STREET USE PERMIT APPLICATION

EVENT INFORMATION

Healthy Communities Summit, Teaching Safe Bicycling Clinic Name of Event: Event Organizer/Sponsor: The Wisconsin Bike Federation Is Organizer/Sponsor a 501(c)3 non-profit agency? X Yes **MANDATORY: State Sales Tax Exemption Number:** ES#: <u>008-0000137057-05</u> OPTIONAL: Federal Tax Exempt Number: Address: 612 W Main St #200 City/State/Zip: Madison, WI 53703 Primary Contact: Gui Gregory Work Phone: (720)601-8144 gmgregory@wisconsinbikefed/org (720)601-8144 Phone During Event: Email: https://wisconsinbikefed.org/ Website: FAX: Secondary Contact: Jake Newborn Work Phone: (414)253-3331 Email: jake.newborn@wisconsinbikefed.org Phone During Event: (414)253-3331 Annual Event? ☐ Yes X No Charitable Event? X No | Yes If Yes, Name of charity to receive donations: Estimated Attendance: 12 - 30 Participants (CERTIFICATE OF INSURANCE MAY BE REQUIRED) Public Amplification? (not allowed after 11 p.m.): ☐ Yes ☐ No No amplification Hours: 1:00pm to 4:00pm **EVENT CATEGORY** ☐ Run/Walk ☐ Festival Rally ☐ Music/Concert ☐ Parking (i.e., bagging meters) X Other: Bicycling Clinic **LOCATION REQUESTED** Capitol Square (note specific blocks below) X State St. Mall/800 State Street ☐ 30 on the Square (aka top of 100 block of State Street) ☐ Other (specific blocks/streets requested below) Street Names and Block Numbers: State Street (Between N Park St and E Campus Mall **EVENT DATE(S)/SCHEDULE** 1:00pm - 4:00pm Monday, April 29, 2024 Date(s) of Event: Event Start and End Times: Set-Up Start Time: 12:30pm - 1:00pm Take-Down Start Time and End Times: 12:30pm - 1:00pm TAKE-DOWN TIME: START TO STREETS REOPENED Will sponsor apply for temporary class B license to serve or sell beer/wine for this event? X No | Yes If class B license is denied, will the event(s) occur? X Yes l I No GG By initialing, I/we waive the 21-day decision requirement. **APPLICATION SIGNATURE** BY SIGNING THIS APPLICATION. THE "EVENT ORGANIZER/SPONSOR" LISTED ABOVE AGREES TO INDEMNIFY, DEFEND, AND HOLD THE CITY AND ITS OFFICERS, OFFICIALS, EMPLOYEES AND AGENTS HARMLESS AGAINST ALL CLAIMS, LIABILITY, LOSS, DAMAGE, OR EXPENSE INCURRED BY THE CITY ON ACCOUNT OF ANY INJURY TO OR DEATH OF ANY PERSON OR ANY DAMAGE TO PROPERTY CAUSED BY OR RESULTING FROM THE ACTIVITIES FOR WHICH THE PERMIT IS GRANTED. 02/29/2024 **Applicant Signature** Date

STREET EVENT SCHEDULE

- The schedule begins when event setup starts, including setup on sidewalks, terraces or parking, and ends when the street is re-opened for normal use.
- The schedule should encompass all activities planned for the event, such as:
 - » Vending: food, beverages and/or merchandise
 - » Music/Performances
 - » Displays, Exhibits, Demonstrations
 - » A moving event such as a rally, parade, etc.

Provide Detailed Event Schedule:

Healthy Communities Summit, Teaching Safe Bicycling Clinic - April 29th, 2024

- 12:30pm Set Up (Sildwalk chalking; cone set up)
- 1:00pm 4:00pm (TSB clinic begins participants arrive and begin station work)
- 4:00pm (Clinic end and course clean up)

STREET EVENT SITE MAP

To ensure proper review of the event, please attach a Street Event Site Map and a detailed route map (if applicable). Include the following location information if application to your event:

- Tents
- Stages
- Fencing
- Vendors
- Portable Toilets
- Dumpsters
- Staging Areas

Remember to include:

- Emergency vehicle access lanes (minimum of 20').
- Accessible paths for wheelchairs as well as disabled parking spaces.

EVENTS INCLUDING A RUN, WALK OR PARADE

If an event has a run/walk/parade component and/or alcohol will be served or sold, the Street Use Permit Applicant must contact the Madison Police Department to discuss possible Police requirements for the event. Contact Lt. Jen Hannah, mpdevents@cityofmadison.com

A detailed route map is required if the street closure is for a run, walk, parade or other moving activity.

A helpful online resource for route mapping is <u>Map My Run</u>.

Provide Detailed Event Site Map:

See Page Below for Event Site Map



STREET EVENT AMPLIFICATION PERMIT APPLICATION

Permit fee is \$100.00.

Permission for amplification does not exempt a group from Madison Ordinance noise restrictions. Please be considerate of neighboring residents and businesses. When notifying the alderperson and neighborhood association (if necessary) about your event, be sure to include detailed information about any plans you have for amplified sound.

