

Street Closing Application



NCDOT approval is required for State roadway street closings. Contact the NCDOT Highway Division 1 Division Engineer at (252) 482-8722 for more information.

City Manager's Office
P. O. Box 347
Elizabeth City, NC 27907-0347
Phone: 252-337-6864

Date of Application: _____

(Application must be submitted 60 days prior to requested date)

Requester Name: _____

Business/Organization Name: _____

Address: _____

Phone: _____ **Email:** _____

to close: _____ Street **from** _____ Street **to**

_____ Street **for the purpose of**

on _____ (date) **for the period**

_____ (a.m./p.m.) **until** _____ (a.m./p.m.)

In the closed area will there be:

Food trucks Yes/No

Inflatables Yes/No

Stage Yes/No

Seating area Yes/No

Alcohol Yes/No

5k run/walk Yes/No

Law Enforcement for Security needed Yes/No

If you answered yes to any of the questions above please complete a special events application

List any other activities in closed area not listed above:

