

STREET USE PERMIT APPLICATION

EVENT INFORMATION

Name of Event: Downtown Madison Family Halloween- Hayrides around Capitol Square with Madison Parks Division
Event Organizer/Sponsor: Tracey Hartley, Recreation Services Coordinator – City of Madison Parks Division
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: 210 Martin Luther King Jr. Blvd. Room 104
City/State/Zip: Madison, WI 53703
Primary Contact: Tracey Hartley Work Phone: 608-267-4919
Email: thartley@cityofmadison.com Phone During Event: 608-209-7980
Website: https://www.visitdowntownmadison.com/events/index.php?category_id=4572
Secondary Contact: Tiffany Kenney & Jenny Sligh Work Phone: 608-512-1340
Email: tkenney@visitdowntownmadison.com Phone During Event: 608-512-1340
Annual Event? ☒ Yes ☐ No
Charitable Event? ☐ Yes ☒ No
If Yes, Name of charity to receive donations: _____
Estimated Attendance: 300 (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: Halloween Hayrides around Capitol Square- request 4 parking spots – for 2 tractors with 2 hay wagons to park

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: in front of Capitol Kids Ltd.-8S. Carroll St., Madison, -request to bag meters by 1pm

EVENT DATE(S)/SCHEDULE

Date(s) of Event: Wednesday, October 26 Event Start and End Times: 3-6pm
Rain Date (if any): none Set-Up Start Time: 2pm setup
Take-Down Start Time and End Times: 6-7pm
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? N/A ☐ 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

Tracey Hartley

Date

9/7/16

