

PLAY STREET APPLICATION



To close off your street and register your block as a play street, complete the following information. You will receive notification of your permit within 14 days. Please include a copy of your permit on the traffic barricades closing your street.



APPLICANT BASIC INFORMATION

(check one) School Resident Community Organization

NAME (contact person) _____

ADDRESS _____
street *zip code*

PHONE _____ EMAIL _____

PLAY STREET INFORMATION

DATE of first play street
(allow 14 days to obtain the permit) _____
month / day / year

Recurring? NO YES _____
(e.g. every Saturday)

TIME of street closure _____
from to

DATE of last play street _____
month / day / year

STREET NAME _____
to be closed

From: _____
cross street

To: _____
cross street

I have contacted ALL of my neighbors on my block about my plans: NO YES

By submitting this application, I agree to adhere to all City of Seattle Street Use rules and regulations.

signature *date*

ACTIVITIES (check all that apply):

- Chalk art
- Games (hopscotch, jump rope, four square, basketball, badminton, etc.)
- Organized class (dance, yoga, martial arts)
- Bicycle rodeo, roller-blading, relay races
- Unstructured play
- Other _____

I will ensure that my block is adequately closed to traffic with sufficient and effective traffic barricades: NO YES

Please submit completed application by MAIL or FAX or EMAIL to:

MAIL SDOT -- Street Use Division Attn: Annual Permits PO Box #34996 Seattle, WA 98124-4996	FAX Attn: Annual Permits (206) 684 - 5347	EMAIL annualpermits@seattle.gov
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