STREET USE PERIVI	IT APPLICATION
FOR OFFICE USE ONLY: Permit # Date Submitted	
EVENT INFORMATION Name of Event 4th Annual SCMG Event Organizer/Sponsor Slimey Coud Wo	Film Festival
Event Organizer/Sponsor Slimey Coud Wo	toraycle Gang 1/c
Is Organizer/Sponsor a 501(c)3 non-profit agency?	☐ Yes 吐
If Yes, provide State of Wisconsin Tax Exempt Number	
Address 2026 Yahana Place	
City/State/Zip Wadison W1 537	204-5558
Primary Contact EVIC R Lewis Work Phone 6082440404 E-mail ev / Pouls D WISC - edu	FAX 608 244 0404 Phone During Event 608 770 143 1
Website Secondary Contact Work Phone	Phone During Event
Annual Event? Charitable Event? If Yes, name of charity to receive donations: Estimated Attendance Public Amplification (not allowed after 11 p.m.) Hours	☑ Yes ☐ Yes ☑ Yes ☑ Yes ☑ Yes ☑ ☐ Yes ☑ ☐ Yes ☑
EVENT CATEGORY	
☐ Run/Walk ☐ Music/Concert ☐ Festival ☐ Other	☐ Rally
LOCATION REQUESTED	
□ Capitol Square (note specific blocks below) □ 30 on the Square (a.k.a. top of 100 block of State Street) Street Names and Block Numbers: 2000 Block	☐ Podium/700-800 State Street ☐ Other (specific blocks/streets requested below) ☐ 1 Uccd Auc
EVENT DATE(S)/SCHEDULE	
Date(s) of Event (including set-up and take-down) $\frac{5/4}{20/3}$ Event Start Date(s)/Time(s) $\frac{5/4}{20/3}$ $\frac{5}{10.30}$ PM Event End Date(s)/Time(s) $\frac{5/4}{20/3}$ $\frac{10.30}{10.30}$ PM	Rain Date(s) NA Set-Up Date(s)/Time for Event Thucs 5/2/2013 Take-Down Time 10:30 Pm 5/4/2013 Take-Down Time: start to streets reopen
APPLICATION SIGNATURE	ER 10
I/We waive the 21-day decision requirement.	(PLEASE INITI
Your signature below indicates that you have read and understar Further, the person/group named in this application will be respo the reserved area. Falsification of information on the application	onsible for the conduct of the group and for the condition
In addition to the rules and regulations detailed in the permit app are subject to all applicable ordinances, statues and lays.	
Signature My Youn M. I), Date <u>3/14/2013</u>