

For Internal Use Only:

- Event App date received: _____
- Park Permit required: _____
- Alcohol License required: _____
- COI received: _____
- Amount paid: _____
- Cash/Check: _____



CITY OF PORT WASHINGTON

EVENT PERMIT APPLICATION / GENERAL EVENT INFORMATION

Special Application Fees: \$125 (single day event); \$150 (multi day event)

Official Name of Event:

Contact Name/Email: Cell Phone:

Start Date: End Date:

DATES/TIMES	MON	TUES	WED	THURS	FRI	SAT	SUN
Setup							
Start							
End							
Cleanup							

- Location of Event:
- Park/Public Property
 - Public Street/Sidewalk/Alley/Right of Way
 - Private Property
 - Other

Please List Streets That May be Closed or Otherwise Affected by the Event:

Location of Event Parking:

Estimated Attendance Per Day:

- 0-250
- 250-500
- 500-1,000
- 1,000-5000
- 5,000+

Estimated Attendance Entire Event:

- 0-250
- 250-500
- 500-1,000
- 1,000-5000
- 5,000+

Number of Booths:

- 0-10
- 11-25
- 26-50
- 51+

Type of Event:

- Civic Group Fundraiser
- Festival / Music Concert
- Parade
- Other
- Run / Walk
- Religious / Educational
- Sport (fishing, soccer, etc.)

Event Will Have:

- Musical Entertainment / Amplified Sound (if checked, see Municipal Code [Chapter 214](#) for restrictions)
- Bounce House
- Rock Wall
- Vehicles
- Animals
- Other high-risk activity
- Food Truck(s)
- Dunk Tank
- Marching Units
- Water Slides

Permit & Other Requirements:

<input type="checkbox"/> Beer and/or wine will be served, sold, etc.	Temporary Class "B" Retailers License
<input type="checkbox"/> Barricades / Detours (city streets, roads, etc.)	Approval by Police
<input type="checkbox"/> State Hwy Closures	Police Dept will file request from the DOT
<input type="checkbox"/> Solid Waste & Recycling	Disposal Containers & Haul Away
<input type="checkbox"/> Tent and/or canopy	Fire Dept. Diggers Hotline must be contacted a minimum of 3 days before digging or stacking
<input type="checkbox"/> Large Generator(s) - separate panel box required	Inspections Permit
<input type="checkbox"/> Fireworks	Fire Dept
<input type="checkbox"/> Activities in a park outside of normal operating hours	Waiver required by Common Council
<input type="checkbox"/> Non-food related sales or display booths - DESCRIBE →	

Arrangements Have Been Made For:

- Restrooms & Hand Washing
- Event Insurance
- Fire Extinguishers
- Drinking-Water
- Weather Contingencies
- Tent Heating
- Public Safety / EMS Services
- Advertising Banners/ / Signs
- Waste Water & Grease Removal
- LP Gas

In the event of Severe Weather or Other Emergency:

Open and Available Shelter Locations Will Include:

Authorized Person to Cancel the Event if Necessary: (name, title, and phone number)

Public Safety Site Plan:

Attach a schematic drawing of the event site location. The drawing must be legible and drawn to as close to scale as possible. The public safety plan must include the following items if they will be provided or if they are required.

- Beer/Wine Sale Location(s)
- Wristband Booth
- Booths, stages and event structures
- First Aid Station(s)
- Information / Ticket Booths
- Fences
- Boundaries of the Event
- Run/Walk or Parade Route
- Exits & Gates (gates must be numbered)
- Fire Extinguishers
- Severe Weather Shelters
- Fire / EMS access Road
- Private Security Staff Locations
- Emergency Contact Event Personnel
- Event Parking
- Barricades
- Generators
- Detour Route, Including Signage

Provide any additional information the City should consider or may be relevant to a review of this application. Attach diagrams and/or pictures to the application as needed.

