Street/Parking Lot Closure Notification Signature Form

To the City of Hood River

This form must be completed and returned to the City Recorder 30 DAYS prior to event

The undersigned, being all the occupants of businesses/residences having access on the street(s) and/or parking lot considered for closure, hereby consent to closure of the following street(s) and/or parking lot or have been notified.

Street(s) of Closure:
Parking Lot of Closure:
Date(s) of Closure:
Hours to be Closed:

nouls to be closed.		
Print Name		
or Name of Business	Signature (business owner or manager)	/ Phone or Email
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