



**TOWN OF HUNTINGTON HIGHWAY OFFICE**

30 Rofay Dr., Huntington, NY 11743  
Tele. 631-351-3077, ext 116 Fax 631-499-3512

Peter S. Gunther  
Superintendent of Highways

**BLOCK PARTY**  
**AGREEMENT FORM**

**ALL REQUIRED FORMS MUST BY COMPLETED 3 WEEKS PRIOR TO EVENT.**

**The Organizer MUST comply with the following before a permit will be issued:**

- This agreement form must be signed and notarized.
- A Block Party Signature Form (below) with signatures from all the residents within the cordoned off area, must be completed.
- The organization is responsible to determine the number of barricades and cones required. Please complete the barricade/cone form and attach with your application

The Town of Huntington is granting its consent to:

Hereinafter referred to as the "Organizer" to conduct its activities on the streets and highways of the Town and the "Organizer" requesting said consent hereby agrees that he/she shall indemnify and hold harmless the Town of Huntington, its agents, volunteers, and employees in the event that any claims of personal injury or property damage is made arising out of the activity being conducted by the "Organizer."

It is further agreed to and understood that the Town of Huntington is in no way involved with the "Organizer" herein, nor the activity in question, other than to have consented to permit the "Organizer" named herein to specified use of the locations outlined in the permit for a limited period of time. \_\_\_\_\_ **INITIAL.**

Organizer Name: \_\_\_\_\_ Date of Event: \_\_\_\_\_

**MUST BE SIGNED BY ORGANIZER, IN THE PRESENCE OF NOTARY PUBLIC AND RETURNED IN ORDER TO RECEIVE A PERMIT.**

AGREED TO AND UNDERSTOOD BY: \_\_\_\_\_  
**SIGNATURE**

Date: \_\_\_\_\_  
**PRINT NAME**

**The undersigned represents that he/she is the Organizer requesting this permit above described and understands that they are bound by the terms of the Agreement.**

State of New York

\_\_\_\_\_ ss

County of Suffolk

On the \_\_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_ before me, the undersigned, a Notary Public in and for said State, personally appeared

\_\_\_\_\_ personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity and that by his/her signature on the instrument, the individual acted, executed the instrument.

\_\_\_\_\_  
**Notary Public**