

## CHECKLIST FOR SPECIAL EVENT PERMIT APPLICATION

Completed special event permit application must be submitted to Village Clerk's Office, along with certificate of insurance, fee and other requirements outlined by checklist.

***Application will be placed on agenda only after completed form, insurance certificate and fee have been filed with the Village Clerk's Office (608-527-2510).***

Please note all new applications or annual applications with substantial changes must be reviewed by Public Works/Public Safety Committee and forward to Village Board for approval. Public Works/Public Safety Committee meets the 2<sup>nd</sup> Wednesday of each month and Village Board meets the 1<sup>st</sup> and 3<sup>rd</sup> Tuesday. Applications must be received one week prior to the Public Works/Public Safety meeting in order to be placed on agenda. Applications that are filed after the submittal date shall be subject to a \$100 late fee.

### Required Items:

- \_\_\_\_\_ 1. Completed special event permit application.
- \_\_\_\_\_ 2. Applicant must obtain review/signature by Fire Department and EMS and as required on special event permit application.
- \_\_\_\_\_ 3. Furnish certificate of insurance for proof of comprehensive general liability insurance naming the Village of New Glarus as an additional insured.
- \_\_\_\_\_ 4. Fee

### Complete as applies to specific request:

- \_\_\_\_\_ 5. Contact Diggers Hotline (1-800-242-8511) for any digging or posting **at least one week prior to event.**
- \_\_\_\_\_ 6. Garbage pickup of village trash receptacles during event may be provided as a service by the Village for a fee. Pickup would only be once daily in the morning.

***NOTE: Applicant will need to coordinate this with the Public Works Director (527-2097) one week prior to the event.***

- \_\_\_\_\_ 7. Barricades are available from the Village.

***NOTE: Applicant will need to coordinate this with the Public Works Director (527-2097) one week prior to the event.***

- \_\_\_\_\_ 8. Obtain Portable Restrooms for event (*see attached guidelines*).

Any additional services provided by the Village may be charged back to the sponsoring organization at the Village's discretion.

PERMIT FEE: \_\_\_\_\_  
PERMIT NO. \_\_\_\_\_  
INSURANCE ON FILE: \_\_\_\_\_

VILLAGE OF NEW GLARUS  
APPLICATION FOR SPECIAL EVENT PERMIT

*Special events are governed by village ordinances and organizers are responsible for all necessary permits, trash and litter pickup, and for damage to any property, as well as possible billing for village services. The organization/organizer agrees to be responsible for the supervision of the event and conduct of persons present.*

**1. NAME/DESCRIPTION OF EVENT:** \_\_\_\_\_  
APPLICANT NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

SPONSORING ORGANIZATION: \_\_\_\_\_  
NAME OF HEAD OF ORGANIZATION: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

DESIGNATED CONTACT PERSON FOR EVENT  
CONTACT NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_ (Before event) \_\_\_\_\_ (Day of event)

DATE(S) OF EVENT: \_\_\_\_\_ TIME OF REQUESTED USE: \_\_\_\_\_

ESITMATED NUMBER OF PARTICIPANTS: \_\_\_\_\_ SPECTATORS: \_\_\_\_\_

**2. LOCATION OF THE EVENT** (Please attached a detailed map or diagram of your event)

**Street**

Does the event require streets to be closed? YES NO If yes which street(s) and when are you requesting they be closed: \_\_\_\_\_  
\_\_\_\_\_

**Park**

Will event be held in a Village of New Glarus Park or utilize any park facilities? YES NO  
If yes which Park? Village Park/Glarner Park/Vet's Memorial/Candy Cane/Valle Tell Soccer  
\_\_\_\_\_

Are you requesting exclusive use of the park during this time? YES NO  
If YES, which features? (ball field, concession stand, shelter house, etc) \_\_\_\_\_  
\_\_\_\_\_

**3. TELL US ABOUT YOUR EVENT:**

**Alcoholic Beverages**

Will alcoholic beverages be served/sold? YES NO

If yes, you must either amend your current Class B license or obtain a temporary Class B permit if you do not currently hold a license. (Please attach either amendment or temporary application) Please include list of servers or a responsible party for temporary application.

Will you be requesting that open intoxicants be allowed on the streets (plastic cups only)?

