STREET USE PERMIT APPLICATION **EVENT INFORMATION** Name of Event: Event Organizer/Sponsor: Mo Is Organizer/Sponsor a 501(c)3 non-profit agency? **MANDATORY: State Sales Tax Exemption Number:** ES# OPTIONAL: Federal Tax Exempt Number: reen Parkway City/State/Zip: 266-Work Phone: Primary Contact: Phone During Event: FAX: Secondary Contact: Work Phone: Phone During Event: Email: **Annual Event?** Charitable Event? Yes \square No If Yes, Name of charity to receive donations: Estimated Attendance 200 (CERTIFICATE OF INSURANCE MAY BE REQUIRED) Public Amplification? (not allowed after 11 p.m.): No ☐ Yes Hours: to **EVENT CATEGORY** ☐ Music/Concert ☐ Festival ☐ Parking (i.e., bagging meters) Run/Walk ☐ Rallv Other: LOCATION REQUESTED State St. Mall/800 State Street ☐ Capitol Square (note specific blocks below) 30 on the Square (aka top of 100 block of State Street) Other (specific blocks/streets requested below) Street Names and Block Numbers: **EVENT DATE(S)/SCHEDULE** Date(s) of Event: 10 13 18 **Event Start and End Times:** Rain Date (if any):_ Set-Up Start Time:_ Take-Down Start Time and End Times: TAKE-DOWN TIME: START TO STREETS REOPENED Will sponsor apply for temporary class B license to serve or sell beer/wine for this event? No 7 Yes If class B license is denied, will the event(s) occur? Yes Mo 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.

STREET EVENT SCHEDULE

- The schedule begins when event setup starts, including setup on sidewalks, terraces or parking, and ends when the street is re-opened for normal use.
- The schedule should encompass all activities planned for the event, such as:
 - Vending: food, beverages and/or merchandise
 - Music/Performances
 - Displays, Exhibits, Demonstrations
 - A moving event such as a rally, parade, etc.

Provide Detailed Event Schedule:

from 4 to 10 pm

habeland former to be used as handicap accessable and for mobility Challenged individuals as

STREET EVENT SITE MAP

To ensure proper review of the event, please attach a Street Event Site Map and a detailed route map (if applicable). Include the following location information if application to your event:

- Tents
- Stages
- Fencing
- Vendors
- Portable Toilets
- Dumpsters
- Staging Areas

Remember to include:

- Emergency vehicle access lanes (minimum of 20').
- Accessible paths for wheelchairs as well as disabled parking spaces.

EVENTS INCLUDING A RUN, WALK OR PARADE

If an event has a run/walk/parade component and/or alcohol will be served or sold, the Street Use Permit Applicant must contact the Madison Police Department to discuss possible Police requirements for the event. Contact Lt. Trevor Knight, tknight@cityofmadison.com.

A detailed route map is required if the street closure is for a run, walk, parade or other moving activity.

A helpful online resource for route mapping is <u>Map My Run</u>.

Provide Detailed Event Site Map:

