| STREET USE PER | RMIT APPLICATION |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|
| EVENT INFORMATION | |
| Name of Event: Dane County Fire Chie | et's tarade |
| Event Organizer/Sponsor: City of Madison | Fire Dept. |
| | Yes No S Tax Exemption Number: ES#: |
| Address: 314 W. Dayton St. | |
| City/State/Zip: Madison, Wt 53703 | · |
| Primary Contact: Ed Ruckriege | Work Phone: 608 - 266 - 4457 |
| Email: eruct riegel ecityofmadison.com | Phone During Event: 608 - 520 - 1117 |
| Website: www.malisonfre.org | FAX: 608 - 267 - 1/00 |
| Secondary Contact: Bernadette Galvez | Work Phone: 608-261-9844 |
| Email: by hezacitofmadison. com | Phone During Event: 608 -279-7168 |
| Annual Event? | ✓ Yes |
| Charitable Event? If Yes, Name of charity to receive donations: | ☐ Yes ☑ No |
| 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) |
| LOCATION REQUESTED | |
| ☐ Capitol Square (note specific blocks below) ☐ 30 on the Square (aka top of 100 block of State Street) | ☐ State St. Mall/800 State Street ☐ Other (specific blocks/streets requested below) |
| N. Lake to 600 N. Lake St. State Street | 5t. from University Ave. to Mendote Ct. 400 bl. |
| EVENT DATE(S)/SCHEDULE | denote and |
| Date(s) of Event: 10/9/22 | Event Start and End Times: 1:00PM - 2:30pm |
| Rain Date (if any): | Set-Up Start Time: 10:30am |
| | Take-Down Start Time and End Times: 230 pm TAKE-DOWN TIME: START TO STREETS REOPENED |
| Will sponsor apply for temporary class B license to serve or If class B license is denied, will the event(s) occur? | sell beer/wine for this event? |
| By initialing, I/we waive the 21-day decision require | ment. |
| APPLICATION SIGNATURE | |
| BY SIGNING THIS APPLICATION, THE "EVENT ORGANIZER/SPONSOR CITY AND ITS OFFICERS, OFFICIALS, EMPLOYEES AND AGENTS HAF EXPENSE INCURRED BY THE CITY ON ACCOUNT OF ANY INJURY TO CAUSED BY OR RESULTING FROM THE ACTIVITIES FOR WHICH THE | RMLESS AGAINST ALL CLAIMS, LIABILITY, LOSS, DAMAGE, OR OOR DEATH OF ANY PERSON OR ANY DAMAGE TO PROPERTY |

Date_

Applicant Signature

EMERGENCY ACTION PLAN (EAP)

GENERAL I.

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

PURPOSE II.

- This emergency action plan predetermines actions to take before and during the "EVENT NAME" A. (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.
- Flexibility must be exercised when implementing this plan because of the wide variety of potential B. 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.

ASSUMPTIONS III.

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**

Emergency Action Plan (EAP) Event Representative A.

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

B. **Emergency Notification**

- In the event of an emergency, notification of the emergency will be through the use of 911. The 1. caller should have the following information available to the 911 operator: nature of emergency, location, and contact person with callback number. We will / will not have on-site EMS (ENTER CONTACT NAME & CELL PHONE NUMBER)
- 2.
- We ☑ will / ☐ will not have on-site Police or Security (ENTER CONTACT NAME & CELL 3. Ruckriew 608-520-1117 PHONE NUMBER)

C. Severe Weather

- Weather forecasts and current conditions can be monitored through the National Weather 1. Service's Madison Weather Forecast website.
- Before the event If severe weather is predicted prior to the event, the EAP event representative 2. 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.
- During the event If severe weather occurs during the event, the EAP event representative or 3. 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.
- There are very limited provisions for sheltering participants in the event of severe weather. 4.
- This event will follow the 30-30 Rule for lightning. If lightning is observed and thunder is heard 5. within 30 seconds, the event will be delayed until 30 minutes have passed since thunder was last heard.

D. Fire

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

- 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

| | | 608 - 520 -111 |
|-------------------|-----------------------------------|---------------------|
| | FIRST/LAST NAME & Luctricel | CELL PHONE |
| Secondary Contact | FIRST/LAST NAME Bernedotte Galvez | CELL PHONE 698-279- |
| Emergency | Dane County 911 Center | 911 796 |
| Non-Emergency | Madison Fire Department | (608) 266-4420 |
| Non-Emergency | Madison Police Department | (608) 255-2345 |

00-1117

| STREET EVENT MARKETING INFORMATION | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|--|
| Conditional approval of the event is required BEFORE promoting, marketing or advertising the event. | / | |
| Do you have marketing information? If Yes, please continue. If No, skip this form. | No | |
| How will this event be marketed, promoted, or advertised? | | |
| Through MFO social media. Visit Downtown Madison and whow. | | |
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| | | |
| Will there be live media coverage during the event and where will the media vehicles be parked? | | |
| Media will be invited. They are on their own for parking. | | |
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| PARKS DIVISION CALENDAR OF EVENTS | | |
| If you want your event to be listed on City website calendars, please complete the Marketing Information form. Your eve will only be included on the calendars if all permits and applications are approved 30 days in advance and your event is open to the public. If this form is not completed, the event will not be included on the calendars. | nt | |
| Official Name of Event: Dane Canty Thre Chief's Parade | | |
| Location: State Street and Capital Square | | |
| Public Contact Phone: 608 - 266 - 4709 | | |
| Website: www. madsonfire.org | | |
| Admission Cost: | | |
| Date of Event: Sunday, October 9, 2022 | | |
| Beginning/End Time of Event: 1:00 am - 2:30 pm. Family events prior at 1236 | OPN | |
| Two sentence description of event (for internet calendar): | | |
| Help kick of National Are Prevention week at the annual Dane County Fin Truck Parade! Join us along state street for the parade, then stop by the Capital square to tour the Fire Trucks from across Dane county. | e | |

