**Play Streets Application Form**

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| Organisation and/or Name:  |
| Address:  Post Code: | Daytime phone no:  |
| Contact Name and number on day of event: |
| Email: |

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| --- | --- | --- | --- |
| Start Date(s): | End Date(s):  | Road closure start time(s): | Road closure end time(s): |

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| --- |
| Name of road to be closed: |
| Consultation:Businesses consulted: Yes [ ]  No [ ]  Planned [ ]  Result: Objections [ ]  Agreement [ ] Residents consulted: Yes[ ]  No [ ]  Planned [ ]  Result: Objections [ ]  Agreement [ ]  |

**Declaration**

I understand that, as the event organiser, I am the person responsible for the Play Street event. Therefore, I will ensure that appropriate risk assessment and event plan will be in place.

I indemnify Bradford Council against all claims for accident, damage or injury caused by, or in consequence of the Play Street event named.

I understand that if any litter / rubbish remains in the area as a result of the event that there will be a charge imposed on the event organiser should the Council have to remove it.

I have read and understand fully the Play Street guidance notes provided to me and will adhere to all responsibilities/duties required by Bradford Council.

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| Name:  | Signature:  | Date: |
| Email the completed form to:rc@bradford.gov.ukDanny Stewart – 01274 43 7579 |