

Permit Application: Block Event

Definition: A temporary gathering of people in the street or an alley. This permit is for large and small commercial block events. A large block event is for 2,500 people or more. You can find the [permit application](#) for a Residential Block Event or National Night Out on our website.

1. Application Requirements

1. Complete the application and include all the requirements listed below. Incomplete applications may be returned.
2. There is a [fee](#) for each Block Event Permit. You can pay by
 - Cash:** Drop off your application at our office.
 - Check:** Mail or drop off your application at our office.
 - Credit Card:** Mail, drop off or email your application to businesslicenses@minneapolismn.gov. **Do not add your credit card information on this application.** We will call you to securely charge your credit card.
3. \$500 Security Deposit: Cash or certified check made payment to Minneapolis Finance Department. The security deposit check is to be separate from the permit fee.
4. [Certificate of Liability Insurance](#) (Sample Form #1): Attach a copy.
Ask your Insurance Agent to provide this with general liability premises and operations coverage:
 - \$300,000 for an individual claim and
 - \$1,000,000 for multiple claims of personal injury or death.
 - The applicant and the City must be Additional Insured on the liability policy.
5. Site Map: Attach a [map](#) with:
 - a. Street names
 - b. Tent and stage locations
 - c. Barricades and contact person for barricades
 - d. Garbage and recycling container locations
 - e. 14 foot clear drive aisle
 - f. LP tank locations
 - g. Fire department connections and/or fire hydrant locations
 - h. Detour plan
 - i. Parking meter ID numbers for hooding purposes. Call 612-673-5750 to make required arrangements.
6. [Special Events Security Plan](#) (Form #2): Attach a copy. If there are over 5,000 attendees, a Medical/EMS plan review is required. Contact Hennepin EMS Special Operations at ems.events@hcmcd.org or (612) 873-5678.
7. [Recycling Plan](#) for large block events, parades, and races. Attach a copy.
 - N/A. Event is not a large block event, parade, or race.
8. Attach a copy of the [Notification Letter](#) sent to your [City Council Member](#), [Neighborhood Organization](#), and [Business Association](#).
9. Neighborhood Approval Documentation (Form #3): Attach a copy.
10. If you send this application less than 60 days before the event, you must include a Statement of Hardship.
11. An Amplified [Sound Permit](#) is required.
12. If you sell or give away food or beverage, submit the [Event Food Sponsor Permit application](#) and [Short Term Food Permit](#) applications at least two weeks before the event. You must meet the [Green To Go](#) packaging requirements. This is not required. We are not selling or giving away food.

2. Background Information

Large Block Event (>2,500 people)

Small Block Event

Name of Organization (Legal Name)

Name of Event

Organization Address

Address to Return the Security Deposit

Event Contact Person

Email Address

Cell Phone #

3. Event Information

Date of Event

Rain Date (Next Day Only) Yes No

Time of Event (This includes street closure set up and take down.)

From No earlier than 6:00 p.m. on weekdays. No earlier than 8:00 a.m. on weekends.

To No later than 10:30 p.m. on weekends and weekdays.

Time of Entertainment: From To

Describe all types of entertainment/activities:

Number of People Expected

Ward:

Public Property Private Property

Public Event Private Event

Street Closures

Let us know which street(s) you will use for your Block Event. You may need to close more than one street. Here is an example:

I want to close this street: Saratoga Avenue between this (*cross street*) Lyndale Ave S and this (*cross street*) Hennepin Ave S.

Street Closure 1: I want to close this street: _____ between this (cross street) _____ and this (cross street) _____.

Street Closure 2: I want to close this street: _____ between this (cross street) _____ and this (cross street) _____.

Street Closure 3: I want to close this street: _____ between this (cross street) _____ and this (cross street) _____.

Will alcohol be served at the event? Yes No If yes, who will monitor the sale of alcohol?

Outdoor cooking? Yes No

If yes, who is cooking?

What are you cooking?

Are you selling anything other than food? Yes No If yes, please describe.

4. Additional Permits – Check all that apply.

Questions: Contact Inspector Phil Schliesman at philip.schliesman@minneapolismn.gov or 612-673-3907.

