

Borough of Northumberland Event Planning Request Form

Name of Event: _____

Type of Event: _____

Date of Event: _____ Time of Event _____ AM/PM/ALL DAY

Contact Name: _____

Phone Numbers: Home _____ Cell _____

Sponsoring Organization: _____

Location: _____

Will event require streets to be closed? _____ Yes _____ No

If Yes, what Streets: _____

Will streets require closing prior to event? _____ Yes _____ No

If Yes, when: _____

Will a map of the event be provided? _____ Yes _____ No

What specific activities will be taking place? _____

Estimated Attendance: _____

Is Borough Assistance Required: _____ Yes _____ No

In what form: _____

Date request received: _____

Request: _____ Approved _____ Denied

Date applicant notified: _____ by: _____