



Street Closure/Block Party Permit Form

Las Cruces Police Department
 217 E. Picacho Avenue
 P.O. Box 20000
 Las Cruces, New Mexico 88001

Applicant Information (Please Print All Information)	
Permit Requestor:	
Address:	City & Zip Code:
Phone Number(s):	Email:
Street/Block Party Information	
Block Party Address:	Date of Event:
Start time (set-up):	End Time (tear down):
Street closure (Include street names and a traffic control plan.):	
Number of People:	Is the closure Downtown?

The undersigned hereby applies for a Streets/Block Party Permit and agrees to the following stipulations:

1. Adequate space will be provided on the streets at all times for passage of emergency vehicles.
2. Applicant assumes all liability and/or damages, and will hold harmless the City of Las Cruces of any liability whatsoever.
3. Applicant assumes all responsibility for the conduct of all participants in compliance with all laws of the City of Las Cruces.
4. A signed approval of all persons living in the immediate area of the proposed streets/block party must accompany this application.
5. Removal of any garbage, paper, or other debris is the sole responsibility of the applicant.
6. Barricading of all streets is the sole responsibility of the applicant.

Requestor Signature	Date:
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For Staff Use Only	
Notes:	
Closure Checked By:	Date:
Traffic Ops - Approved By:	Date:
LCFD - Approved By:	Date:
LCPD - Approved By:	Date:

We, the undersigned, do hereby request a street/block party permit be issued:

Neighbor	Address	Phone	Circle One	
			Approve	Disapprove
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