



BROOKLYN COMMUNITY BOARD 9

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2nd Vice Chair

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Executive Secretary

Mayna Legoute
Treasurer

Nicolas Almonor
Member-at-Large

Letwine Mavima
Member-at-Large

SAPO Event ID Number:

Street Closure Signature Form

Name of Event:

Name of Organization:

Location of Event:

Date of Event:

Start Time:

End Time:

Representative Name:

Email:

Phone:

Event Description:

You must collect at least 20 signatures from residents and/or business owners who live/conduct business on the block. If you must receive a signature from a business, **the signature must belong to the manager/director of the business.**

Once collected, please **(e)mail**, or **deliver** this from to our office located at 890 Nostrand Avenue, Brooklyn, N.Y. 11225, or via Infobk09@cb.nyc.gov.

Street Closure Petition Signature Sheet

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