



Borough of
RUTHERFORD

176 Park Avenue | Rutherford, NJ 07070

201-460-3000
rutherfordboronj.com

Block Party Application

COMPLETE FORM AND RETURN TO THE CLERK'S OFFICE

A minimum of 45 days notice is required prior to the block party.

Date of block party & rain date if applicable: _____

Estimated attendance: _____ Time of block party - From: _____ To: _____

Street: _____ Between: _____ & _____

Block Party Coordinator's Contact name: _____
(please print)

Coordinator's address: _____

Coordinator's phone number: _____ Coordinator's email: _____

Available cell phone contact number during the block party: _____

Will there be amplified music or sound associated with the event? Yes _____ No _____

- **Important:** In the event of a fire/medical/ police emergency, any barricades must be removed.
- Fire hydrants must be accessible at all times.
- A 20' wide fire lane shall be maintained through the closed part of the roadway for the duration of the event to allow fire apparatus and other emergency vehicle access into the closed part of the roadway
- No food or beverages may be sold.

Your signature indicates you have read and understand the Block Party Policy. You agree to abide by, and adhere to this policy.

Block Party Coordinator's Signature: _____ Date: _____

If the barricades have not been delivered by noon on the Friday prior to the event, contact the Borough at 201-460-3000 x4007 prior to 2:00 PM.

For Internal Use Only:

Borough Action: Mtg Date Approval: _____ Denied: _____ Permit Issued: _____

Routing: Fire _____ DPW _____ PD _____ Health _____

Fee Received _____ Petition Received _____ Hold Harmless Received _____

Coordinator notified: Initials: _____ Date: _____

Block Party Application

Block Party Petition

All residents on the block must be contacted before a block party application is submitted. For multi-unit dwellings/apartments, each unit must be contacted. At least 51% of the residents on the block must be in favor of the party and must complete and sign the "Block Party Petition" form.

Requested block party date: _____ Block party coordinator: _____

1. Name _____ Address _____ Signature _____
2. Name _____ Address _____ Signature _____
3. Name _____ Address _____ Signature _____
4. Name _____ Address _____ Signature _____
5. Name _____ Address _____ Signature _____
6. Name _____ Address _____ Signature _____
7. Name _____ Address _____ Signature _____
8. Name _____ Address _____ Signature _____
9. Name _____ Address _____ Signature _____
10. Name _____ Address _____ Signature _____
11. Name _____ Address _____ Signature _____
12. Name _____ Address _____ Signature _____
13. Name _____ Address _____ Signature _____
14. Name _____ Address _____ Signature _____
15. Name _____ Address _____ Signature _____
16. Name _____ Address _____ Signature _____
17. Name _____ Address _____ Signature _____
18. Name _____ Address _____ Signature _____
19. Name _____ Address _____ Signature _____
20. Name _____ Address _____ Signature _____

USE OF FACILITIES HOLD HARMLESS AGREEMENT

Between the

BOROUGH OF RUTHERFORD

176 Park Avenue, Rutherford, NJ 07070

And

Name/Organization

Street Address (No Post Office Box)

Contact Person

Telephone Number

e-mail address

Alternate Contact

Telephone Number

Organization Type: *(Please Check One)*

☐ Individual

☐ Government / Non-Profit Organization

☐ For-Profit Organization (Certificate of Insurance is required)

In consideration for use of facilities at _____

on the following date(s): _____

for the purpose of _____

the Undersigned agrees to Indemnify, Defend and Hold the **BOROUGH OF RUTHERFORD** (hereinafter referred to as the "Borough") its Officers, Agents, Employees and Assigns, Harmless from any and all liability, demands, claims, suits, losses, injuries, damages, judgements, expenses, costs and attorneys' fees arising out of the use of the above stated municipal property for the purposed use stated above.

HOLD HARMLESS AGREEMENT

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I (we) understand this Hold Harmless Agreement also provides the Borough be indemnified from any and all liability, claims, demands, damages, judgements, expenses and costs of any kind, resulting from the Acts or Omissions from any Guest, Participant, Visitor or other person attending the event herein referred to, unless waived in writing by the Borough.

WHEN APPLICABLE:

I (we) agree to furnish a Certificate of Insurance evidencing General Liability coverage with minimum limits of liability not less than:

COMMERCIAL GENERAL LIABILITY

Minimum Policy Limits of: \$1,000,000. Per Occurrence / \$2,000,000. Aggregate.

Policy must be endorsed to include the BOROUGH OF RUTHERFORD as Additional Named Insured.

It is further understood and agreed, the Borough is not responsible for Personal Property of the Undersigned, their Guests or Participants.

Signed this _____ day of _____, 20 _____, as the binding act in deed of

Name, Agency or Organization

Authorized Signatory (*signature*)

Witness (*signature*)

Print Name

Print Name