



Darien Police Department

25 Hecker Avenue
 Darien, CT 06820-5398
 Tel: (203) 662-5300 Fax: (203) 656-1609

Block Party Request

For DPD Use
Date Received: _____
Approved: Y N
Approved/Denied By: _____
Date Notified (if denied): _____

STREET TO BE CLOSED		IF ONLY A SECTION OF THE STREET IS TO BE CLOSED GIVE HOUSE NUMBERS OR CROSS STREETS			
DATE OF EVENT	START TIME	END TIME	RAIN DATE (IF APPLICABLE)	START TIME	END TIME

CHAIRPERSON	ADDRESS	PHONE NUMBER
	EMAIL ADDRESS	

It is necessary for each property owner to sign the attached waiver, agreeing to indemnify and hold the Town harmless for any actions resulting from the party. This completed form must be returned to the Darien Police Department no later than seven (7) days prior to the event.

Waiver of Liability

I hereby indemnify and save the Town of Darien, its officials, officers, agents, employees and servants and the residents of (*street*) _____ harmless from any loss, claim, cost or damage that may arise out of my failure to comply with any laws or regulations of the United States of America, the State of Connecticut, the Town of Darien or their respective agencies, as well as any negligence or intentional act on my or on the part of any member of my family, in connection with the (*street*) _____ Block Party planned for the date of _____ from the hours of _____ to _____, with a rain date (if applicable) of _____.

Other Information/Equipment Requested:
