



101 West 8<sup>th</sup> Street  
Glenwood Springs, CO 81601  
Phone 970.384.6435  
www.cogs.us

**BLOCK PARTY PERMIT**  
Permit Number: \_\_\_\_\_  
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Complete and return to [eng.permits@cogs.us](mailto:eng.permits@cogs.us). Permit requires a **five (5) business day** review for City Staff.

**Block Party Permit applications shall include:**

- Block Party Permit Fee: \$35
- Cleanup will be the responsibility of the permit holder.
- Signatures of a minimum of 80% of the homeowners along the closed section of road in lieu of a certified traffic control plan.
- Block Parties will only be permitted on streets classified as local street and meet the traffic control plan requirements attached. If the proposed block party does not meet these conditions, the applicant will be required to provide their own certified traffic control plan and signage.
- Map/Sketch showing all proposed street obstructions. Adequate emergency service access is required.
- Street closures will only be allowed for one block (between two intersections or up to 500 feet, whichever is less)
- Block parties are limited to be four (4) hours long with a two (2) hour set up and tear down (total of 8 hours).
- Barricades and signage may be rented from the City based on availability of devices. The City has a limited supply that is dedicated to City Projects first and foremost. It shall be the responsibility of the permit holder to follow all MUTCD requirements outlined in the traffic control plan at all times. Permits for block parties do not require an insurance certificate.

***Other Permits through the City Clerk's Office and Parks Department may be required. Submittal of this permit does not guarantee the granting of a Block Party Permit.***

**Applicant Information:**

Name: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Address of Obstruction: \_\_\_\_\_

Reason for Obstruction: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date \_\_\_\_\_ Time of Day: \_\_\_\_\_ (AM/PM) to \_\_\_\_\_ (AM/PM)

***The undersigned Applicant agrees to indemnify and hold harmless the City of Glenwood Springs, and its agents and employees from and against any and all claims, damages, losses, and expenses including reasonable attorneys' fees, arising out of, in connection with, resulting from, or in any way related to, the issuance of the requested block party permit of any act of omission or commission by the representative, or contractors, in conducting the block party. Applicant also agrees to reimburse the City of Glenwood Springs for any costs incurred related to this block party. By signing below, I understand I am releasing the City of Glenwood Springs of any responsibility.***

***Applicant Signature:*** \_\_\_\_\_ ***Date:*** \_\_\_\_\_

**Office Use Only**

Block Party Permit # \_\_\_\_\_ Special Provisions:

**Engineering Department Permit Approval:**

Approved By: \_\_\_\_\_ Signed: \_\_\_\_\_

***This permit is issued with the specific understanding that it is subject to suspension or revocation for failure to comply with the terms and conditions of the Glenwood Springs Municipal Code. Representatives of the City of Glenwood Springs are authorized to inspect the site at any time.***

**Office Use Only:**

Date Received: \_\_\_\_\_ Date Paid: \_\_\_\_\_ Date Issued: \_\_\_\_\_ Date Permit Closed: \_\_\_\_\_

**Block Party Signatures**

Signatures from at least one resident (of at least 18 years of age) from a minimum of 80% of the residences located along the proposed closed street must be provided along with their indication of whether they are in favor or not.

	Name	Address	In Favor?	
1.			Yes	No
2.			Yes	No
3.			Yes	No
4.			Yes	No
5.			Yes	No
6.			Yes	No
7.			Yes	No
8.			Yes	No
9.			Yes	No
10.			Yes	No
11.			Yes	No
12.			Yes	No
13.			Yes	No
14.			Yes	No
15.			Yes	No
16.			Yes	No
17.			Yes	No
18.			Yes	No
19.			Yes	No
20.			Yes	No
21.			Yes	No
22.			Yes	No
23.			Yes	No
24.			Yes	No
25.			Yes	No

