

CITY OF WALLACE STATE OF IDAHO

703 Cedar Street Wallace, Idaho 83873-2396 (208) 752-1147 Fax (208) 752-7741 Mayor Lynn Mogensen

Clerk/Treasurer Kristina Larson

STREET CLOSURE REQUEST & CHECKLIST FOR NON-PROFIT ORGANIZATIONS

The City of Wallace appreciates your work in putting on an event in town. While these events help various businesses in town it is a hardship on others. This should be taken into consideration when requesting a street closure and every attempt should be made to minimize the amount of streets impacted and the duration of the closure. Only schedule street closures on weekends if possible.

Application must be returned by the 1" day of the month that you wish the Council to consider the request. Application will be considered at the regular City Council meeting of: A representative of the organization should be present at this meeting to make a presentation and to answer any questions regarding the request. Prior to the meeting all impacted neighbors should be notified (email is fine) and steps taken to minimize any negative impacts. The committee is responsible for posting & removing No Parking signs as well as cleaning all garbage and debris from all streets and sidewalks after the event. Organization requesting closure: Contact Person:______ Cell Phone:_____ State the purpose for which the request is being made: Date(s) desired for use: Time(s) desired for use: Street(s) desired for use: ______ Also show on attached map Number of Portable Toilets (recommended at least 1 per 1,000 people):______ Also show on attached map Number of Handicap Portable Toilets:______ Location of Portable Toilets:_____ Contact made with all impacted neighbors ___Waters Garbage bringing extra garbage bins? If so, location:_____ Proof of Insurance for the event provided to City Contact Signature: ______ Date Approved by City Council: Routed to: Police Department: Street Department: Fire Department:

