



#### Temporary B License

City of Madison Clerk 210 MLK Jr Blvd, Room 103 Madison, WI 53703

licensing@cityofmadison.com 608-266-4601

| (Agenda Item numb    | oer) -if Street Use |
|----------------------|---------------------|
| (Legistar file numbe | er) –if Street Use- |
| PROPS-20             |                     |
| (License number)     |                     |
| 12                   | 503                 |
| (Alder District #)   | (Police Sector)     |

- Temporary Class "B" (beer) and "Class B" (wine) licenses are available to bona fide clubs, chambers of commerce, churches, Lodges/Societies, Veteran's Organizations, and Fair Associations only. Being a non-profit company is not enough.
- You may get an unlimited number of temporary licenses for Beer, but only two licenses for wine each twelve months.
- If your plans include using the street for your event, you will need a **Street Use Permit** and you
  must apply at least 60 days before your event.
- At least one licensed bartender must be present.
- o The fee is \$10 for beer and/or wine per event events may have consecutive days.

The named organization applies for:

☑ A Temporary Class "B" license to sell fermented malt beverages at picnics or similar gatherings under s.125.26(6), Wis. Stats.

☐ A Temporary "Class B" license to sell wine at picnics or similar gatherings under s. 125.51(10), Wis. Stats.

#### Organization

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|---|---|---|---|---|---|---|--|
|   |   |   |   |   |   |   |  |

■ Bona fide Club

☐ Chamber of Commerce

☐ Church

☐ Lodge/Society

□ Veteran's Organization

☐ Fair Association

Organization Name: Eken Park Neighborhood Association\_\_\_\_\_\_ Phone: 507-459-3545\_

Address: PO Box 7162, Madison WI 53707-7162 Email: treasurer@ekenpark.org Website:www.ekenpark.org

Date organized: 1995\_\_\_\_\_\_\_ If a corporation, give date of incorporation: 2018\_\_\_\_

WI State Seller's Permit ID:

■ We are not required to hold a Wisconsin seller's permit pursuant to s. 77.54 (7m), Wis. Stats.

We have been convicted of a violation of Chapter 38.

| Organization Officers     | Name                     | City, State           | Birthdate                          |
|---------------------------|--------------------------|-----------------------|------------------------------------|
| President                 | Charles McNulty          | Madison, WI           |                                    |
| Vice President            | Benjamin Shannon         | Madison, WI           |                                    |
| Treasurer                 | James (Jim) Wold         | Madison, WI           |                                    |
| Secretary                 | Mike Zenz                | Madison, WI           |                                    |
| Person in charge of event | Name<br>Kaitlin Sonsalla | Phone<br>507-459-3545 | Email<br>kaitlinsonsalla@gmail.com |

#### **Event Information**

| Event Name: Eken Park Festival   | Event dates & time(s)  | :Saturday, August 19, 2023 11          | <u>1am-8pm</u> |  |  |  |  |  |
|--|--|--|----------------|--|--|--|--|--|
| Event Address: 700 block Mayer Ave, Mad  | ison WI 53704  | Estimated Attendance: _1,000           | )              |  |  |  |  |  |
| Do the premises you want to license occupy <i>all</i> of the building/property? N/A No? Then please describe fully which parts of the property or building you want to be covered with this license. (Which section of the parking lot, which floor of the building, or which specific rooms in it. etc): This is a Street |  |  |                |  |  |  |  |  |
| Use only festival. All attendees will be on  | the street only or surr  | ounding grass, which will be se        | ctioned        |  |  |  |  |  |
| off with roadblocks and orange fencing.  |  |  |                |  |  |  |  |  |
| Explain the purpose and nature of the even   | t: <u>Neighborhood festi</u>   | val                                    |                |  |  |  |  |  |
|  |  |  |                |  |  |  |  |  |
| Describe your planned method of crowd cor  | ntrol: Per Mar hired s   | ecurity, volunteer wardens (wo         | orking in      |  |  |  |  |  |
| shifts, wearing vests), walkie talkies for c   | communication, fencing   | , roadblocks, signage indicating       | g alcohol      |  |  |  |  |  |
| may not leave designated areas.  | The second secon |  |                |  |  |  |  |  |
| How many security persons will you have o  | n the licensed premises  | 3?Min 10 rotating volunteers, 1 Per Ma | ar resource    |  |  |  |  |  |
| Will food be served? <b>\( \mathbb{Y}</b> \)Yes □No Wil  | I a tent be used? □Yes   | ⊠No                                    |                |  |  |  |  |  |
| Will the street be used? <b>\S</b> Yes □No Wi  | II wine be served? <b>⊠</b> No   | □Yes: of 2 per year Whole              | esaler/        |  |  |  |  |  |
| distributor/brewery who will supply fermen   | ted malt beverage:   | General Beverage                       |                |  |  |  |  |  |
| Quantities ordered: <u>14 kegs</u>   |  |  |                |  |  |  |  |  |
| (If serving wine) Wholesaler/distributor/wir   | nery who will supply wi  | ne: <u>N/A</u>                         |                |  |  |  |  |  |
| Quantities ordered:  |  |  |                |  |  |  |  |  |
| Declaration  |  |  |                |  |  |  |  |  |
| ☐ The information provided in this application   | on is true and correct to  | i , j                                  |                |  |  |  |  |  |
| Officer Signature & Mh   | <del></del>  | Date: <u>6/6/23</u>                    | ,              |  |  |  |  |  |
| Printed name of <b>Officer</b> who is signing.   | harles McNulty   |  |                |  |  |  |  |  |



