

(APPLICATION MUST BE COMPLETED)

APPLICATION FOR STREET ACTIVITY PERMIT
PROCESSING FEE \$15.00
CERTIFIED CHECK OR MONEY ORDER
MADE PAYABLE TO: NYC
DEPARTMENT OF FINANCE

APPLICATION NO. _____
DATE OF APPLICATION _____
PRECINCT _____

OFFICE OF THE MAYOR CITY OF NEW YORK

COMMUNITY ASSISTANCE UNIT - STREET ACTIVITY PERMIT OFFICE
100 GOLD STREET - 2ND FLOOR, NEW YORK, NY 10038
(212) 788-7439

WHEN APPROVED, THIS APPLICATION FOR A STREET ACTIVITY PERMIT SHOULD AUTHORIZE THE SPONSOR TO CONDUCT A STREET ACTIVITY AS DESCRIBED. IT IS SUBJECT TO REVOCATION IF THE SPONSOR DOES NOT COMPLY WITH ALL PERTINENT LAWS, RULES AND REGULATIONS INCLUDING ANY CONDITIONS OR RESTRICTIONS IMPOSED BY THE STREET ACTIVITY PERMIT OFFICE.

A STREET ACTIVITY PERMIT IS NOT VALID BEFORE 8AM OR AFTER 11:30PM

COMMUNITY BOARD MUST SUBMIT APPLICATION TO THE STREET ACTIVITY PERMIT OFFICE AT LEAST 60 DAYS PRIOR TO THE EVENT.

APPLICATIONS FOR MULTI-DAY AND MULTI-BLOCK EVENTS MUST BE FILED DIRECTLY WITH SAPO BY THE FILING DEADLINE OF DECEMBER 31ST OF THE PRECEDING YEAR.

APPLICATION IS HEREBY MADE BY: _____ (BUS) 212-239-2808
Janet Xiong 255, West 36th Street, #1105 New York, NY 10018 (HOME) _____
(APPLICANT'S NAME) (ADDRESS) (ZIP) (TELEPHONE)
ON BEHALF OF: Epoch Times 255 West 36th Street, #1105 NY, NY 10018 212-239-2808
(SPONSORING ORG.) (ADDRESS) (ZIP) (TELEPHONE)

REQUESTING PERMISSION TO CONDUCT A STREET ACTIVITY ON 36th Street ST. AVE.
BETWEEN 7th Avenue ST. AND 8th Avenue (LOCATION) ST. AVE Manhattan BOROUGH

9/22 BETWEEN 10AM AND 6PM # OF DAYS 1 # OF BLOCKS 1 9/29
DATE(S) OF EVENT (ACTUAL TIME OF EVENT) RAIN DATE(S)

EVENT TO TAKE PLACE ON: SIDEWALK STREET BOTH
DO YOU WISH THE STREET TO BE CLOSED: YES NO BETWEEN HRS. OF 8AM AND 7PM

TYPE OF EVENT: BLOCK PARTY STREET FESTIVAL SPECIAL EVENT CLEAN UP MOBILE UNIT RELIGIOUS CEREMONY

FARMERS MARKET OTHER EXPLAIN Traditional Chinese cultural festival ESTIMATE # OF PEOPLE TO ATTEND PER DAY 500
(PLEASE ANSWER ALL QUESTIONS)

