

Special Event Letter of Approval

Licensing Office:
55 North Center Street Mailing
Address:
PO Box 1466
Mesa, Arizona 85211-1466
480-644-2316 Telephone
480-644-3999 Fax
mesaaz.gov/business/licensing



Date: _____

Property Manager or Owner Name: _____

Contact Phone Number: _____

Special Event Name and Location: _____

Requested Closure Date(s) and Time: _____

As property manager/owner for the commercial property address listed above, I acknowledge I have been informed by the promoter of the Special Event that a request to close off the area during the special event has been submitted to the City of Mesa. Possible conflicts or impacts on the surrounding businesses have been addressed.

Signature of Property Manager/Owner