STREET USE PERMIT APPLICATION	
OR OFFICE USE ONLY: Permit # Date Submitted	
EVENT INFORMATION Name of Event MY - Cooper Race Tear Event Organizer/Sponsor Craft Spaulding —	in Activation
Event Organizer/Sponsor <u>(MUU Spawldun 4 —</u>	Ac Hotel
ls Organizer/Sponsor a 501(c)3 non-profit agency?	□ Yes □ No
1 11 - 10 1101). 41	
City/State/Zip Madusm WI 5370	3
Primary Contact CVOIG Spaulany Work Phone 608 213 3060 E-mail Spaulany Craig & gmail Com Website	FAX_Phone During Event_60% 213 3060
Secondary Contact Work Phone E-mail	Phone During Event
Annual Event? Charitable Event? If Yes, name of charity to receive donations:	□ Yes 1241Ño □ Yes 1241Ño
Estimated Attendance	(CERTIFICATE OF INSURANCE MAY BE REQUIRED)
EVENT CATEGORY	
□ Run/Walk □ Music/Concert □ Festival □ Other	☐ Rally ☐ Parking (i.e., bagging meters)
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: □ B Will New 3 - 3 hr Spaces for Mile EVENT DATE(S)/SCHEDULE	☐ Podium/700-800 State Street ☐ Other (specific blocks/streets requested below) ☐ only Ulash W Corper Truck - last 3 spaces be force
Date(s) of Event (including set-up and take-down) 9/17/19 Event Start Date(s)/Time(s) 9/17 - 9pm Event End Date(s)/Time(s) 9/17 - 9pm	Rain Date(s) Set-Up Date(s)/Time for Event Take-Down Time
APPLICATION SIGNATURE	Take-Down Time: start to streets reopened
I/We waive the 21-day decision requirement.	(PLEASE INITIAL)
Your signature below indicates that you have read and understa Further, the person/group named in this application will be resp he reserved area. Falsification of information on the application	consible for the conduct of the group and for the condition of
n addition to the rules and regulations detailed in the permit ap are subject to all applicable ordinances, states and laws	oplication instructions and guidelines, Street Use Permits
Signature KVWW (1 C) WWWWWW	Date_0/89///
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