

MEMORANDUM

TO: Affected Neighborhood Association(s)
FROM: Company Name
SUBJECT: Proposed Road Closure on Name of Street

DATE:

Description of your event and road closure.

Summary of Event Details:

Name of Event:
Date of Event:
Event website:
Time event begins:
Time event ends:
Approximate number of attendees:

Summary of Proposed Closure:

How Event Will Affect Traffic and Parking:

Contact Information:

Applicant Name:
Company Name:
Cell Number:
Email Address:

For additional information concerning the actual event at this location, please contact the Promoter listed, or visit the City of Austin Special Events website at <http://austintexas.gov/citystage> or call 512-974-1000.

Signature Line