

BLOCK PARTY PERMIT

CITY MANAGER'S OFFICE

3600 Tremont Road | Upper Arlington, OH 43221 614-583-5040 | upperarlingtonoh.gov

Petition Form

Please complete the following information prior to soliciting concurrence from the appropriate residents on the street in question. If a residence is unoccupied, please indicate as such on the form.

You may make multiple copies of this Petition Form if additional addresses/signatures are required.

The undersigned residents acknowled	dge that they are in concurrence with the B	slock Party request by
(Requesting Party's Name) on		(date)
for the following street:	(street name), from	(street name)
to(street	name).	
Signature	Printed Name	Street Address