



Request for Street Closure

(Festival Street Closures are scheduled through the Parks and Recreation Department)

Requests must be submitted at least 10 business days prior to event date to:
City Recorder Lilly Alarcon-Strong at lalarcon-strong@hermiston.or.us or City Hall.

Requester Name: _____
Date Submitted: _____ Address: _____
Phone #: _____ Email Address: _____

Date(s) of closure: _____ Duration of closure: _____ to _____
Event or reason for closure: _____

Description of Street(s) to be blocked off:

1. _____
Street Name From To
2. _____
Street Name From To
3. _____
Street Name From To
4. _____
Street Name From To

Attach map indicating requested closure areas.

-----****For City Staff Use Only****-----

Date Received: _____ **Route to: City Recorder** _____

Reviewed by:

- Police Chief- Comments: _____

- Street Superintendent- Comments: _____

- City Manager- Comments: _____

- Approved**
- Disapproved**
- City Recorder- Date City Council & Requester Notified of decision: _____

RETURN TO STREET SUPERINTENDENT UPON FINAL APPROVAL