- Alcohol:** No sale or drinking of alcohol without a temporary [liquor, wine, or beer permit](#). Call the Licenses Division at 612-673-2080 or email businesslicenses@minneapolismn.gov.
- Animal Permits:** Call Minneapolis Animal Care and Control, 612-673-6222.
- Barricades:** Contact a bonded/insured barricade/sign company for redirecting vehicle and pedestrian traffic.
- Electrical Permit** for temporary service and outlets. Call the State of Minnesota 612-866-1979 or 1-800-342-5354.
- [Fire Works and Fire Related Permits](#):** Call the Minneapolis Fire Department at 612-673-3000 or 311.
- [Heating \(Mechanical\) Permit](#)** for temporary heat or air conditioning. Call the Inspections Division, 612-673-3000 or 311.
- MN DOT:** Call 651-234-7911.
- MTC Transit Detours:** Call 612-349-7400.
- [Parades](#):** You must submit a map of the route. Call the Transportation Division 612-673-2222.
- Park Board Permits:** Call 612-230-6441.
- Plaza Permit** is required for Peavey Plaza, Loring Greenway, or Chicago Mall. Please contact Green Minneapolis at info@greenminneapolis.org.
- [Plumbing and Gas](#)** inspections for potable water, gas burners and discharges to sewers. Call the Inspections Division at 612-673-3000 or 311.
- [Races](#):** Call Public Works at (612) 673-5750 or (612) 673-3000 or 311.
- [Recycling Containers](#)** may be rented for a fee from Minneapolis Solid Waste and Recycling. You must request these ten days in advance.
- [Special Event Permit](#)** for Amusement Buildings, Bonfires, Canopies, Exhibits/Tradeshows, Fireworks, Liquid/Gas filled Vehicle in an Assembly Area, LP/Propane, Open Flames/Candles in an Assembly Area, Private Hydrants, Rooftop Heliports, Temporary Assemblies, and Tents/Temporary Membrane Structures. Call 612-673-3000 or 311.
- Street Closures** for block events, parade routes, detours, etc. Call Transportation and Parking Services Division at 612-673-5750.
- [Temporary Expansion of License](#):** On-Sale Liquor, Wine or Beer businesses may use unlicensed portions of their business (indoor or outdoor), provide extra entertainment, and/or stay open later than regular hours. Call 612-673-2080 or email businesslicenses@minneapolismn.gov.
- [Temporary Extended Hours License](#):** Businesses that do not sell or serve alcohol may stay open later than regular hours. [Short Term Food](#) and [Event Food Sponsor Permits](#) may be required. Call 612-673-2080 or email businesslicenses@minneapolismn.gov.
- Temporary Toilets:** You must use a state of Minnesota licensed company.
- Tents:** Building and Fire Inspectors must approve your detailed plan. Call 612-673-3000 or 311.
- Traffic Control:** Call 612-673-3942 or Beth.Mota@minneapolismn.gov. Hourly fees are charged.

5. Verification

The City of Minneapolis uses the information on this application to determine qualifications for a license. You are not legally required to provide this information. If you refuse, we cannot approve your application. After we approve your license, all information is public (MN Statutes, Chapter 13).

A signature is required.

I have read and agree to the [Terms and Conditions](#) for electronic signatures, records and payment.

I, (print name) _____, certify or declare under penalty of perjury under the laws of the State of Minnesota that the information on this application, checklist, and attached documents is true and correct. All information is subject to verification by the State of Minnesota. I understand that false information may result in the denial, suspension, or revocation of my business license.

By typing your name, you are electronically signing this application.

Signature of Applicant _____ Title _____ Date _____

6. Review and Approval – For Office Use Only

Public Works Director Approval _____ **Date** _____
Restrictions

Police Chief Approval _____ **Date** _____
Restrictions

7. Additional Information

1. You cannot transfer your permit to any other person, organization or location.
2. **Security Deposit:** If you follow all the block event requirements, the Director of Public Works will refund your security deposit. If you do not have recycling containers or clean up the area within three hours, you may lose your security deposit.
3. **Street Closure:** You must block both ends of the street. You are responsible for the placement, maintenance and removal of the barricades. You must pay all costs for traffic control measures and personnel.
4. **Damages:** The applicant will indemnify the City for all damages that may result to City property as a result of the block event, including any part of the street.
5. **Denial:** A block event permit may be denied for a lot of reasons. This can include construction, too close to a hospital or fire station, or another event within four blocks. A permit cannot be approved for snow emergency routes, highways, bus routes and streets with traffic lights unless traffic can be moved to other nearby roads.
6. **Revocation:** We cancel permits if an emergency threatens life or property. We also cancel permits for violation of the block event rules and if your block event is different from the information in your application.
7. For reasonable accommodations or alternative formats, please call us at 612-673-2080 or send an email to businesslicenses@minneapolismn.gov. Individuals who are deaf or hard of hearing can use a relay service by calling 311 at 612-673-3000.
8. Information in other languages: Para asistencia 612-673-2700. Rau kev pab 612-673-2800. Hadii aad Caawimaad u baahantahay 612-673-3500.

