

# UPPER DARBY TOWNSHIP

100 Garrett Road ▪ Upper Darby, PA 19082-3135

Edward Brown  
*Mayor*

Crandall O. Jones  
*Chief Administrative Officer*



## Members of Council

Hafiz Tunis, Jr., President - 7th Dist  
Myron McNeely - 5th Dist (appointed)  
Michelle Billups, Secretary - At-Large  
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Danyelle Blackwell - 4th Dist  
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Marion Minick - At-Large  
Matt Silva - At-Large  
Meaghan Wagner - 1st Dist  
Laura Wentz - At Large

## **GUIDELINES FOR SEEKING A STREET CLOSURE PERMIT** **IN UPPER DARBY TOWNSHIP**

1. The attached STREET CLOSURE PERMIT REQUEST form and STREET CLOSURE PETITION must be completed in their entirety and submitted to the Upper Darby Township Department of Leisure Services at the above address or emailed to [recreation@upperdarby.org](mailto:recreation@upperdarby.org), no less than four (4) weeks prior to the event date.
2. STREET CLOSURE PERMITS cannot be issued for private events such as, but not limited to, wedding receptions, birthday parties, graduations or family reunions. We suggest these events apply for a PARK PERMIT per the conditions of those permits. STREET CLOSURE PERMITS also cannot be issued to create venues for artist markets, farmers markets, or other for-profit ventures. These events can apply for a SPECIAL EVENT PERMIT per the conditions of those permits.
3. A SPECIAL EVENT PERMIT will be necessary if live bands or amplified music are used during the time the street is closed. Failure to apply for this permit will cause the STREET CLOSURE PERMIT REQUEST to be denied.
4. The STREET CLOSURE PERMIT REQUEST and PETITION must name a responsible individual, including a cell phone number, who will be present during the full duration of the event.
5. The STREET CLOSURE PETITION must be signed by at least ninety percent (90%) of the households and/or businesses on the block represented. It must only include one signature per household or business. Please remember to list vacant houses. Each signature must also legibly include:
  - a. The address number of the house, apartment or business
  - b. A printed first and last name
  - c. A current phone number
6. Upper Darby Township reserves the right to check with individuals that signed the PETITION to confirm their knowledge of the planned event.
7. State highways, bus routes and/or emergency routes may not be closed.
8. The Township will permit the closure of an approved street/block only ONCE during the calendar year.
9. Time permitted for street closure is 10:00am to 8:00pm on the day of closure only.
10. The street must remain accessible to first responders in case of emergency. Obstacles (such as inflatables, games, grills, tables, etc.) CANNOT be placed in the middle of the road. If available, Upper Darby Public Works Dept will drop off wooden barricades. If barricades are not available, trashcans, orange cones or caution tape may be used. Do not use vehicles to block an intersection.
11. All trash must be cleared from the street at the conclusion of the event.
12. The Laws of the State of Pennsylvania and the Ordinances of the Township of Upper Darby concerning excessive noise, alcoholic beverage consumption, disorderly conduct, etc. must be adhered to at all times. Fireworks are not permitted at any time. If while the street is closed it is determined that underage drinking was allowed or if the police are called to the street and file a disturbance report, future permits may not be approved.
13. If and when complaints are received regarding the street closure, the Police Department will act accordingly. The Police Department has the right to recommend/advise that due to past Police experience on the petitioned street, no street closure permit should be issued.



Upper Darby Township  
100 Garrett Road, Upper Darby, PA 19082-3135  
**STREET CLOSURE PETITION**



We, the residents of the \_\_\_\_\_ block of \_\_\_\_\_  
(BLOCK NUMBER) (STREET NAME)

request permission to close our block on \_\_\_\_\_. Purpose: \_\_\_\_\_  
(DATE) (TYPE OF EVENT)

Rain date, if needed, will be on \_\_\_\_\_.

	ADDRESS NUMBER	PRINT NAME	SIGN NAME	PHONE NUMBER
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

NAME OF PERSON ON BLOCK RESPONSIBLE FOR EVENT \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

\*\*\* HOW MANY HOUSEHOLDS/BUSINESSES WOULD BE AFFECTED BY THIS CLOSURE? \_\_\_\_\_ \*\*\* **REQUIRED** \*\*\*

\* ONLY ONE SIGNATURE PER HOUSEHOLD \* VACANT HOUSES MUST BE LISTED ALSO \*

\* EVERY SIGNATURE MUST INCLUDED A FIRST & LAST NAME AND A PHONE NUMBER \*



# Upper Darby Township

100 Garrett Road, Upper Darby, PA 19082-3135



	ADDRESS NUMBER	PRINT NAME	SIGN NAME	PHONE NUMBER
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				
32				
33				
34				
35				
36				
37				
38				
39				
40				
41				
42				
43				
44				
45				

Tips to help with proper submission:

- Count all households (including apartments) and businesses on the block and multiply the total number by 90% (.90). The result will be the number of signatures needed on the petition. (example:  $36 \times .90 = 32$  signatures needed)
- Fill in all address numbers in chronological order prior to asking for signatures. Then ask residents to find their number and fill in that line.

Upper Darby Township reserves the right to contact individuals that signed the petition to confirm their knowledge of the planned event.



**Upper Darby Township**  
**Street Closure Permit Request**

Reason for Street Closure Request: \_\_\_\_\_

Block Number: \_\_\_\_\_ Street Name: \_\_\_\_\_

Name of Contact Person(s): \_\_\_\_\_ Cell#: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Event: \_\_\_\_\_ Rain Date (if needed): \_\_\_\_\_

Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Amount of Households/Businesses affected by this closure: \_\_\_\_\_

**Please circle Yes or No to the following questions:**

Have you submitted a copy of the petition, signed by 90% of the households? YES / NO

Will there be Live Music (band, etc)? YES / NO Will there be a DJ? YES / NO

Will there be loudspeakers? YES / NO Will there be Inflatable(s)? YES / NO If yes, how many? \_\_\_\_\_

List Any Other Attention Attracting Devices To Be Used During Event: \_\_\_\_\_

Please list intersections you are requesting to be blocked \_\_\_\_\_

**IMPORTANT INFORMATION REGARDING UPPER DARBY TOWNSHIP STREET CLOSURES**

1. Times permitted for street closure are between 10:00am and 8:00pm on the date of the event.
2. The street must be accessible to emergency vehicles at all times. No major obstacles to be placed in the street.
3. The contact person listed above must be a responsible individual who will be present during the full duration of the event.
4. State highways, bus routes and/or emergency routes may not be closed.
5. Vehicles of any type may not be used to block off any street. Wooden barricades, trash containers, orange cones or yellow caution tape are permitted for this purpose.
6. All trash must be cleared from the street at the end of the event.
7. The Laws of the State of Pennsylvania and the Ordinances of the Township of Upper Darby concerning excessive noise, alcoholic beverage consumption, disorderly conduct, firepits, fireworks, etc. must be adhered to at all times.
8. If during the event, any Laws of the State of Pennsylvania or any Ordinances of the Township of Upper Darby are violated, or if the Police Department is called to the street and file a disturbance report, future permits may not be approved.
9. The Township will permit the closure of an approved street/block only ONCE per calendar year.
10. When possible, the Township will provide barricades for the closing of the street. The barricades will need to be placed and then removed by a resident of the petitioned block at the beginning and end of the event.
11. Permit requests must be submitted to the Township no less than four (4) weeks prior to the event date.

Name of Applicant: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_