#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/6/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). CONTACT NAME: Taylor Ryman Ansay & Associates, LLC. 10NE /C, No, Ext); 608-828-0255 PHONE FAX (A/C, No): 608-831-4777 2901 W Beltline Highway ADDRESS: taylor.ryman@ansay.com Suite 202 Madison WI 53713 NAIC# INSURER(S) AFFORDING COVERAGE INSURER A: West Bend Mutual Insurance Company 15350 EKENPAR-01 INSURED INSURER B: Eken Park Neighborhood Association INSURER C: P.O. Box 7162 Madison WI 53707-7162 INSURER D INSURER E: INSURER F: **REVISION NUMBER: CERTIFICATE NUMBER:** 1099498715 **COVERAGES** THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. POLICY EFF (MM/DD/YYYY) ADDL SUBR INSR WVD POLICY EXP LIMITS TYPE OF INSURANCE POLICY NUMBER (MM/DD/YYYY 8/19/2023 8/20/2023 B368661 \$1,000,000 FACH OCCURRENCE **GENERAL LIABILITY** DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: PRO-JECT POLICY COMBINED SINGLE LIMIT (Ea accident) AUTOMOBILE LIABILITY BODILY INJURY (Per person) \$ ANY AUTO BODILY INJURY (Per accident) ALL OWNED AUTOS SCHEDULED \$ AUTOS NON-OWNED AUTOS PROPERTY DAMAGE \$ HIRED AUTOS (Per accident) \$ \$ UMBRELLA LIAB EACH OCCURRENCE OCCUR AGGREGATE \$ **EXCESS LIAB** CLAIMS-MADE \$ DED **RETENTION \$** WC STATU-TORY LIMITS WORKERS COMPENSATION AND EMPLOYERS' LIABILITY E.L. EACH ACCIDENT ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? N/A E.L. DISEASE - EA EMPLOYEE \$ (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT | \$ 1,000,000 8/19/2023 8/20/2023 R368662 Liquor Liability DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) Additional Insured status is extended from the general liability policy to the City of Madison specified in the written contract, signed prior to the loss. CANCELLATION CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. City of Madison 215 Martin Luther King Jr. Blvd AUTHORIZED REPRESENTATIVE Madison WI 53703

| STREET EVENT BEER/WINE SALES PERMIT APPLICATION  |  |                      |               |  |  |
|--|--|----------------------|---------------|--|--|
| Permit fee is \$700.00.  |  |                      |               |  |  |
| Do you plan on selling beer/wine? If Yes, please continue. If No, skip this form.  |  | ☑ Yes                | ☐ No          |  |  |
| EVENT ORGANIZER INFORMATION  |  |                      |               |  |  |
| Name of Group: Eken Park Festival  |  |                      |               |  |  |
| Contact Person: Kaitlin Sonsalla   |  |                      |               |  |  |
| Address: 2625 Commercial Ave, Madison WI 53704   |  |                      |               |  |  |
| Work Phone: 507-459-3545   | Phone During Event: 507-459-3545               |                      |               |  |  |
| Today's Date: 06/12/2023   |  |                      |               |  |  |
| BEER SALES PERMIT INFORMATION  |  |                      |               |  |  |
| Any Temporary Class "B" Retailers License applica<br>submitted at least 60 days before the event date an<br>the Common Council. See Madison General Ordina | d be approved by the Alcohol License Review Co | nit, mus<br>ommittee | t be<br>e and |  |  |
| Name of the Licensed Bartender: Erica Sylvia Talbot  |  |                      |               |  |  |
| Security Company: Per Mar Security   |  |                      |               |  |  |
| Have you applied for the Temporary Class "B" Retailers Indicate Application Date: 06/12/2023   | s License (from the City Clerk's Office)?      | ☑ Yes                | □No           |  |  |

⊠ No

∐Yes

Have you submitted the Certificate of Insurance with a liquor liability naming the City of Madison as Additional Insured?

