RICHMOND NEIGHBOURHOOD BLOCK PARTY PROGRAM

Neighbourhood Road Closure Permission Form 2024

Information for Block Party Applicant: This form must demonstrate that you have obtained support from 67% (2/3) of the households affected by your requested temporary road closure for your block party.

Applicant Name: _____

Applicant Phone #: _____ Applicant Email #: _____

Block Party Date: _____ Block Party Time: Start: _____ End: _____

Block Party Address: _____

Name (First & Last)	Household Address and Phone Number	I SUPPORT THIS REQUEST	I DO NOT SUPPORT THIS REQUEST	Signature

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Name (First & Last)	Household Address and Phone Number	I SUPPORT THIS REQUEST	I DO NOT SUPPORT THIS REQUEST	Signature

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