



755 Fellows Rd • PO Box 428
Genoa City, WI 53128
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EVENTS PERMIT APPLICATION

Please fill in all blanks completely, as incomplete applications will be rejected.
Applications must be submitted **AT LEAST 60 DAYS** prior to the proposed event date(s).

Applicant Name: _____ **Organization Name:** _____

Section I - What type of Permit(s) will your event require?

- ☐ **Parade Permit.** Required for any parade on public property.
- ☐ Map or description of the requested route to be traveled.
- ☐ **Public Assembly Permit.** Required for any public gathering on public or private property. Fee required.
- ☐ **Street Use Permit.** Required for any event using a public street. Per Sec. 97-7 of the municipal code, this application must include the following attachments:
- ☐ Certificate of Comprehensive General Liability Insurance with the Village, its employees and agents as additional insured with coverage for contractual liability with minimum limits of \$500,000 per occurrence for bodily injury and property damage limits of \$250,000 per occurrence.
- ☐ Petition signed by more than half of the residential dwelling units and/or commercial units residing along that portion of the street designated for the proposed use or whose property is denied access by virtue of the granting of the permit.
- ☐ **Park Permit.** Required for reserving the use of a park facility or shelter for an event lasting more than one day.
- ☐ **Veteran's Park/Memorial Park/Anders-** Additional rental fees apply.
- Certificate of Comprehensive General Liability Insurance with the Village, its employees and agents as additional insured with coverage for contractual liability with minimum limits of \$500,000 per occurrence for bodily injury and property damage limits of \$250,000 per occurrence.
- A Hold Harmless and Indemnity Agreement will be required of each applicant.
- Please indicate which park facility** _____.

Section II – Applicant Information

1. Applicant Name: _____ Date of Application: _____
2. Organization Name: _____
3. Organization Type: ☐ For Profit ☐ Non-Profit (501(c) _____) Tax ID: _____
4. Mailing Address: _____
5. City, State, Zip: _____
6. Phone: _____ E-mail: _____
7. Applicant's Driver's License #: _____ State license issued: _____

Section III – Event Information

1. Title of Event: _____
2. Date(s) of Event: _____
3. Location(s) of Event: _____
4. Hours: _____
- | | | |
|--|------------|----------|
| | Start Time | End Time |
|--|------------|----------|
5. Event Chair/Contact Person: _____ Phone: _____
6. Day of Event Contact Name: _____ Phone: _____
7. Is the event open to the public? ☐ Yes ☐ No
8. Will you charge an admission fee? ☐ Yes ☐ No
9. Estimated Attendance Number: _____
10. Basis for Estimate: _____
11. Will you be setting up a tent? ☐ Yes ☐ No
If yes, list the location, size, Rental Company, and proof of completion of locates.

12. Will there be any animals? ☐ Yes ☐ No
If yes, what type and how many. _____

13. Detailed description of proposed event with map of exact location of the event and/or route.

14. Description of plan for handling refuse collection and after-event clean-up:

15. Description of plan for providing event security (if applicable):

16. Will your event include the sale of beer and/or wine? ☐ Yes ☐ No
If yes, please attach a completed Temporary Alcohol License & Operator License Application.

17. Will you or any other vendors be selling food or merchandise? ☐ Yes ☐ No
If yes, please attach list of proposed vendors, including business name and type of food/merchandise sold.

Section IV – Street Use

☐ Check if this section does not apply.

1. Description of the portion(s) of road(s) to be used:

2. Description of signage to be used during event:

Anticipated Services

Please indicate below any additional services you are requesting for your event. Estimated Fees or Deposits for these services may be required prior to issuance of permit(s).

- | | |
|--|----------------|
| <input type="checkbox"/> Electricity | Explain: _____ |
| <input type="checkbox"/> Water | Explain: _____ |
| <input type="checkbox"/> Traffic Control | Explain: _____ |
| <input type="checkbox"/> Police Services | Explain: _____ |
| <input type="checkbox"/> Fire/EMS Services | Explain: _____ |
| <input type="checkbox"/> Other | Explain: _____ |

Section V– Signature of Applicant

“The information provided in this application is true and correct to the best of my knowledge and belief. I understand that cancellation of any event, for any reason, shall result in the forfeiture of permit fees. I understand that application fees are not refunded in the event the application is not approved. I understand that in addition to the schedule of fees, if any additional Village services are requested or determined to be impacted, an additional fee will be charged for those services. I agree to comply with all applicable state, federal and municipal regulations and ordinances.”

APPLICANT SIGNATURE: _____ **DATE:** _____

Office Use Only

Section VI – Fees

<u>Application and Permit Fees</u>	<u>Unit Fee</u>	<u>Applicable Fee</u>
• Administrative Fee	\$25.00	_____
• Parade Permit Application Fee	\$25.00 (<i>non-refundable</i>)	_____
• Street Use Permit Fee	\$25.00	_____
• Fireworks Events Permit Fee	\$150.00 (<i>per event</i>)	_____
• Police Services	TBD	_____
• DPW Services	TBD	_____
• Fire/EMS Services	TBD	_____
<u>Park Reservation Permit - Veteran's Park</u>		
• Large Pavilion with Serving Room	\$175.00	_____
• Large Pavilion without Serving Room	\$125.00	_____
• Small Pavilion	\$100.00	_____
• Memorial Park/Anders	TBD	_____

Total PAID with Application: \$ _____

(cash or check only payable to: Village of Genoa City)

Date Filed with Clerk: _____ Payment with Application: \$ _____ Receipt # _____

Additional Fees Collected: \$ _____ Receipt # _____

Departmental review (all that apply):

☐ Police Chief: ☐ Approved ☐ Denied Signed: _____

Additional services needed: _____

Additional fees or deposit: _____

☐ Fire Chief: ☐ Approved ☐ Denied Signed: _____

Additional services needed: _____

Additional fees or deposit: _____

☐ Street Dept: ☐ Approved ☐ Denied Signed: _____

Additional services needed: _____

Additional fees or deposit: _____

Board review:

☐ Board: Meeting Date(s): _____ ☐ Approved ☐ Denied

Reasons/Conditions: _____

Clerk's Office Completion:

Total add'l fee/deposit to be collected: \$ _____ Receipt # _____

Permit(s) issued: ☐ Parade/PA ☐ Street Use ☐ Park Permit

Date of issue: _____ Deposit Returned: \$ _____ Deposit withheld: \$ _____

Reason withheld:
