



**FAIRFIELD POLICE DEPARTMENT**  
100 Reef Road, Fairfield, Connecticut 06824  
203-254-4800

<i>FOR FPD USE ONLY</i>		
DATE RECEIVED		
APPROVED	YES	NO
APPROVED/DENIED BY		
LETTER SENT (DATE)		

**BLOCK PARTY REQUEST FORM**

All requests for block parties shall be submitted to the Fairfield Police Department, Special Services Division. All sections of this request shall be completed and the form signed by the applicant. Incomplete requests will not be approved.

Upon receipt of the completed Block Party Request form and Neighborhood Petition form, the chairperson of the event will be notified by mail if their street closure was approved or not approved. Questions can be addressed to the Special Services Division Monday through Friday, 8am to 4pm at 203-254-4890.

STREET TO BE CLOSED			IF ONLY A SECTION OF THE STREET IS TO BE CLOSED GIVE HOUSE NUMBERS OR CROSS STREETS			
DATE OF EVENT	START TIME	END TIME	RAIN DATE IF APPLICABLE	START TIME	END TIME	
EVENT CHAIRPERSON NAME		ADDRESS			CONTACT NUMBER	

**REQUIREMENTS FOR BLOCK PARTY APPROVAL**

1. Block Party Request form and Neighborhood Petition form must be filled out completely and submitted to the Fairfield Police, Special Services Division.
2. All residents on the street must be contacted and 80% must agree to closing the street. Neighbor contact will be verified by the completion of the Neighborhood Petition form.
3. Movable barricades shall be used at the ends of the street to be closed and adequate lighting provided if the closure continues after dusk to alert motorists.
4. Objects such as tents, tables and inflatable games that would hinder free access to emergency vehicles cannot be placed in the roadway.
5. The Department of Public Works may provide barricades for street closure if they have an adequate supply and with plenty of advance notice.

**I, the above named event chairperson, hereby request permission for a street closure at the above specified location, date and times, for the purposes of a block party. I have read and understand the above requirements.**

\_\_\_\_\_  
Signature of Event Chairperson

\_\_\_\_\_  
Date

**OTHER INFORMATION**

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