City of Portland Street Closure Request Form

To request a street closure from Portland City Council, please complete and submit to: Lori Phillips, Clerk Treasurer; 321 North Meridian Street; Portland, IN 47371 or email to: cityclerktreas@thecityofportland.net. Any questions, you may contact me at 260-726-9395 x224.

CONTACT INFORMATION	
Group / Organization Name:	
Contact Person:	
Telephone:	
EVENT INFORMATION	
Brief Description of Event:	
Day and Date Closure Requested:	
Time of Closure:	
Street:	
(Note: Please be sure to include adequate	time for set-up and clean-up of the event)
BUSINESSES THAT MAY BE AFFECTED BY TH	IE STREET CLOSURE
HAVE YOU CONTACTED THE BUSINESSES THE	HAT MAY BE AFFECTED BY THE CLOSURE
FEEDBACK FROM THE BUSINESSES	
DATE REQUEST TO BE PRESENTED TO PORT	LAND CITY COUNCIL:
PLEASE PRESENT THE REQUEST ON MY BEH	HALF: []YES []NO
OUR GROUP WILL PRESENT THE REQUEST:	[]YES []NO
Office Use Only	
Date Approved	Date Street Department Notified