



# Block Party Application

## POLICE DEPARTMENT

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Event Name: \_\_\_\_\_

Event Location: \_\_\_\_\_

Event Date: \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Number of Adults: \_\_\_\_\_ Number of Kids: \_\_\_\_\_ Number of Animals: \_\_\_\_\_

Brief Description of Event:

Number of barricades requested:

Zero     One     Two

Would you like a police officer to visit your party?\*

Yes     No

\*If requested, we will try to provide an officer to visit your party during the time frame you have listed above. Due to the nature of police work, we are unable to guarantee a visit.

Representative's Name: \_\_\_\_\_

Representative's Phone: \_\_\_\_\_ Representative's e-Mail: \_\_\_\_\_

Representative's Address: \_\_\_\_\_

Submit Application to:

**Shakopee Police Department**

475 Gorman St.

Shakopee, MN 55379

or

email to [police@ShakopeeMN.gov](mailto:police@ShakopeeMN.gov)

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For Office Use Only

Approval \_\_\_\_\_

Date \_\_\_\_\_