- | | | | |
|--|---|-------------------------------------|--|
| 1. STREET: COMMERCIAL <input checked="" type="checkbox"/> RESIDENTIAL <input type="checkbox"/> MIXED <input type="checkbox"/> | 11. WILL THERE BE GAME BOOTHS? | YES <input type="checkbox"/> | NO <input checked="" type="checkbox"/> |
| 2. TRAFFIC: ONE WAY <input checked="" type="checkbox"/> TWO WAY <input type="checkbox"/> | 12. WILL FOOD BE SOLD? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. PARKING: PUBLIC GARAGE OR PARKING LOT <input checked="" type="checkbox"/> | 13. WILL BEER OR WINE BE SOLD? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. BUS ROUTE: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
BUS CO/ROUTE # _____ | 14. WILL LIQUID OR GASEOUS FUELS BE USED? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5. WILL PLATFORMS OR GENERATORS BE USED?
IF YES: PORTABLE <input checked="" type="checkbox"/> FLATBED TRUCK <input type="checkbox"/>
TO BE ERRECTED <input type="checkbox"/> | 15. WILL FUNDS BE SOLICITED? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 6. WILL TENTS, BANNERS, ARCHES, STAGES OR
OTHER STRUCTURES BE USED?
IF YES, INDICATE SIZE, AND HOW MANY _____
<small>one portable stage</small> | 16. WILL ELECTRIC WIRES BE STRUNG? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. DO YOU PLAN TO HAVE RIDES?
IF YES, TRUCK MOUNTED <input type="checkbox"/> TOTAL _____
TO BE ERRECTED <input type="checkbox"/> TOTAL _____ | 17. NUMBER OF VENDORS:
MERCHANDISE 100 _____ FOOD 25 _____
ARTS & CRAFTS 25 _____ OTHER 25 _____ | | |
| 8. WILL THERE BE AMPLIFIED SOUND? <input checked="" type="checkbox"/> | 18. ARE YOU INTERESTED IN BEING CONTACTED
BY VENDORS AND OTHERS WHO MAY WISH TO
PARTICIPATE IN YOUR EVENT? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 9. WILL MOBILE OR TRAILERS UNITS BE USED?
IF YES, PARKS & RECREATION <input type="checkbox"/> | 19. HAVE YOU HELD THIS EVENT BEFORE:
IF YES: NAME OF EVENT Block Party
DATE: 10/7/05
PERMIT # (IF KNOWN) M05-409 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 10. WILL RED CARPET, ROPE & STANCHIONS BE USED?
IF YES, INDICATE SIZE, AND HOW MANY _____ | 20. ARE YOU HIRING A PRODUCER/EVENT MANAGER
IF YES: NAME _____
ADDRESS _____
TEL. # _____ FAX: _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

THE APPLICANT AGREES TO INDEMNIFY AND HOLD HARMLESS THE CITY OF NEW YORK FROM ANY AND ALL CLAIMS AND JUDGEMENTS FOR PERSONAL INJURY OR DAMAGE TO PROPERTY RESULTING, DIRECTLY OR INDIRECTLY, FROM THE ACTIVITIES IN CONNECTION WITH WHICH THIS IS ISSUED, AND FROM ANY COSTS AND EXPENSES TO WHICH THE CITY MAY BE SUBJECTED OR WHICH IT MAY SUFFER OR INCUR BY REASON THEREOF. THE APPLICANT FURTHER AGREES TO COMPLY WITH THE PERTINENT PROVISIONS OF NEW YORK LAWS, RULES AND REGULATIONS. THE APPLICANT HAS READ THE LIST OF SPONSOR RESPONSIBILITIES ON THE REVERSE SIDE OF THIS APPLICATION.

Janet Xiong (APPLICANT SIGNATURE) The Epoch Times ON BEHALF OF (NAME OF SPONSOR) 6/18/07 (DATE)

COMMUNITY BOARD # _____ ADDRESS _____ TEL. # _____
COMMUNITY BOARD RECOMMENDATION: APPROVAL DENIAL
(CB AUTHORIZED SIGNATURE) (DATE)

(TO BE COMPLETED BY THE STREET ACTIVITY PERMIT OFFICE)

CONDITIONS AND RESTRICTIONS: _____
COPIES OF THIS APPLICATION HAVE BEEN FORWARDED TO THE FOLLOWING AGENCIES: _____
POLICE SANIT DOT FIRE CONSUMER AFFAIRS HEALTH TRANSIT OTHER _____
PF SAF WV

CK # 462-10421