

STREET USE PERMIT APPLICATION

EVENT INFORMATION

Name of Event: Safe Trails Late Night Food Carts
Event Organizer/Sponsor: Marquette Neighborhood Association
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: P.O. Box 3223
City/State/Zip: Madison WI 53704
Primary Contact: Jack Kear Work Phone: 608-509-6658
Email: jackkear@hotmail.com Phone During Event: _____
Website: www.marquette-neighborhood.org FAX: _____
Secondary Contact: _____ Work Phone: _____
Email: _____ Phone During Event: _____
Annual Event? ☐ Yes ☒ No
Charitable Event? ☐ Yes ☒ No
If Yes, Name of charity to receive donations: _____
Estimated Attendance: 25-75 (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: public safety using food carts

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: Williamson & S. Thornton Ave. in the cul-de-sac on Cap City bike trail

EVENT DATE(S)/SCHEDULE

Date(s) of Event: 9/1-9/2 thru 10/27-10/28 Event Start and End Times: 9pm - 1am
Rain Date (if any): _____ Set-Up Start Time: 8pm
Take-Down Start Time and End Times: 1am
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

JK 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 Jack Kear

Date 9/8/17

Dane County Web Map



July 25, 2017

 Tax Parcels



MA
Parcels

STREET EVENT SCHEDULE

Event set-up will begin at 8:00pm on Friday and Saturday evenings from Sept 1 until Oct 28.

Food service from street vendors will begin at 9:00pm and conclude at 1:00am.

The cul-de-sac may be reopened for normal use at 1:30am each time.

Street vendor set-up includes parking and positioning the cart and food and service preparation. The vendor will also position the barricade making the cul-de-sac inaccessible to motor vehicles.

STREET EVENT SITE MAP

Two food carts will set up in the cul-de-sac of S. Thornton Ave. north of Williamson Street and beyond where the Capital City bike trail intersects it.

The carts will be positioned on the east side of S. Thornton Ave. that banks the Yahara River.

The carts will be positioned between the Capital City bike trail bridge crossing of the Yahara River and the juncture of the Yahara River bike path which heads northward from that cul-de-sac. The distance between these two points is 70 feet.

After the line of crossing bicyclists use to traverse the Capital City bike trail to the bridge a barricade will be set up to prevent motorists from using the cul-de-sac during event hours. The barricade will maintain all bicycle transit routes available when no barricade is present.

Emergency vehicles are able to access S. Thornton Ave. from Williamson St. right up to the point of the barricade. The wooden sawhorse barricade can also be easily moved.

EMERGENCY ACTION PLAN (EAP)

I. GENERAL

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

II. PURPOSE

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

III. ASSUMPTIONS

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

A. Emergency Action Plan (EAP) Event Representative

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

Jack Kear 608 509 6658

B. Emergency Notification

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

C. Severe Weather

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

D. Fire

- 1. If a specific hazard has been identified as an increased risk of fire at this event, event manager will work with the Fire Department to determine how to address the hazard.
- 2. All event staff will be instructed on the safe use of Portable Fire Extinguishers.
- 3. If cooking is intended, you must contact the fire department and -
 - a) 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
- 5. 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

- 1. 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

- 1. 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 thoroughways.
- 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

Primary Contact	FIRST/LAST NAME <i>Jack Kear</i>	CELL PHONE <i>608 509 6658</i>
Secondary Contact	FIRST/LAST NAME	CELL PHONE
Emergency	Dane County 911 Center	911
Non-Emergency	Madison Fire Department	(608) 266-4420
Non-Emergency	Madison Police Department	(608) 255-2345

STREET EVENT CLEAN-UP AND RECYCLING PLAN

Our event asks for only the addition of street carts to the cul-de-sac at Thornton Ave. and the Capital City bike trail. Street vending regulations require carts to have garbage cans and remove all waste from areas where food service has been provided. This has been confirmed with Street Vending Coordinator Meghan Blake-Horst. We will emphasize respect for this approach to the street vendors we will utilize.

STREET EVENT VENDING LICENSE APPLICATION

- ☒ 1-25 Vendors\$400.00
☐ 26-100 Vendors\$675.00
☐ 101-300 Vendors\$975.00
☐ 301 or more Vendors\$1,700.00

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 Primary Contact: Jack Kear
 E-mail: jackKear@hotmail.com
 Work Phone: 608-509-6658 Phone During Event: _____

Vendor Name	WI State Seller's Permit #
1. <u>Thony Clarke / Cafe Costa Rica</u>	<u># 456 102 7376485 - 03</u>
2. <u>Atonye Marsh / Ribmasters</u>	<u># 456 102 898 4402 - 02</u>
3. <u>Maggie Jirga / Jakarta Cafe</u>	<u># 456 102 7211052 - 03</u>
4. <u>Vern Hill / Fast'n Fresh</u>	<u># 456 1024 138818 - 03</u>
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