

# Block Party or Street Closure Request Instructions

- Complete the **Request for Street Closure Form**
- Requestor **MUST** also provide the following documentations:
  - A map of the affected area that will be within the closure and mark where barricades are needed
  - A Signature Sheet that is signed by **ALL** residences within the affected area. This sheet must include the residents Printed Name, Address and Signature acknowledging their notification and approval of the road closure. The statement at the top of the Signature Page must also be completed.
- Request must be completed and all documentation submitted no later than **five full** Business days before the event.

Please return the request form, signature sheet and map to:

Bedford Police Department  
Community Relations Division  
2121 L. Don Dodson Dr. Bedford, TX 76021  
817-952-2444

Or email to:

[Amanda.Freeman@bedfordtx.gov](mailto:Amanda.Freeman@bedfordtx.gov)

# Bedford Police Department

## Request for Street Closure Form

Major roads can't be affected

Location of Closure: \_\_\_\_\_

Purpose for Closure: \_\_\_\_\_

Day / Date of Closure: \_\_\_\_\_

Time for Closure: From: \_\_\_\_\_ To: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Contact Number: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

*\*Request must be completed and all documentation submitted not later than **five full** Business days before the event.*

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### *Official Use Only*

Received By: \_\_\_\_\_ Date received: \_\_\_\_\_

Map Provided: Yes \_\_\_ No \_\_\_ Signature sheet Provided: Yes \_\_\_ No \_\_\_

Notes: \_\_\_\_\_

### **Patrol Division - Email information to patrol shift for affected date.**

Approved: Yes \_\_\_ No \_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

### **Fire Notification - Email information to DC James Richardson.**

Made by: \_\_\_\_\_ Date / Time: \_\_\_\_\_

# Signature Sheet

WE AGREE TO HAVE THE BEDFORD POLICE PROVIDE BARRICADES BLOCKING:

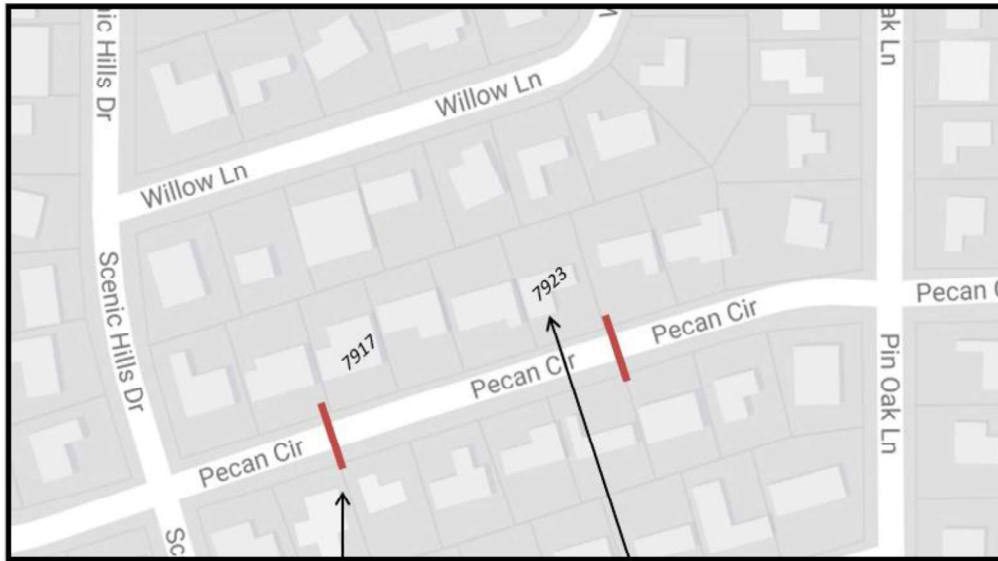
\_\_\_\_\_ street(s)/block numbers

ON \_\_\_\_\_ FROM \_\_\_\_\_ - \_\_\_\_\_  
date time

PRINT NAME	ADDRESS	SIGNATURE

Use additional sheet(s) if needed

## Example of Map:



Place a line indicating where  
the barriers will be

Label the range of house  
numbers that will be effected