



Town of Islip

Olga H. Murray
Town Clerk and Registrar of Vital Statistics
655 Main St., Islip NY 11751

BLOCK PARTY

Application for Block Party

Applicant **MUST LIVE ON BLOCK** WHERE PARTY IS TO TAKE PLACE
Application **MUST BE SUBMITTED 45 DAYS** in advance of Block Party
Application requires 2 Signatures *system will email "Link to Sign" to email address you supply
Application must be notarized *system will email "Link to Sign" to Notary email you supply



* Application cannot be submitted without attaching the Consent Form Document *

The Consent Form **MUST** provide names, addresses and signatures of two-thirds (2/3) of homeowners on the block giving their approval for the block party ***ONLY** one signature per household will be accepted *

* Fee \$75 (+2.24 Credit Card Fee) Payment is made by debit or credit card via our secure payment portal(receipt is emailed) *

Applicant Name		Telephone Number	
Address		Email Address	
City		State _____	Zip Code _____
Date of Block Party	Rain Date	Time	(No later than 11p.m.)
Name of Street to be closed (Specify Road, Ave, Lane, Court, Circle...) * YOU MUST LEAVE ACCESS FOR EMERGENCY VEHICLES *			
Cross Streets _____ x _____			
Number of houses on the Street _____		Barricades Needed No ___ Yes ___ How Many _____	
Persons Responsible for litter removal			
Name _____		Phone _____	
Name _____		Phone _____	



I (WE) AGREE THAT INFORMATION AS STATED ABOVE IS TRUE AND ACCURATE AND FURTHER THAT I (WE) HAVE READ A COPY OF AND WILL COMPLY WITH THE TOWN OF ISLIP NOISE AND BLOCK PARTY ORDINANCES AS SUMMARIZED BELOW:

*Barricades are only to be used for street closings

Any street obstructions are prohibited

No double parking on any surrounding streets

Ingress and egress shall be at all times available to emergency vehicles

No fees shall be charged for any item, including but not limited to admission, food or beverage

All forms of fireworks and/or alcoholic beverages are prohibited

**** Block Party must follow all applicable State and Local guidelines for large outdoor social gatherings, and any other guidance pertinent to block parties in effect on the date of event.**

It is the sole responsibility of the Permit Applicants, as the designated Responsible Party, to ensure the event is in compliance with all applicable New York State and Local COVID-19 guidance, rules and regulations **

I understand and agree that a 2.99% credit card convenience fee will be added at transaction settlement time

SIGNATURE OF APPLICANT

SIGNATURE OF APPLICANT

SWORN BEFORE ME THIS

** _____ DAY OF _____ 20_____

** _____ NOTARY PUBLIC (Stamp Here)





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BLOCK PARTY

LOCATION: _____



Please provide names, addresses and signatures of two-thirds (2/3) of homeowners on the block giving their approval for the block party. Please use the back of this page for additional space.

***ONLY one signature per household will be accepted ***

	Resident Name	Signature	Address
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
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