



# City of Geneva

## Street Closure Request

47 Castle Street  
 Geneva, NY 14456  
<http://visitgenevany.com/events>  
 Office: 315.789.5005  
 Email: etoner@geneva.ny.us

1. Neighborhood/ Organization Name:	
2. Event Contact:	Name:
	Day Phone:
	Cell Phone:
	Email:
3. Event Date(s) & hours of closure:	
4. Street(s) requested for closure:	
4. Describe in detail the purpose and intent of street closure:	
5. Anticipated number of barricades needed: (1-2 per street end)	
6. Anticipated number of cones needed:	
7. Anticipated signage needed:	

In addition, the User(s) agrees to indemnify and hold harmless the City of Geneva, city elected and appointed officials, administrators, and all other city employees, volunteers or representatives, and all persons and bodies corporate acting for or on behalf of them, against all liability, claims, demands, actions, suits, damages, proceedings, costs and expenses (including reasonable attorney fees) whatsoever (including injury to persons and damage to property) for which they may be or become liable directly or indirectly arising out of the use of city premises by the User(s) (or the servants, agents or invitees of the User's)), and for such further sums in excess of those contained in any insurance policy procured by User(s) relating to the use of the city premises or for such amounts as may not be payable under any such insurance policy.

\_\_\_\_\_

Applicant Signature

\_\_\_\_\_

Date