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Do you have publ If Yes, ple	☐ Yes	X No			
EVENT INFORM	ATION				
Name of Event:					
Contact Person:_					
Location:			Date:		
Type of Amplified	I Sound:				
☐ Band	□ DJ	☐ Sound System	☐ Speeches/Announcements	☐ Karaoke	
Other (please	specify):				
Hours of Amplifica	ation:				
Date:			Time:		

EMERGENCY ACTION PLAN (EAP)

I. GENERAL

The "EVENT NAME" will be held MONTH DAY, YEAR at GENERAL LOCATION/ADDRESS/FACILITY TITLE.

II. PURPOSE

- A. This emergency action plan predetermines actions to take before and during the "EVENT NAME" (hereinafter referred to as the event) in response to an emergency or otherwise hazardous condition. These actions will be taken by organizers, management, personnel, and attendees. These actions represent those required prior to the event in preparation for and those required during an emergency.
- B. Flexibility must be exercised when implementing this plan because of the wide variety of potential hazards that exist for this event. These hazards include, but are not limited to, Fire, Medical Emergencies, Severe Weather, or situations where Law Enforcement is required.

III. ASSUMPTIONS

The possibility of an occurrence of an emergency is present at this event. The types of emergencies possible are various and could require the response of Fire & Rescue, Emergency Medical Services, and Police.

IV. BASIC PLAN

A. Emergency Action Plan (EAP) Event Representative

1. The EAP event representative will be identified as the point of contact for all communications regarding the event. This person is identified as PRIMARY CONTACT: FIRST/LAST NAME.

B. Emergency Notification

- 1. In the event of an emergency, notification of the emergency will be through the use of 911. The caller should have the following information available to the 911 operator: nature of emergency, location, and contact person with callback number.
- 2. We will / will not have on-site EMS (ENTER CONTACT NAME & CELL PHONE NUMBER)
- 3. We will / will not have on-site Police or Security (ENTER CONTACT NAME & CELL PHONE NUMBER)

C. Severe Weather

- Weather forecasts and current conditions can be monitored through the <u>National Weather</u> Service's Madison Weather Forecast website.
- 2. Before the event If severe weather is predicted prior to the event, the EAP event representative will evaluate the conditions and determine if the event will remain scheduled. The EAP event representative or his/her designee will be identified as such FIRST/LAST NAME and will be responsible to monitor the weather conditions before and during the event.
- 3. During the event If severe weather occurs during the event, the EAP event representative or his/her designee FIRST/LAST NAME will make notification to those attending the event that a hazardous weather condition exists and direct them to shelter.
- 4. There are very limited provisions for sheltering participants in the event of severe weather.
- 5. This event will follow the 30-30 Rule for lightning. If lightning is observed and thunder is heard within 30 seconds, the event will be delayed until 30 minutes have passed since thunder was last heard.

D. Fire

- 1. If a specific hazard has been identified as an increased risk of fire at this event, event manager will work with the Fire Department to determine how to address the hazard.
- 2. All event staff will be instructed on the safe use of Portable Fire Extinguishers.
- 3. If cooking is intended, you must contact the fire department and
 - a) Must have a valid fire extinguisher, 2A10BC

- b) Each space is allowed 1 LP tank per cooking device. All LP tanks are to be secured in an approved manner (tied, strapped, chained, etc.)
- c) No cooking shall be allowed under a tent. Cooking shall be a minimum of 20' away from tents/canopies.
- d) Cooking must be on a non-combustible surface (grease collection material generally required under cooking and food service areas)
- 4. Fire Inspectors may be required to do an inspection of your event (depends on size and nature of the event), contact the Fire Department for guidelines
- 5. All tents/canopies used for cooking shall have a FLAME SPREAD Certification attached to the tent
- 6. Should an incident occur that requires the Fire Department, 911 will be utilized to request this resource. The caller should have the following information available to the 911 operator: nature of emergency, location, and contact person with callback number.

E. Medical Emergencies

- 1. As with any outdoor event, there is potential for injury to the participants. The types of injuries are various and include those that are heat related as well as traumatic injuries.
- 2. Event manager shall contact the Fire Department to determine if there is a need for on-site Emergency Medical Services at this event.
- 3. Should an incident occur that requires Emergency Medical Services to be called to this event, the caller will have the following information available to give to the 911 Center:
 - a) nature of emergency
 - b) precise location
 - c) contact person with callback number

F. Law Enforcement

- The need for constant Law Enforcement presence at this event

 ☐ has / ☒ has not been identified. Event manager shall contact the Police Department to determine if there is a need for Law Enforcement presence at this event
- 2. Should an incident occur that requires Law Enforcement, to be called to this event, the caller will have the following information available to give to the 911 Center:
 - a) nature of emergency
 - b) precise location
 - c) contact person with callback number

G. Emergency Vehicle Access

- 1. Access for Emergency Vehicles will be maintained at all times.
- 2. 20' Fire Lanes are required to be kept open at events.
- 3. A 14' minimum height clearance requirement for anything that goes over a street or fire lane
- 4. Participants and spectators will be directed to park in approved areas and not to obstruct protective features, sidewalks or public throughways.
- 5. Crowd control will be managed by: NAME.
- 6. Parking for vendor and staff vehicles will be: LOCATION(S).
- 7. Parking for attendee vehicles will be: LOCATION(S).

V. CONTACT INFORMATION

Primary Contact	FIRST/LAST NAME	CELL PHONE
Secondary Contact	FIRST/LAST NAME	CELL PHONE
Emergency	Dane County 911 Center	911
Non-Emergency	Madison Fire Department	(608) 266-4420
Non-Emergency	Madison Police Department	(608) 255-2345