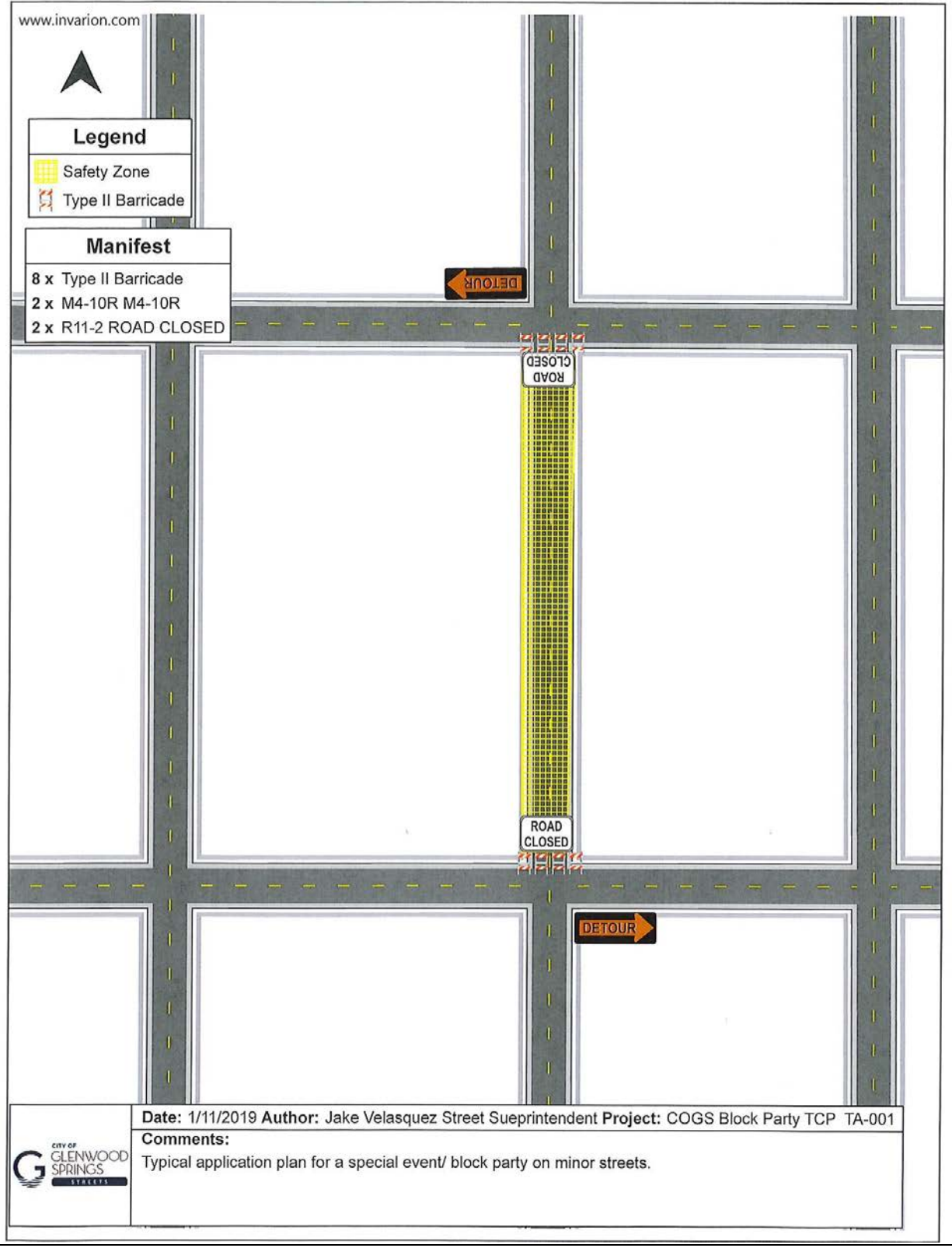
*The undersigned Applicant certifies that they are a resident of the neighborhood in which the block party will be held and that they are at least 21 years of age. They also certify that they have notified all of the residents who will be affected by this street closure, obtained signatures for a minimum of 80% of the residents in favor of having a block party, and have ensured that there are no conflicts. In addition, I certify that the information submitted is true and accurate.*

*I understand that this additional permitting may be required, and I must comply with all City Municipal Code Ordinances. Failure to comply with said Ordinances or City Requirements will void the block party permit. This permit may be revoked at the discretion of any GWS PD officer.*

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

<b>Office Use Only:</b>			
Date Received: _____	Date Paid: _____	Date Issued: _____	Date Permit Closed: _____

**The Traffic Control below is required at all times of the Block Party:**



**Office Use Only:**

Date Received: \_\_\_\_\_ Date Paid: \_\_\_\_\_ Date Issued: \_\_\_\_\_ Date Permit Closed: \_\_\_\_\_