

**CITY OF MARION, OHIO**  
**BLOCK PARTY PERMIT**

*\* Note: Permit Form must be submitted no less than 2 weeks prior to date of event. \**

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

**CONTACT INFORMATION**

NAME: \_\_\_\_\_

GROUP (if applicable): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

**EVENT INFORMATION**

DATE OF PARTY/EVENT: \_\_\_\_\_

PURPOSE: \_\_\_\_\_

LOCATION: \_\_\_\_\_

APPROXIMATE LENGTH OF TIME: (from) \_\_\_\_\_ (to) \_\_\_\_\_

NUMBER OF BARRICADES NEEDED: \_\_\_\_\_

WHERE SHOULD THE BARRICADES BE DROPPED OFF: \_\_\_\_\_

ADDITIONAL REMARKS: \_\_\_\_\_

\_\_\_\_\_

SIGNATURE: \_\_\_\_\_

**PERMIT REQUIREMENTS**

1. Should not pose a noise problem.
2. Only non-alcoholic beverages on City property.
- 3. Party is to conclude by 11p.m.**

Issuance of this form is for registration purposes only and does not constitute an endorsement by the City of Marion for any solicitation made by the bearer hereof.

Approved: \_\_\_\_\_ Date: \_\_\_\_\_

Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_

Forwarded to: \_\_\_\_\_ Date: \_\_\_\_\_

Fire Dept: \_\_\_\_\_  
Police Dept: \_\_\_\_\_  
Streets Dept: \_\_\_\_\_