STREET USE PERMIT APPLICATION

EVENT INFORMATION

Name of Event: UW Housing 2017 Early Transition (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#: 4076

OPTIONAL: Federal Tax Exempt Number:

Address: 1620 Kronshage Drive

City/State/Zip: Madison, WI 53706

Primary Contact: Mike Kinderman	Work Phone: 608-262-5008
Email: mike.kinderman@housing.wisc.edu	Phone During Event: 608-354-2035
Website:	FAX:
Secondary Contact: Tonia Pittman	Work Phone: 608-262-6832
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: 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:_____

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: Lake St from Johnson to Dayton

EVENT DATE(S)/SCHEDULE

Date(s) of Event: August 23rd 2017   Event Start and End Times: 6:00am to 6:00pm

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

Take-Down Start Time and End Times: 6:00pm
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 _Tonia Pittman_   Date 7-12-17