

READ INSTRUCTIONS THOROUGHLY!

Complete the attached Street Closing Application and return it with the applicable fee to the City of Jamestown, 102 3rd Avenue SE, Jamestown, ND 58401.

- 1. Requests for street closing must have City Auditor's Office approval a minimum of seven (7) days prior to the scheduled date of closing. Fees for the closing must be paid seven (7) days prior to the scheduled date of closing.**
- 2. Permit fees will be non-refundable if the closing is cancelled less than forty-eight (48) hours prior to the scheduled closing.**
- 3. Center area of street must remain clear for emergency vehicles.**
- 4. Application Fee:**

**COMMERCIAL: \$75.00 for the 1st day – \$25.00 each succeeding day
(Applicant provides set up)**

RESIDENTIAL:

- a) \$75.00-City will set up and remove barricades (\$25.00 each succeeding day)**
- b) \$25.00-City delivers and picks up cones from site (Applicant provides set up)**
- c) No charge-Applicant provides personal cones at site (Applicant provides set up)
(Must be minimum of 28 inches in height)**

PARADES:

- 5. Contact the Police Department and speak to the Supervisor that will be working the date and time of the parade.**

The City Administrator may refer the request for a street closing to the City Council for action by said body at its next regular or special council meeting or appropriate committee meeting.

CITY OF JAMESTOWN
102 3RD AVENUE SE
JAMESTOWN, NORTH DAKOTA 58401
TELEPHONE 701-252-5900 - FAX 701-252-5903

STREET CLOSING APPLICATION
MUST BE SUBMITTED A MINIMUM OF 7 DAYS PRIOR TO STREET CLOSING

APPLICATION FEE:

COMMERCIAL: ___ \$75.00 For the 1st day – \$25.00 each succeeding day (Applicant provides set up)

RESIDENTIAL: ___ \$75.00 - City will set up and remove barricades (\$25.00 each succeeding day)
___ \$25.00 - City delivers and picks up cones from site (Applicant provides set up)
___ No charge - Applicant provides personal cones at site (Applicant provides set up)
(Must be minimum of 28 inches in height)

1. NAME OF APPLICANT _____

2. MAILING ADDRESS: _____

CITY	STATE	ZIP CODE
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3. EMAIL ADDRESS _____

4. BUSINESS PHONE NO. _____ HOME PHONE NO. _____

5. STREET TO BE CLOSED: (Center area of street must remain clear for emergency vehicles)

6. DATE & HOURS STREET IS TO BE CLOSED: _____

7. EVENT FOR WHICH STREET IS TO BE CLOSED:

Auction Sale ___ Block Party ___ Parade ___ Tree Cutting ___ Utility Work ___

Other: _____

DATED THIS _____ DAY OF _____, 20 _____.

SIGNATURE OF APPLICANT

CITY HALL USE ONLY

Date Application received: _____ Received by: _____

Application Fee Received: Yes ___ No ___

Request Approved By: _____ Date: _____

Date Police Department, Public Works Department, Fire Department, Jamestown Ambulance, James River Transit Notified: _____