Indicate Application Date: 06/12/2023

|  | , |  |
|--|---|--|
|  |   |  |
|  |   |  |
|  |   |  |
|  |   |  |
|  |   |  |
|  |   |  |

## Summary



Madison Parks Division 330 E Lakeside Street Madison, WI 53715 https://www.cityofmadison.com/parks

the This summary is not your license, permit or official registration, except in the case where information about a temporary permit is specifically listed on this summary. Please contact agency administrator if you have questions. Date: 6/12/2023

Time: 2:57 PM

Kaitlin Sonsalla 2625 Commercial Ave Madison, WI 53704

# treet Use (Special Event)

PRKSTU-2023-01877

wner(s):

Phone: Fax:

2023 Eken Park Festival

One Day 1000

# EVENT INFORMATION

Name of Event
Event Type
Estimated Attendance
Number of Days

EVENT TYPE

Festival

#### SITE MAP

I understand I must attach a site map. I understand I must also attach a route map, if applicable

## LOCATION INFORMATION

Other Location

Street Names and Block Numbers

700 block Mayer Ave, Madison

Yes

# PERMITS REQUIRED - BEER

will beer/wine be served? (Free of charge) will beer/wine be sold?(\$)

I understand that a Certificate of Insurance with liquor liability,

I understand I must apply for the Temporary (Picnic/Beer) License to serve or sell beer/wine for this event

# PERMITS REQUIRED - VENDING

Yes I understand I must submit the listing of the vendors and their Seller ID# at least two weeks prior to the event Will food and/or merchandise be sold?(\$)

Estimate Number of Vendors

## PERMITS REQUIRED

Will there be Public Amplification?(\$)

Yes

14

## SAFETY AND SECURITY

I understand that I must submit the Emergency Action Plan

## EQUIPMENT RENTAL

Will you need equipment rental from the City of Madison?(\$)

0 Qty 0 Qty 0 Qty Qty

9

Trash Barrels

Recycling Barrels

Dumpsters

Electrical Adaptors

### EVENT MARKETING

Do you want this included in the Madison Parks calendar of events? Event Website

The Eken Park Neighborhood Association is excited to announce the 7th Annual Eken Park Festival! This year's festival will be held on August 19th and will continue to feature

fb.com/ekenparkfest

incredible musical talent from a wide range of genres, delicious local cuisine and beer, kids

activities, and much more!

# **ACKNOWLEDGEMENT**

I have read the acknowledgement

### INDEMNIFICATION

I have read the indemnification

#### SIGNATURE

Signature

Signature Date

# INSURANCE INFORMATION

I understand I may be required to provide insurance for my event, as determined by the City Risk Manager

## ACCESSIBILITY PLAN

I understand I may be required to submit an Accessibility Plan, this requirement will be determined upon review of my application

I understand I should include any accessibility setup in my site map

Kaitlin Sonsalla 03/09/2023

| 08/10/2023      | 00/13/2023  | 7:00 AM           | 08/19/2023                              | 11:00 AM           | 08/19/2023                | 8:00 PM        | 08/19/2023             | 9:00 PM                | 08/19/2023                | 11:00 AM   | 08/19/2023 | 8:00 PM  |
|-----------------|-------------|-------------------|---|--------------------|---------------------------|----------------|------------------------|------------------------|---------------------------|------------|------------|----------|
| Coft in Doto    | Selup Dale  | Setup Time        | Event Start Date                        | Event Start Time   | Event End Date            | Event End Time | Cleanup Completed Date | Cleanup Completed Time | Start Date                | Start Time | End Date   | End Time |
| ,               |             | Enimonetal (1997) | *************************************** | - Con-e-manuscript | Annual Experiences annual |                |                        |                        | -                         |            |            |          |
| ODENCE FINDA VO | משואם ואשאש |                   |   |                    |                           |                |                        |                        | UBLIC AMPLIFICATION DATES |            |            |          |

ttached Documents

| ite Map                    | Step3StreetEventSiteMap2023.docx     |
|----------------------------|--------------------------------------|
| mergency Action Plan       | Step4EmergencyActionPlan2023.doc     |
| lean Up and Recycling Plan | Step6CleanUpRecyclingPlan2023.doc    |
| ther                       | Step11AmplificationPermitApp2023.doc |
| endor Permit               | Step13VendingLicenseApp2023.doc      |
|                            |                                      |

#### Christianson, Eric

From:

licensing

To:

Picnic Beer with Street Use Permit application group

Cc:

Sector 500

Subject:

Eken Park Fest picnic beer with street use PERCPS-2023-00107

**Attachments:** 

PERCPS-2023-00107 Eken Park Festival.pdf

#### Application attached:

Eken Park Festival 700 Block of Mayer St 8/19/2023

Please reply with approvals and concents.

Eric Christianson Certified Municipal Clerk

City of Madison City Clerk's Office City-County Building-Room 103, 215 Martin Luther King Jr. Blvd. #159 Madison, WI 53703

TEL: (608) 266-4601 FAX: (608) 266-4666

Echristianson@cityofmadison.com Follow us on Twitter <u>@MadisonWIClerk</u>

"We exist to assist"