



MUNICIPALITY OF BETHEL PARK

Municipal Building • 5100 West Library Avenue • Bethel Park, PA 15102 • 412-831-6800 • FAX 412-831-8675 • www.bethelparkpa.gov

Permit # _____

BLOCK PARTY PERMIT APPLICATION (Fee \$50)

Application Must Be Submitted No Less Than Four (4) Weeks Prior to Event Date

Applicant:

Name: _____

Address: _____

Phone: _____ Email: _____

Block Party Information:

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

Street(s) to be Blocked Off: _____ From Address: _____ To Address: _____

Method Used to Inform Neighbors of Street Closure: ☐ Flyer ☐ Yard Signs ☐ Other: _____

-Barricades will be delivered to your driveway the day before the party date.

-Please place barricades in your driveway for pick-up the day after the party date.

-Access for emergency vehicles during the event must be provided.

- Please provide an Aerial view marking the location of where the barriers will be placed during the party.

Music: ☐ Yes ☐ No

Food Trucks: ☐ Yes ☐ No *If Yes, please provide a copy of Allegheny County Health Department (ACHD) Permit issued to vendor.*

RESIDENTS ARE RESPONSIBLE FOR CLEANING UP THE STREET(S) AND SIDEWALKS. IF PUBLIC WORKS CREWS ARE NEEDED FOR ANY CLEAN UP, THE PERMIT HOLDER MAY BE RESPONSIBLE FOR HOURLY WAGES AND/OR FINES.

Applicant Signature: _____ Date: _____

For Department Use Only:

Food Trucks: ☐ Yes ☐ No If Yes, ACHD Permit provided: ☐ Yes ☐ No

Copy to Public Works: ☐ Yes

Copy to Dispatch: ☐ Yes

Conditions: _____

Zoning/Building Inspector's Signature: _____ Date: _____

Police Department Signature: _____ Date: _____

Approved: ☐ Yes ☐ No; if No, Reason: _____