



Borough of Magnolia

438 West Evesham Avenue • Magnolia, New Jersey 08049

Borough Hall: (856) 783-1520 Fax: (856) 783-0782

www.magnolia-nj.org

BLOCK PARTY APPLICATION

Application will be returned if not complete or if received later than 21 days prior to the event

- A copy of the letter to all residents in the neighborhood providing notification of the planned event must be attached to this application.
- Permit will be valid between 8:00a.m. through 11:00p.m.
- The majority of the block must agree to have the party and sign this application.
- Do not block streets off with any vehicles. DPW will provide barricades, cones, tape, etc. Emergency vehicles (police, ambulance, etc.) must have access to the street during the Block Party; failure to comply is subject to a fine.
- Please be sure to clean up after your Block Party.

Number of houses affected by the closing of the street due to the Block Party: _____

Number of houses participating in the Block Party: _____

Total petitioner' signatures collected and attached: _____

Estimated number of guests: _____

Barricades: Official Borough barricades must be used to block-off the section of the street being used for the Block Party. These barricades are available by contacting our Public Works Department at (856) 784-6162 at least 72 hours prior to your event in order for the barricades to be dropped off on a timely basis. Contact our Public Works Department again on the next business day to arrange for barricades to be picked up.

We, the undersigned residents of _____ request permission for a Block Party on ____/____/____ with a rain date of ____/____/____ from _____ to _____. The following street will need to be blocked off _____.

Please call _____ (name of street representative) who resides at _____ Phone Number: _____

Email: _____ for any information or

questions regarding this Block Party.

Date Received: _____



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FOR OFFICE USE ONLY

FOR POLICE DEPARTMENT USE ONLY

Reviewing Officer's Recommendation: Approved: _____ Rejected: _____
(provide an explanation and/or conditions)

Chief of Police

Date

Public Works

Date

Mayor

Date

Municipal Clerk

Date Approved / Resolution #