

STREET USE PERMIT APPLICATION

EVENT INFORMATION

Name of Event: UW-Housing Move In

Event Organizer/Sponsor: Mike Kinderman / Tonia Pittman

Is Organizer/Sponsor a 501(c)3 non-profit agency? ☒ Yes ☐ No

MANDATORY: State Sales Tax Exemption Number: ES#: ES40706

OPTIONAL: Federal Tax Exempt Number: _____

Address: 1620 Kronshage Drive

City/State/Zip: Madison, WI 53716

Primary Contact: Mike Kinderman Work Phone: 262-5008

Email: mike.kinderman@housing.wisc.edu Phone During Event: 608-354-2035

Website: www.housing.wisc.edu FAX: _____

Secondary Contact: Tonia Pittman Work Phone: 262-6832

Email: tonia.pittman@housing.wisc.edu Phone During Event: 217-508-8083

Annual Event? ☒ Yes ☐ No

Charitable Event? ☐ Yes ☒ No

If Yes, Name of charity to receive donations: _____

Estimated Attendance: 7,400 (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: _____

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: Dayton Street (closed to thru traffic – west bound only) from Park St to Frances / South Frances from Dayton to Lot 91 (closed to thru traffic – southbound only)

EVENT DATE(S)/SCHEDULE

Date(s) of Event: Aug 26, 29, 30, and 31 Event Start and End Times: 6:00am to 8:00pm

Rain Date (if any): _____ Set-Up Start Time: 6:00am

Take-Down Start Time and End Times: 5:00pm/8:00pm
TAKE-DOWN TIME: START TO STREETS REOPENED

Will sponsor apply for temporary class B license to serve or sell beer/wine for this event? ☐ Yes ☒ No

If class B license is denied, will the event(s) occur? ☐ 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 _____ Date _____