

# STREET USE PERMIT APPLICATION

## EVENT INFORMATION

Name of Event: \_\_\_\_\_

Event Organizer/Sponsor: \_\_\_\_\_

Is Organizer/Sponsor a 501(c)3 non-profit agency?  Yes  No

**MANDATORY: State Sales Tax Exemption Number:** ES#: \_\_\_\_\_

**OPTIONAL: Federal Tax Exempt Number:** \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Primary Contact: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Phone During Event: \_\_\_\_\_

Website: \_\_\_\_\_ FAX: \_\_\_\_\_

Secondary Contact: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Phone During Event: \_\_\_\_\_

Annual Event?  Yes  No

Charitable Event?  Yes  No

If Yes, Name of charity to receive donations: \_\_\_\_\_

Estimated Attendance: \_\_\_\_\_ (CERTIFICATE OF INSURANCE MAY BE REQUIRED)

Public Amplification? (not allowed after 11 p.m.):  Yes  No

Hours: \_\_\_\_\_ to \_\_\_\_\_

## EVENT CATEGORY

Run/Walk     Music/Concert     Festival     Rally     Parking (i.e., bagging meters)

Other: \_\_\_\_\_

## LOCATION REQUESTED

Capitol Square (note specific blocks below)     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: \_\_\_\_\_

## EVENT DATE(S)/SCHEDULE

Date(s) of Event: \_\_\_\_\_ Event Start and End Times: \_\_\_\_\_

\_\_\_\_\_ Set-Up Start Time: \_\_\_\_\_

Take-Down Start Time and End Times: \_\_\_\_\_

TAKE-DOWN TIME: START TO STREETS REOPENED

Will sponsor apply for temporary class B license to serve or sell beer/wine for this event?  Yes  No

**If class B license is denied, will the event(s) occur?**  Yes  No

\_\_\_\_\_ 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.

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_





Request for all parking stalls on west side of 300 N Brooks – daily, 4/30 – 5/3

Request for 2-3 parking stalls on east side of 300 N Brooks on 5/2

See attached schedule for timing