

(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) \_\_\_\_\_  
(APPLICANT'S NAME) 1657 Broadway NY NY 10019 (ADDRESS) (ZIP) \_\_\_\_\_ (HOME) \_\_\_\_\_ (TELEPHONE)  
ON BEHALF OF: TIMES Square Church 1657 Broadway NY NY 10019 (SPONSORING ORG.) (ADDRESS) (ZIP) \_\_\_\_\_ (TELEPHONE)

REQUESTING PERMISSION TO CONDUCT A STREET ACTIVITY ON SEVENTH ST. AVE.  
BETWEEN 43rd AVE. AND 45th AVE. Manhattan BOROUGH

Sept. 9, 2007 BETWEEN HRS. OF 3 PM AND 5 PM # OF DAYS 1 # OF BLOCKS 2 Sept. 16, 2007  
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 10PM (For set /up + striking)  
TYPE OF EVENT: BLOCK PARTY  STREET FESTIVAL  SPECIAL EVENT  CLEAN UP  MOBILE UNIT  RELIGIOUS CEREMONY

FARMERS MARKET  OTHER  EXPLAIN \_\_\_\_\_ ESTIMATE # OF PEOPLE TO ATTEND PER DAY 5,000 - 10,000  
(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 type="checkbox"/> TWO WAY <input type="checkbox"/>  | 12. WILL FOOD BE SOLD?  | <input type="checkbox"/>            | <input checked="" type="checkbox"/>    |
| 3. PARKING: PUBLIC GARAGE OR PARKING LOT <input type="checkbox"/>  | 13. WILL BEER OR WINE BE SOLD?  | <input type="checkbox"/>            | <input checked="" type="checkbox"/>    |
| 4. BUS ROUTE: YES <input type="checkbox"/> NO <input type="checkbox"/><br>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? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/><br>IF YES: PORTABLE <input checked="" type="checkbox"/> FLATBED TRUCK <input type="checkbox"/><br>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? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/><br>IF YES, INDICATE SIZE, AND HOW MANY<br><u>50X60 Stage; 3 10X10 tents; 3 10x30 banners</u>                   | 16. WILL ELECTRIC WIRES BE STRUNG?  | <input checked="" type="checkbox"/> | <input type="checkbox"/>               |
| 7. DO YOU PLAN TO HAVE RIDES? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/><br>IF YES, TRUCK MOUNTED <input type="checkbox"/> TOTAL _____<br>TO BE ERRECTED <input type="checkbox"/> TOTAL _____                                 | 17. NUMBER OF VENDORS:<br>MERCHANDISE _____ FOOD _____<br>ARTS & CRAFTS _____ OTHER _____   |                                     |  |
| 8. WILL THERE BE AMPLIFIED SOUND? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>  | 18. ARE YOU INTERESTED IN BEING CONTACTED BY VENDORS AND OTHERS WHO MAY WISH TO PARTICIPATE IN YOUR EVENT?  | <input type="checkbox"/>            | <input checked="" 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 _____ DATE: _____ PERMIT # (IF KNOWN) _____  | <input type="checkbox"/>            | <input checked="" 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 <u>Marlyn Productions</u> ADDRESS <u>1001 Park St., Suite 2, Peekskill, NY 10566</u> TEL. # <u>(914) 788 0102</u> FAX: <u>914 788 0177</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/>               |