

**SPECIAL EVENT STREET CLOSURE CONSENT/OBJECTION FORM**

**Pursuant to City Code 20-8 – Special Events**

For special events involving a street closures, all events must include an emergency plan detailing access for emergency vehicles. Furthermore, event applicants, including parade events, shall notify affected property owners as follows:

- a. In residential neighborhoods: fourteen days advance notice to the residents that will be impacted by the event is required so they can plan around the inconvenience. This is the responsibility of the event sponsor. If this activity is not done, the event may be canceled.
  
- b. In commercial areas: if businesses are affected, applicant shall notify in writing the affected business owners at least 14 days prior to the street closure. Furthermore, a blank written objection form must be provided by the applicant with the notice to all businesses. A business electing to object, must complete and submit the objection form to the city no later than seven days prior to the scheduled event. If 51 percent of impacted businesses file such written objection to the event, the city may consider withholding or canceling the event permit. Objection forms are included in the application packet.

Event organizer must describe the public rights of way being affected (closed); the purpose of the use (closure); date and time of use (closure). A copy would then be given to the affected property owners.

Name of Street(s): \_\_\_\_\_

\_\_\_\_\_

Purpose: \_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

I, \_\_\_\_\_, (property owner/business affected by public right of way use/closure):

Check one box:

CONSENT

(I agree that neither the special event organizer nor the City of Bemidji may be held liable for any inconvenience the street closure may cause. I further agree to notify any tenants and vendors whom the street closure will directly affect.)

OBJECT

Reason(s) for Objection:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Business/Organization

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Return completed form to:

Event Organizer; OR

City Clerk, 317 4<sup>th</sup> Street NW, Bemidji, MN 56601