STREET USE PERMIT APPLICATION

EVENT INFORMATION			
Name of Event: Food-A-Rama			
Event Organizer/Sponsor: Temple Beth El Sisterhood			
Is Organizer/Sponsor a 501(c)3 non-profit agency? MANDATORY: State Sal	es Tax Exemption Number: Tax Exempt Number:	Yes ES#: 008-0000121413-05	□ No
Address: 2702 Arbor Drive			
City/State/Zip: Madison, WI 53711			
Primary Contact: David Bookstaff	Work Phone: <u>608-212-6493</u>		
Email: dbookstaff@outlook.com	Phone During Event: 608-212-6493		
Website: https://www.tbemadison.org/event/food-a-rama2023	FAX:		
Secondary Contact: Steven Gregorius	Work Phone: 608-238-3123		
Email: facilities@tbemadison.org	Phone During Event: 608-238	3-3123	
Annual Event?		Yes	□No
Charitable Event?		☐ Yes	☐ No
If Yes, Name of charity to receive donations: Temple		-	
Estimated Attendance: 250 (expect no more than 100 at	(CERTIFICATE C	OF INSURANCE MAY BE REC	
Public Amplification? (not allowed after 11 p.m.): Hours:to		☐ Yes	■ No
EVENT CATEGORY			
□ Run/Walk □ Music/Concert □ Festiva ■ Other:	l Rally 🔳	Parking (i.e., bagging n	neters)
LOCATION REQUESTED			
☐ Capitol Square (note specific blocks below)	☐ State St. Mall/800 State S	Street	
☐ 30 on the Square (aka top of 100 block of State Street) Other (specific blocks/stre	eets requested below)	
Street Names and Block Numbers: 2700 - 2900 blocks of	f Arbor Drive		
EVENT DATE(S)/SCHEDULE			
Date(s) of Event: November 7, 2023	Event Start and End Times: 1	0:30am to 2:30pm	
	Set-Up Start Time: 9am		
	Take-Down Start Time and E	nd Times: 4pm ME: START TO STREETS RE	OPENED
Will sponsor apply for temporary class B license to serve of If class B license is denied, will the event(s) occur?	or sell beer/wine for this event?	☐ Yes ☐ Yes	■ No
DB// By initialing, I/we waive the 21-day decision requi	rement.		
APPLICATION SIGNATURE			
BY SIGNING THIS APPLICATION, THE "EVENT ORGANIZER/SPONS CITY AND ITS OFFICERS, OFFICIALS, EMPLOYEES AND AGENTS HEXPENSE INCURRED BY THE CITY ON ACCOUNT OF ANY INJURY CAUSED BY OR RESULTING FROM THE ACTIVITIES FOR WHICH T	IARMLESS AGAINST ALL CLAIMS, LIAE TO OR DEATH OF ANY PERSON OR A	BILITY, LOSS, DAMAGE, OR	
Applicant Signature David Bookstaff Digitally signed by pate: 2023.09.19		9/2023	