

STREET USE PERMIT APPLICATION

EVENT INFORMATION

Name of Event: Juneteenth Day Celebration
Event Organizer/Sponsor: Kujichagulia MSd
Is Organizer/Sponsor a 501(c)3 non-profit agency? ☒ Yes ☐ No
MANDATORY: State Sales Tax Exemption Number: _____ ES#: 040966
OPTIONAL: Federal Tax Exempt Number: _____
Address: P.O. Box 259 806
City/State/Zip: Madison Wisconsin 53725
Primary Contact: Annie Weatherly Flowers Work Phone: 608 266-6577
Email: Kujichagulia.juneteenth@gmail.com Phone During Event: 608 358-2872
Website: Kuji MSd FAX: _____
Secondary Contact: Jon Gramling Work Phone: 241-2000
Email: jgramling@capitalcitybus.com Phone During Event: 608 469-0009
Annual Event? ☒ Yes ☐ No
Charitable Event? ☐ Yes ☐ No
If Yes, Name of charity to receive donations: _____
Estimated Attendance: 500 - 500 (CERTIFICATE OF INSURANCE MAY BE REQUIRED)
Public Amplification? (not allowed after 11 p.m.): ☒ Yes ☐ No
Hours: 11:00am to 6:00pm

EVENT CATEGORY

☐ Run/Walk ☐ Music/Concert ☒ Festival ☐ Rally ☐ Parking (i.e., bagging meters)
☐ Other: _____

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: Wingra - Park to Second St

EVENT DATE(S)/SCHEDULE

Date(s) of Event: June 17, 2017 Event Start and End Times: 12:00 pm - 6:00 pm
Rain Date (if any): _____ Set-Up Start Time: 8:00am - 11:00am
Take-Down Start Time and End Times: 6-7:00pm
TAKE-DOWN TIME: START TO STREETS REOPENED

Will sponsor apply for temporary class B license to serve or sell beer/wine for this event?
If class B license is denied, will the event(s) occur?

☐ Yes ☒ No
☐ Yes ☐ No

WLF 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

Annie Weatherly Flowers

Date

4/6/17

From: [Mohr, Thomas](#)
To: [Lamberty, Kelli](#)
Subject: Juneteenth route
Date: Thursday, April 20, 2017 3:36:47 PM
Attachments: [image001.png](#)

