
| ON:  | , FOR (TYPE OF EVENT):  |
|  |                         |
|  |                         |
|  |                         |
| FROM:  | : (START) / TO: : (END) |

UNDER AND SUBJECT TO THE PROVISIONS AND REQUIREMENTS OF THE CITY OF ALTOONA CODE OF ORDINANCES, THE CITY OF ALTOONA POLICE DEPARTMENT AUTHORIZES THIS STREET CLOSURE PERMIT IN EFFECT ON \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
TRAFFIC/SPECIAL EVENTS OFFICER

\_\_\_\_\_  
CHIEF OF POLICE

DATE APPROVED: \_\_\_\_\_