STREET USE PERMIT APPLICATION	
FOR OFFICE USE ONLY: Permit # Date Submitted	
EVENT INFORMATION Name of Event 2018 SCM	G FILM FESTIVAL
Event Organizer/Sponsor_SLIMEY CRUD M	OTURCYCLE GANG, LLC
Is Organizer/Sponsor a 501(c)3 non-profit agency?	□ Yes ☑*No
If Yes, provide State of Wisconsin Tax Exempt Number	
Address 2026 Yahara Plac	<u>e</u>
City/State/Zip Madison WI	53704-5558
E-mail en lewis & Wisc. edu	FAX_Phone During Event 608 770 1431
Website	Phone During Event 608 772 6981
Annual Event? Charitable Event? If Yes, name of charity to receive donations: Estimated Attendance Public Amplification (not allowed after 11 p.m.) Hours	☐ Yes ☐ No☐ Yes ☒ No☐ Yes ☐ Yes ☐ Yes ☐ Yes ☒ No☐ Yes ☐
EVENT CATEGORY □ Run/Walk □ Music/Concert □ Festival ☑ Other Limit parking to motor oycl	, □ Rally ⊠ Parking (i.e., bagging meters)
AOther Limit parking To Motor oycl	<i>es</i>
LOCATION REQUESTED ☐ Capitol Square (note specific blocks below) ☐ 30 on the Square (a.k.a. top of 100 block of State Street) Street Names and Block Numbers: 2000 block A+	□ Podium/700-800 State Street □ Other (specific blocks/streets requested below) wood Pive (no closure)
EVENT DATE(S)/SCHEDULE	
Date(s) of Event (including set-up and take-down) 5/5/2018 Event Start Date(s)/Time(s) 3 30 PM Event End Date(s)/Time(s) 10 30 PM	Rain Date(s) N A Set-Up Date(s)/Time for Event 3-30 pm 5/5/2018 Take-Down Time 10-30 pm 5/5/2018
APPLICATION SIGNATURE I/We waive the 21-day decision requirement.	Take-Down Time: start to streets reopened (PLEASE INITIAL)
Your signature below indicates that you have read and understant Further, the person/group named in this application will be responsible reserved area. Falsification of information on the application of	nsible for the conduct of the group and for the condition of
In addition to the rules and regulations detailed in the permit appl	lication instructions and guidelines, Street Use Permits

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Signature