

License Fee (see chart)

\$ 600 (Acct. CLLSPE)

Date Rcvd: 4/3/83

Receipt No. 4873-1

FEES ARE NON-REFUNDABLE

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SPECIAL EVENT APPLICATION FORM

Incomplete applications will not be accepted or will be returned to the applicant. Submitting an application does not guarantee the application will be approved – please speak to the City Clerk for more information. The application fee will be based on the date the City Clerk's Office receives the <u>completed</u> application. For more information please refer to the Special Event Policy or Manual.

PLEASE PRINT CLEARLY!

Information a	bout the person applyin	N 1 — APPLICAI ng to have a spec	in de de d'esta diferio de en		an organizati	on
Name:	Middle Initial Last DOI	rman	Date of Birth:	10/23/194		
Address: \$\psi_20 \tag{7}	J. Prospect 1	the App	pleton, u	Ji 5491	4	
Phone Number: ne	-228-2167		Email Address:	restoroluci	trous 28?	21@gm
920	-208-0167					
	SECTION 2 Information about the	2 – ORGANIZAT	NO 18, NO 18 NO 18 OF THE STORY			101-blo
Organization's Name: S		Nast. P.	roducti	ons Lh		stans Afe He
Organization's Address:	620 N.	Proport	Ave	Appleto	W, WI	54914
Organization's Phone Nur	nber: 720-228-2	162	Organization's	Email/Website: N	estproduc	tions 20
Applicant's Relationship t	o Organization:	LNRV- ((eo.			gnusil
	Na Hadawaya waxeet	ION 3 – EVENT	INFORMATIO	N AMANAMANA		
Name of Event:	NOSH Per-	H				
Event Location:	nes Park	Apple	for, Wi			
Event Date (list each date	if it's a multi-day event):	June	-15.1k.1	7,18		
Event Set Up Time:	D3/4 MB Event Start Time helone	35 Sp 3, 11	e Event End Tim	1 11 1	6pm	
Head of Security's Name	Q - ·	Willia	m 5,00	orrhou	920-22	8-2167
	nce (Participants/Attende		per Bn	<u>y</u>		
Non-poort		28Kral +	e event has occur	red before, etc.):	me ES	pillt &
5 Hales	elething.	hospital (anc, Good	, Transportati	my reds	in -



The applicant is responsible for contacting all necessary City departments and for obtaining all necessary reservations, permits, licenses and variances

<u>HEALTH DEPARTMENT- (920) 832- 6429</u>			
1. Will food be prepared and/or served at the event?	Yes	No	Action to be taken by applicant: If yes, contact the Health Department for permitting requirements and for safe food handling tips.
2. Will there be a band or amplified music/noise?	\square		If yes, contact the Health Department for a variance and more information.
3. Will there be portable restrooms?			If yes, review guidelines on portable restrooms available in the Special Event Policy and Manual.
FIRE DEPARTMENT- (920) 832-5810			•
1. Will the event be held indoors?	Yes	No	Action to be taken by applicant: If yes, contact the Fire Department for more information.
2. Will a tent or any other temporary structure be erected?		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	If yes, contact the Fire Department for Information
3. Will there be a tent larger than 200 square feet?4. Will fireworks/pyrotechnic be used during the event?			about submitting a structure plan. If yes, contact the Fire Department for a permit. If yes, contact the Fire Department for a permit.
DEPARTMENT OF PUBLIC WORKS - (920) 832-5580	•		
Are you requesting street closure? Name of barricade company	Yes	No \begin{align*} \text{ \ \text{ \	Action to be taken by applicant: If yes, your barricading contract provider will be required to submit a Traffic Control Plan to the
Did you include a detailed map/diagram of the event location and route (if applicable) with this application?			Department of Public Works. Be sure the event map/diagram is detailed, including showing all turns and the number of traffic lanes to be
3. Are you requesting parking meters to be bagged?	\square	7000 C-1	used. If yes, a list of meters must be provided to the Department of Public Works.
PARKS, RECREATION & FACILITIES MANAGEMENT—	- (920) 8	32-59	905
	Yes	No	Action to be taken by applicant:
1. If the event will be in a park have you reserved the park?			If no, contact Parks, Recreation and Facilities Management for a reservation.
2. Will there be rides, dunk tanks and/or inflatables at the event?	LX		If yes, contact Parks, Recreation and Facilities Management for more information.
POLICE DEPARTMENT - (920) 832-5500			-
Do you have a plan for medical emergencies that may occur during your event?	Yes	No	Action to be taken by applicant: If no, contact the Police Department for assistance.
2. Is security needed for the event?	\mathbf{A}		If yes, contact the Police Department for assistance
3. Are you requesting any special parking restrictions?	À		defining your safety/security plan. If yes, contact the Appleton Police Department for more information.
CITY CLERK'S OFFICE (920) 832-6443			
1. Will alcoholic beverages be served/sold at the event?	Yes	No	Action to be taken by applicant: If yes, contact the City Clerk to obtain a Temporary Clas "B" license.
2. Do you owe money for past events?		X	If yes, contact the City Clerk – your application may not be accepted,
RISK MANAGEMENT - (920) 832-6300			·
Do you have the proper insurance for your event and have you provided your certificate of insurance to the City?	Yes	No	Action to be taken by applicant: If no, contact the City's Risk Manager.

