SUMMER PLAY STREET APPLICATION

This application is a request for the below mentioned block to be designated a Summer Play Street for July and August. If this application is approved, the below block may be closed between the hours of 8AM and 5PM, up to five (5) days per week, Monday through Friday, for the purpose of recreational activities for school age children, organized and sponsored by the organization named below. The organization shall be responsible for physically closing the street, ensuring that barriers remain in place during the Play Street hours, and opening the street to regular traffic use on time, as well as ensuring the welfare and safety of its participants. This Play Street must be supervised by the two adults named below, one or both of whom are members of the sponsoring organization.

LOCATION
Borough____________ Community Board_____
Street_____________________ Between ____________________ & _______________________
Play Street Days: ________________ Play Street Times: ________________

- Was this block a Play Street last summer? ___Yes ___No
- Was a request made last year for a Play Street on this block? ___Yes ___No
  o If so, was last year's request denied? ___Yes ___No
- Is the block being requested within five blocks of a park? ___Yes ___No
  o (If YES, please state why you believe this park is not an adequate substitute for the location being requested for a Play Street.)

- Has a representative from the sponsoring organization done a site inspection of the area being requested? ___Yes ___No
  o If YES, on what date ________________
  (Please note: A site inspection must be done by the sponsoring organization before an application will be reviewed)
• Please confirm that the following information is accurate (please check the box to confirm):

  □ The street in question is not a two-way street and does not have high traffic volumes
  □ The street in question is not on a bus route
  □ The street in question is not adjacent to a hospital
  □ The street does not have commercial establishments, hotels, public buildings, or other activities that would be curtailed or adversely affected
  □ The street in question does not have scaffolding present on it
  □ The street in question does not have construction present on it
  □ The street in question does not have tripping hazards or visible grade changes present on it

PROGRAMMING
How will you program the site?
1. _______________________________________________
2. _______________________________________________
3. _______________________________________________
4. _______________________________________________
5. _______________________________________________

SPONSOR
Sponsoring Organization ______________________________________

Name of Chairperson (print) ________________________ (sign)___________________________

Address _______________________________ (Phone/Cell) ______________________________

Persons responsible for supervision of recreation

Name__________________________________ Name(2)____________________________

Address________________________________  Address(2)__________________________

Phone/Cell______________________________ Phone/Cell(2)_________________________

ADDITIONAL INFO
Please include a block petition with a majority of the blocks residents’ signatures with this application (to be confirmed by the Community Board)

PLEASE NOTE VENDORS ARE NOT PERMITTED AT A SUMMER PLAY STREET.