



HENRICO COUNTY POLICE DIVISION

Block Party Application

HCPD-350 (09/23)

In accordance with the provisions of Section §15.2-2013 of the Code of Virginia, the undersigned hereby requests authorization to close a County roadway for the purpose of a block party.

All applications must be received AT LEAST 30 DAYS PRIOR TO THE EVENT.

PLEASE PRINT OR TYPE THE INFORMATION REQUESTED BELOW.

Name of applicant: _____ Date of application: _____

Applicant's last four digits of SSN: _____ Phone #: _____

Applicant's address: _____

Email address: _____

Sponsoring organization: _____

Roadway to be closed: _____

Between the intersection of: _____ and _____

Date(s) to be closed: _____

Between the hours of: _____ and _____

1. The block of roadway requested to be closed shall have:
 - Barricades, obtained from a private contractor, positioned in such a manner that blocks all vehicular traffic and that indicates ROAD CLOSED.
 - Barricades affixed with blinking yellow lights if the event is held during or continues after darkness.
 - All barricades should be removed immediately upon termination of the event to allow vehicular traffic onto the affected roadway.
2. There is to be no alcoholic beverages consumed in public during this event, pursuant to the alcoholic beverage control laws of Virginia.
3. The block party must be terminated by 11:00 pm, pursuant to the Noise Ordinance of Henrico County.
4. This application must be accompanied by a petition signed by all property owners in the affected area and must include names and addresses of all property owners.
5. No matter advertising any thing or business is permitted to be displayed in or on public rights-of-way in connection with the block party.
6. A map of the roadway to be closed and the surrounding area must be attached to this application.
7. A copy of your public liability and property damage insurance contract that lists the County of Henrico as an additional insured must be attached to this application.
8. By applying for the block party, the applicant is assuming liability for any personal injury, death, or damages to property that results from the block party.

Applicant's signature: _____ Date: _____

The Commanding Officer, Community Services recommends: Approval Disapproval

Commanding Officer, Community Services signature: _____ Date: _____

Copy to: Applicant Traffic Engineer Communications Station Captain Fire OEM