

STREET USE PERMIT APPLICATION

EVENT INFORMATION

Name of Event: Beer, Breakfast & Bluegrass

Event Organizer/Sponsor: Giant Jones Brewing

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: 931 E Main St, Suite 9

City/State/Zip: Madison, WI 53703

Primary Contact: Erika Jones Work Phone: 608-658-7763

Email: erika@giantjones.com Phone During Event: 608-658-7763

Website: www.giantjones.com FAX: _____

Secondary Contact: Mari Zoran Work Phone: _____

Email: mari@giantjones.com Phone During Event: 608-516-7837

Annual Event? ☐ Yes ☒ No

Charitable Event? ☐ Yes ☒ No

If Yes, Name of charity to receive donations: _____

Estimated Attendance: 200 (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: Special event breakfast with music

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: 931 E Main St – Brearly St Parking Lane, Even side of the street

EVENT DATE(S)/SCHEDULE

Date(s) of Event: 5/5/24 Event Start and End Times: 7 AM – 1 PM

Rain Date (if any): _____ Set-Up Start Time: 5/4, 9 PM

Take-Down Start Time and End Times: 5/5, 1 PM – 2 PM

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

EJ 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 _____

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:

Giant Jones Brewing - Beer, Breakfast & Bluegrass – Sunday, May 5th from 8 AM – 1 PM

Saturday, May 4th at 9 PM – Setup Street Event Area (parking lane outside the business)

7:00 AM – Attendees can arrive

8:00 AM – Brewery opens

10:00 AM – Acoustic bluegrass music by The Old Gray Cats & Breakfast foods available (prepared on site in one of our partner's commercial kitchens, sold as take-out or grab & go from restaurants on premise)

11:30 AM – Music ends

1:00 PM – Event ends, remove parking lane barriers

We anticipate 200 or fewer attendees to this event.

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. Scott Kleinfeldt, skleinfeldt@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 [Map My Run](#).

Provide Detailed Event Site Map:

We will not have a tent set up. In the case of inclement weather, a small pop-up tent will be available for the musicians.

We will not have a stage – the band will be acoustic and sitting on chairs.

We will setup a perimeter with caution tape and or barricades from the city if needed.

Event attendees will have access to the toilets inside the brewery.

We have a dumpster for our business.

Event staging will take place inside the brewery.

We will be closing the parking lane, therefore the rest of the street will accessible for traffic and emergency vehicles.

Our brewery is accessible and there are wheelchair ramps in the driveway and sidewalk.

There is bicycle parking on the corner of Main & Brearly, as well as in the building parking lot, in excess of 8 bicycle parking spots.



Parking Lane Enclosure: On-Street Event Area

- Cordon off 2 parking spaces and brewery driveway apron

Band

EMERGENCY ACTION PLAN (EAP)

I. GENERAL

The "Beer, Breakfast & Bluegrass " will be held Sunday, May 5th from 8 AM – 1 PM at Giant Jones Brewing, .

II. PURPOSE

- A. This emergency action plan predetermines actions to take before and during the "Beer, Breakfast & Bluegrass" (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 Erika Jones, CEO/Co-Owner.

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 ()
- 3. We ☐ will / ☒ will not have on-site Police or Security ()

C. Severe Weather

- 1. Weather forecasts and current conditions can be monitored through the [National Weather 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 Mari Zoran 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 Mari Zoran 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

- 1. 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 thoroughways.
- 5. Crowd control will be managed by: Erika Jones.
- 6. Parking for vendor and staff vehicles will be: Building Parking Lot - 931 E Main St..
- 7. Parking for attendee vehicles will be: Building Parking Lot, Street, and Brearly St. Ramp.

V. CONTACT INFORMATION

Primary Contact	Erika Jones	608-658-7763
Secondary Contact	Mari Zoran	608-516-7837
Emergency	Dane County 911 Center	911
Non-Emergency	Madison Fire Department	(608) 266-4420
Non-Emergency	Madison Police Department	(608) 255-2345

PERMIT EXTENSION/SECONDARY LOCATION
(Relating to Brewery Permit and Fermented Malt Beverages)

▪ **Wisconsin Brewery Permit #:**

• _____ BR-WI-21136 _____

▪ **Legal Name (Corp., LLC, individual, partnership):**

_____ Giant Jones Brewing LLC _____

▪ **Business Name:**

_____ Giant Jones Brewing _____

▪ **Business Address:**

_____ 931 E Main St., Suite 9, Madison, WI 53703 _____

▪ **Additional brewery property where brewery sales will be made:**

○ **Location (address) and specific description:** 931 E Main St., Suite 9 – Brearly St. (even side) parking Lane and driveway directly in front of the brewery.

○ **Is this a permanent secondary location?** No

○ **Is this a temporary secondary location?** Yes

▪ **Name of Event:** Beer, Breakfast & Bluegrass _____

▪ **Date(s) & Times:** Sunday, May 5, 2024 8 AM – 1 PM _____

▪ **Please submit request at least 14 days in advance of conducting business at secondary location to:** Jason.Lee@wisconsin.gov

▪ **Sign/Date/Title:** _____

_____ *Department Use Only* _____

Assigned to ATEU Agent: _____ Lee _____

Agent Recommendation to Excise Audit: **APPROVE** or **DISAPPROVE**

Notes:

