Resolution no.
cc-9910-727
ordinance no
845-98

CITY OF LAWNDALE
PETITION FOR STREET CLOSURE
FOR EVENT PURPOSES

I , the undersigned, am aware that_____
Will be closed on_____, 200__ from_____ to_____. I further understand that the above will be closed by:_____
(name of the organization, group/organization) in order to hold_____
(name of the event).

I also understand that for approval, 80% must agree to the closure. Questions/concerns can be directed to the Municipal Services Department @ (310) 973-3220.

Print Name	**Business Yes/No**	**Address**	**Phone Signature**	**Agree to closure Yes/ No**