SECTION 5 – ADDITIONAL INSURED REQUIREMENT

For events that involve more than 250 people, if a street closure is requested or if structures are brought onto public premises; the event holder agrees to list the City of Appleton, and its officers, council members, agents, employees, and authorized volunteers as an additional insured on the event holder's general liability insurance policy. Certificates of insurance displaying this additional insured status must list the following as the certificate holder: City of Appleton, Attention: Risk Manager, 100 North Appleton Street, Appleton, WI 54911.

Signature of Applicant:

Date: 4- 3- 20

Print Name:

SECTION 6 – INDEMNIFICATION AND DISCLAIMER

Please read carefully before signing!

By signing below, I certify that I am at least 18 years of age, that I have read and understand the Special Event Policy, and that I agree to the terms and conditions contained in the Special Event Policy. My signature further confirms (i) that I understand the filing of this application does not ensure the issuance of a Special Event License, (ii) that the Special Event License Fee is non-refundable pursuant to the terms of the Special Event Policy, (iii) I will be responsible for ensuring the event and event participants comply with all applicable city ordinances, traffic rules, park rules, state health laws, fire codes and liquor licensing regulations and any other applicable laws, rules and regulations including the Special Event Policy, (iv) that fees for park facilities, food sales permits, tent and fireworks permits, etc., are in addition to the Special Event License Fee, (v) that I am authorized to apply for this Special Event Licensed on behalf of the organization holding the event (if applicable), and (vi) that the information contained in this Application is true to the best of my knowledge. I understand that intentionally providing false or misleading information in this Application may lead to civil or criminal penalties.

INDEMNIFICATION: BY SIGNING BELOW I ACKNOWLEDGE THAT FOR GOOD AND VALUABLE CONSIDERATION, I, THE APPLICANT, ON BEHALF OF MYSELF AND THE ORGANIZATION, IF APPLICABLE, AGREE TO INDEMNIFY, DEFEND AND HOLD HARMLESS THE CITY OF APPLETON AND ITS OFFICERS, OFFICIALS, EMPLOYEES AND AGENTS FROM AND AGAINST ANY AND ALL LIABILITY, LOSS, DAMAGE, EXPENSES AND COSTS, INCLUDING ATTORNEY FEES, ARISING OUT OF THE ACTIVITIES PERFORMED AS DESCRIBED HEREIN, CAUSED IN WHOLE OR IN PART BY ANY NEGLIGENT ACT OR OMISSION OF THE APPLICANT/ORGANIZATION, ANYONE DIRECTLY OR INDIRECTLY EMPLOYED BY ANY OF THEM OR ANYONE WHOSE ACTS ANY OF THEM MAY BE LIABLE, EXCEPT WHERE CAUSED BY THE SOLE NEGLIGENCE OR WILLFUL MISCONDUCT OF THE CITY.

Signature of Applicant:

Date: 43-7023

Submit completed application along with the total fee to: Office of the City Clerk 100 N. Appleton Street Appleton, WI 54911-4799

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EGLIGENCE OR WILLFUL MISCONDOST OF THE CIT	4. 14.2.5073	
Simulatura of Applicants	113200	Date: 4-3-2523
Signature of Applicant:	/	_ bate
Print Name:		_
Williamsubmit comp	han defed application along with the	e total fee to:
· Cer-	Office of the City Clerk	
cent (8)	100 N. Appleton Street Appleton, WI 54911-4799	
-COSTANIA		
Jaylan Scholz		

DEPARTMENT	APPROVE	DENY	ву	REASON (if denied)
ommunity & Economic Development				
ìre				
lealth				
luman Resources (Risk Management)				
egal (Clerk)				
Parks, Recreation and Facility Management				
Police				
Public Works				
/alley Transit				
icense issue Date:	licens	e Number:		

SINGLE DAY EVENT LICENSE FEE -- **Includes \$7 for a Police investigation fee**

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NUMBER OF	SMAII EVENTS	SMAII EVENTS	I ARGE EVENTS ³	1 A RGE EVENTS	SIGNIFICANT	SIGNIEICANIE
DAYS BEFORE	Without Street	With	Without Street	With Street	EVENTS4	EVENTS*
THE EVENT	Closure	Street Closure	Closure	Closure	Without Street	With Street Closure
					Closure	
90+ days	\$57	\$107	\$507	\$707	\$1,007	\$1,507
60-89 days	\$67	\$157	4 09\$	\$757	\$1,207	\$1,707
45-59 days	\$82	\$207	208\$	\$1,007	\$1,657	\$2,507
30-44 days	\$107	\$307	206\$	\$1,007 + Late	\$1,657 + Late Fee ¹	\$2,507 + Late Fee ¹
				9		
11-29 days	\$207	\$407	Application Not	Application Not	Application Not	Application Not
			Accepted	Accepted	Accepted	Accepted
10 days	Application	Application Not	Application Not	Application Not	Application Not	Application Not
	Not Accepted	Accepted	Accepted	Accepted	Accepted	Accepted
Late Fee ¹	N/A	N/A	N/A	\$800	\$800	\$1,500

¹ LATE FEE will be charged for late applications for Large and Significant Events that have been held for the last two consecutive years where nothing has changed, subject to the late fee and the application approval process. If the event has not been held the last two consecutive years or if there is a change to the event from the previous year the application will not be accepted.

² SMALL EVENT = Anticipated attendance of less than 1,000 people.

 $^{^3}$ LARGE EVENT = Anticipated attendance of between 1,000 and 4,999 people.

⁴ SIGNIFICANT EVENT = Anticipated attendance of 5,000 people and over.