City of Minneapolis

Requirements for Insurance Certificates

Certificate of Liability Insurance

#1

Certificate cannot be pending, binder or TBA.

The Legal/Corporate Name must match exactly (word for word) to the Approved Licensee Name (including Inc, or LLC), Trade Name (DBA) and address of premises.

PRODUCER Agency Address City, State, Zip	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.
INSURED	INSURERS AFFORDING COVERAGE INSURER A: _____ INSURER B: _____ INSURER C: _____ INSURER D: _____ INSURER E: _____

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> _____ <input type="checkbox"/> _____				EACH OCCURRENCE \$ _____ FIRE DAMAGE (Any one fire) \$ _____ MED EXP (Any one person) \$ _____ PERSONAL & ADV INJURY \$ _____ GENERAL AGGREGATE \$ _____
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON - OWNED AUTOS <input type="checkbox"/> _____				PRODUCTS - COMPI/OP AGG \$ _____ COMBINED SINGLE LIMIT (Ea accident) \$ _____ BODILY INJURY (Per person) \$ _____ BODILY INJURY (Per accident) \$ _____ PROPERTY DAMAGE (Per accident) \$ _____
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> _____				AUTO ONLY - (Ea Accident) \$ _____ OTHER THAN AUTO \$ _____ ONLY: AGG \$ _____
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION				EACH OCCURRENCE \$ _____ AGGREGATE \$ _____
A	WORKER'S COMPENSATION AND EMPLOYER'S LIABILITY				X/WC STATUTORY LIMITS / OTHER E.L. EACH ACCIDENT \$ _____ E.L. DISEASE - EA EMPLOYEE \$ _____ E.L. DISEASE - POLICY LIMIT \$ _____
	OTHER DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS:				

Original signature or stamp of agent

ADDITIONAL INSURED; INSURER LETTER
 CERTIFICATE HOLDER
 City of Minneapolis
 Licenses and Consumer Services
 505 Fourth Ave. S., Room 220
 Minneapolis, MN 55415
 AUTHORIZED REPRESENTATIVE

Applications will be returned if requirements are not complete.

Special Events Security Plan

Event Name	Date(s)	
Safety Contact Person		
Name _____ Cellphone _____ Email _____		
Describe your Security Personnel. Attach additional sheets if necessary.		
1. Staff: Contracted licensed security agents? Off-duty police officers? Employees or volunteers?		
2. Duties:		
3. Philosophy: Respectful enforcement? Escorting away from the premises? Working in teams?		
4. How will you address disorderly guests? Illegal behaviors? Excessive noise?		
5. Do you have reporting procedures for incidents? Both minor and serious?		
6. What type of training is provided for employees/volunteers? <input type="checkbox"/> N/A – no employees or volunteers		
7. Describe uniform/logo shirt for employees/volunteers. <input type="checkbox"/> N/A – no employees or volunteers		
<input type="checkbox"/> Employees/ Volunteers How Many _____	<input type="checkbox"/> Contract Security Personnel How Many _____ Contact Person _____ Telephone Number _____ Security Company _____	<input type="checkbox"/> Off Duty Minneapolis Police How Many _____ Contact Person _____ Telephone Number _____
Additional information is available on our website: Event Security Requirements		

Emergency Procedures

First aid on site? Yes No

Police on site? Yes No

Medical personnel on site? Yes No If yes, describe.

Evacuation Procedures

Crowd Management Plan

Internal Communication Plan for your staff and volunteers during the event

Reviewed by

Date

Approved Returned for Additional Information

Comments

Neighborhood Approval Documentation

75% of the household and business owners on the street(s) next to the block event must approve.

Event Name and Description _____		
Date _____	Time _____	
Sponsor's Name _____	Address _____	Telephone _____

	Name	Street Address	Approve	Deny	Notified Only
1.	_____	_____			
2.	_____	_____			
3.	_____	_____			
4.	_____	_____			
5.	_____	_____			
6.	_____	_____			
7.	_____	_____			
8.	_____	_____			
9.	_____	_____			
10.	_____	_____			
11.	_____	_____			
12.	_____	_____			
13.	_____	_____			
14.	_____	_____			
15.	_____	_____			
16.	_____	_____			
17.	_____	_____			
18.	_____	_____			
19.	_____	_____			
20.	_____	_____			

Copy and attach more sheets if necessary.