Organization(s) Sponsoring Event:

Name:

Address:

City: State: Zip:

Name:

Address:

City: State: Zip:

Send Invoices To:

CONTACT INFORMATION

****Either Primary or Secondary Contacts Must Be Onsite at All Times of the Event****

Primary Contact:

Cell #: Daytime Phone:

Email:

Address:

City: State: Zip:

Secondary Contact:

Cell #: Daytime Phone:

Email:

Address:

City: State: Zip:

EMERGENCY CONTACT INFORMATION

The public will be notified of safety and/or security issue(s) in the following manner:

- Contacting Local Police and Fire Services
- Onsite PA System
- Other

If a private security firm has been contracted, list its information below:

Security Provider:

Contact Person: Phone Number:

Location of Provider at Event Site:

Location of Missing Persons Station:

If the Event Takes Place on City Property (Parks, City Streets, or Other City-Owned Facilities) in Whole or In Part:

- I have reviewed the proposed location for the event, and I have determined it is suitable for our proposed use.
- I understand and acknowledge that it is the event organizer's responsibility to inspect the area in which the event is to take place and notify the City Police Department (262-284-2611) of any safety concerns.
- I have reviewed and understand the City's Insurance Requirements for the Event as described in this document.
- I have enclosed the event's Public Safety Site Plan.
- I have enclosed other information that we believe is necessary or helpful to describe the planned event.

SIGNATURE

I am authorized to sign this application on behalf of the event sponsor. The information contained in this application for an event permit is true, correct, and complete to the best of my knowledge. If there are any changes to the event, I agree that I will immediately notify the City of Port Washington of these changes and request approval of them.

(Sign Name)

(Date Signed)

(Printed Name)

(Print Title with Organization)

Return Completed Applications and Application Fees To:
Susan L. Westerbeke, City Clerk
 +City of Port Washington, 100 W Grand Ave, Port Washington, WI 53074
 (W)262-284-5585 (F) 262-284-7224 swesterbeke@portwashingtonwi.gov

EVENT INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

EVENT:

EVENT ORGANIZER(S):

In consideration of permission granted by the City of Port Washington, Wisconsin, to hold the Event named hereinbelow, the undersigned Event Organizer(s) (hereinafter referred to as "Organizer," whether one or more) hereby agrees to indemnify, defend, and hold harmless the City of Port Washington, Wisconsin, and its officers, appointed and elected officials, agents, departments, employees, boards, commissions, committees, members and volunteers (hereinafter collectively referred to as the "City") from and against any and all claims, actions, liabilities, damages, losses, expenses, and reasonable attorney's fees (hereinafter collectively referred to as the "Claims") for any bodily injury, including death, and/or any loss of or damage to property caused or alleged to be caused, in whole or part, by any negligent or intentional acts or omissions of Organizer or by any of Organizer's officers, employees, agents, owners, directors, employees, contractors or subcontractors, or by any person under their right of control insofar as permitted by law. This indemnity includes any Claims arising out of or in connection with the permitted Event, namely: **[insert name of event]**

This indemnity also includes any Claims based on or arising out of the violation, or alleged violation, of any federal, state, county or municipal statute, ordinance, rule, regulation or court order. It is the specific intention of the City and the Organizer that the City shall, in all instances except for Claims arising solely from the negligent or intentional acts or omissions of the City, be indemnified by the Organizer from and against any and all Claims relating to the Event. It is agreed that the Organizer shall be responsible for primary loss investigation, defense, and judgment for damages, costs, and disbursements where this Indemnification is applicable. Organizer further agrees to waive all rights of subrogation it has or may have against the City for any damages or losses arising from the Event.

The person(s) signing this Event Indemnification and Hold Harmless Agreement hereby certifies that they have full authority to enter into this Agreement on behalf of the Organizer(s) of the Event.

Event Organizer(s):

(Print Name of Sponsor)

by: _____
(Signature & title) (Print name of signer) (Insert date of Signing)

by: _____
(Signature & title) (Print name of signer) (Insert date of signing)