



PROVO CITY CORPORATION

PUBLIC WORKS DEPARTMENT - ENGINEERING DIVISION

PERMIT APPLICATION

OWNER INFORMATION

Owner _____
Address _____
City _____ State _____ Zip Code _____
Contact _____ Mobile Phone _____ Office Phone _____
fax _____ Email _____

CLOSURE INFORMATION

Location of Closure _____ Event Name _____
Date/Time Setup to Begin _____ Completion Date/Time _____

EVENT TYPE

- BLOCK PARTY FILMING FESTIVAL
 PROTEST RACE OTHER _____
 BIRTHDAY/WEDDING FUND RAISER

DESCRIBE PROPOSED EVENT: _____

DESCRIBE ANY ADMISSIONS CHARGED, REGISTRATIONS, PROCEEDS, OR SALES AT/FOR THE EVENT: _____

APPLICATION CHECKLIST

Will this event be within the public street right of way. **Yes** **No** If Yes, is a **TRAFFIC PLAN** Attached. **Yes** **No**

*Submit this Street Closure Permit application to the Public Works Department, Engineering Division with all applicable fees for review.

Print Name _____ Signature _____ Date _____