

| AREA BELOW FOR CITY USE |                  |                    |  |
|-------------------------|------------------|--------------------|--|
| DEPARTMENT              | DATE<br>REVIEWED | APPROVED<br>Y or N |  |
| MAYOR                   |                  | 7 51 17            |  |
| FINANCE DIRECTOR        |                  |                    |  |
| PUBLIC WORKS DIRECTOR   |                  |                    |  |

<sup>\*</sup> The City of Wenatchee may require a bond if it is anticipated that we might have to remove debris, litter, or paper from the street.

## STREET CLOSURE COST WAIVER APPLICATION FORM

| Applicant/Organization Contact Information:   |                  |                        |
|---|------------------|------------------------|
| ORGANIZATION/CHAIRPERSON:   |                  |                        |
| EMAIL:  |                  |                        |
| MAILING ADDRESS:  |                  |                        |
|   |                  |                        |
| PHONE NUMBER:   |                  |                        |
| Is your organization non-profit?  | □Yes             | □No                    |
| Is this event a repeat of prior events?   | ☐Yes             | □No                    |
| If yes, do you have a traffic control plan on file with the of the prior event(s)?  | city that will r | remain the same as     |
| Please describe your plan for trash removal: *  |                  |                        |
|   |                  |                        |
| Can your organization have street closures occur during the l<br>Monday-Friday?   | hours of 7:00    | am – 3:00 pm,<br>□ No  |
| Does your event provide hotel room occupancy?   | □Yes             | □No                    |
| Are you coordinating with the Wenatchee Valley Chamber?   | □Yes             | □No                    |
| If yes, please provide hotel impact and evidence of Chan  | nber coordin     | ation?                 |
|   |                  |                        |
| Please also provide evidence of neighborhood notification (a list of addresses notified).   | copy of the      | notification and a     |
| By signing, applicant confirms the statements above are understands conditions of the event (as stated above) may not a waiver is permitted but the conditions stated above do no reinstated. City will notify of waiver within 21 days of receipt. | warrant a wa     | aiver. In addition, if |
| Applicant Signature   |                  |                        |

Date