YES NO If yes, which Streets: \_\_\_\_\_

Dates/Times: \_\_\_\_\_

**NOTE: It is the responsibility of the Applicant in coordination with the Police Department to post the limit of the area in which open intoxicants will be allowed.**

**Street Use**

Do you require any special parking restrictions? YES NO If yes please indicate what type and where: \_\_\_\_\_

Will the event use a tent? YES NO If yes, location and size of tent: \_\_\_\_\_

How will tent be anchored? (i.e. stakes, cement barriers) \_\_\_\_\_

Applicants will be required to organize and obtain dumpster facilities: (please identify location) \_\_\_\_\_

Will any fireworks or pyrotechnic devices be used during the event? YES NO

(Please obtain the proper Fireworks Permit from the Village Clerk's Office)

What toilet facilities will be made available to your participants? Indoor at: \_\_\_\_\_

Outdoor, # of units provided and location: \_\_\_\_\_

Will there be the use of loudspeakers or amplifying devices? YES NO

If yes, proposed use of amplifying devices (i.e. live band, disc jockey): \_\_\_\_\_

Date and time amplifying devices will be used: \_\_\_\_\_

Accurate description of area amplifying devices will be used: \_\_\_\_\_

**NOTICE TO APPLICANT:** The Chief of Police shall have the authority to revoke such permit when he believes such loudspeaker or amplifying device is becoming a nuisance because of the volume, the method in, which it is being used, or the location in, which it is being operated. [§ 224-9(C)(2)] **Any revocation shall be limited to the specific band and will not jeopardize other bands covered by the permit.**

**4. SAFETY/SECURITY FOR YOUR EVENT**

Do you have the correct level of insurance for your special event? YES NO  
(Review special events Ordinance, Village must be named as additionally insured)

Does your event require additional police coverage? YES NO  
If yes will you contract with a private contractor or the Village? \_\_\_\_\_  
If Village – number of Officers needed \_\_\_\_\_

Specific dates and times: \_\_\_\_\_

[Please understand that use of Village Officers will be charged at current loaded wage]

**Prior to submitting application to the Village of New Glarus, applicant MUST obtain review/signature by the Fire Department and EMS.**

FIRE DEPT. REVIEW BY: \_\_\_\_\_ DATE: \_\_\_\_\_

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

E.M.S. REVIEW BY: \_\_\_\_\_ DATE: \_\_\_\_\_

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I/We \_\_\_\_\_ do hereby indemnify, defend and hold the Village and its employees and agents harmless against all claims, liability, loss, damage or expense incurred by the village 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.

DATE: \_\_\_\_\_

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Head of Sponsoring Organization Signature

**NOTICE TO APPLICANT:**

The Village Board requires that the applicant attend the meeting of the Village Board at which this application will be considered and that the application shall have been reviewed by the Public Works/Safety Committee for their recommendation prior to its consideration by the Village Board.

The Village Board shall require the applicant to furnish **proof of comprehensive general liability insurance naming the Village of New Glarus as an additional insured.**

APPROVED: \_\_\_\_\_ DATE: \_\_\_\_\_

Village President

Municipal Ordinance  
Chapter 262 Art. III

**STAFF SPECIAL EVENTS APPLICATION CHECKLIST**

**Required Items:**

- \_\_\_ 1. Completed special event permit application.
- \_\_\_ 2. Applicant must obtain review/signature by Fire Department and EMS and as required on special event permit application.
- \_\_\_ 3. Furnish certificate of insurance for proof of comprehensive general liability insurance naming the Village of New Glarus as an additional insured.
- \_\_\_ 4. Fee

POLICE DEPT. REVIEW BY: \_\_\_\_\_ DATE: \_\_\_\_\_

DOES APPLICATION NEED COMMITTEE REVIEW? \_\_\_\_\_

COMMENTS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

PUBLIC WORKS DEPT. REVIEW BY: \_\_\_\_\_ DATE: \_\_\_\_\_

DOES APPLICATION NEED COMMITTEE REVIEW? \_\_\_\_\_

COMMENTS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

CLERK'S OFFICE REVIEW BY: \_\_\_\_\_ DATE: \_\_\_\_\_

DOES APPLICATION NEED COMMITTEE REVIEW? \_\_\_\_\_

COMMENTS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Application Received

Date: \_\_\_\_\_

Committee Review

Date: \_\_\_\_\_

Action: \_\_\_\_\_

Board Review

Date: \_\_\_\_\_

Action: \_\_\_\_\_

APPROVED: \_\_\_\_\_ DATE: \_\_\_\_\_

Village Administrator