



Elmwood Park Police Department
182 Market Street
Elmwood Park, NJ 07407

BLOCK PARTY REQUEST FORM

Name of Person Making Request: _____

Address: _____

Phone: _____

Location Block Party to be held: _____

Date Block Party will be held: _____

Hours for the Block Party: _____

Rain Date: _____

I, _____ agree that by signing this form that I will be the point of contact and responsible for the above Block Party Event. I will also abide by all Borough Ordinances pertaining to this Block Party Event.

Signature: _____ Date: _____

****NO FIREWORKS PERMITTED****

Office Use Only

Elmwood Park Police Chief _____ Approved ___ Denied ___

Elmwood Park Fire Chief _____ Approved ___ Denied ___

Elmwood Park VAC Chief _____ Approved ___ Denied ___

Elmwood Park DPW Super _____ Approved ___ Denied ___

Elmwood Park Mayor & Council by Resolution _____ Approved ___ Denied ___