CITY OF FORT ATKINSON
Special Event Application
Fee: $25.00

Name of Business/Group Organizing Event:		
Contact Person for Event:		
Phone Number:	Email:	
Day of Event Contact Person (if different from above):	Phone:	Email:

Special Event Details

Event Name:	
Event Date (mm/dd/yyyy):	
Event Location:	
Estimated Number of Attendees:	Hours of Event:
Event Setup Time:	Event Tear Down Time:
Event Description:	
Goal/Purpose of Event:	
Attach a map of the event including:	Designated parking areas and available number of spaces*, directional signage for events (i.e. parking guidance), pedestrian street crossing locations, location of any traffic control barricades or personnel to ensure safe coordination of vehicles and pedestrians ** If limited parking available, provide proof of permission from neighboring businesses/property to utilize their parking*

Check all applicable boxes:

☐ I am renting a city park	Attach copy of paid park rental from Parks & Recreation Department. Equipment rentals are reservable through the Parks & Recreation office 920-397-9910. You are responsible for picking up, setting up, tearing down, and return of equipment. Each park is equipped with picnic tables and garbage/recycling receptacles, and additional are available upon request. If additional cans are requested, the event coordinator will need to pick up additional can liners from Park & Recreation office. The event coordinator is responsible for trash and recycling disposal. If there is no dumpster on site, a dumpster may be required and is the responsibility of the event coordinator.
☐ I am renting city equipment	Please secure and submit payment for requested equipment prior to submitting Special Event Application. *Attach a map with a location for drop off of equipment with this application. 8’ white plastic table (43 available; $4.50/each) Qty ____ Metal folding chair (190 available; $0.75/each) Qty ____ Additional Picnic Table ($15/each; includes delivery & pick up)* Qty ____ Additional Garbage/Recycling Can* Qty ____ Barricades* Qty ____ Traffic Cones* Qty ____
☐ Electrical Access	*The City Electrican may reach out to you to address any needs/concerns.* Please specify if you have any requests or requirements beyond current access:

Continued

☐ I will be having music	(Per City Ordinance 17.03) no person shall cause or allow loud, excessive or unusual noise that will disturb the comfort and quiet repose of persons in the vicinity. All music shall terminate as of 10:00 p.m. City noise ordinance must be followed Start Time of Music: _____ End Time of Music: _____
☐ I will be closing a street(s)*	Barricades can be provided by Public Works upon request ** Provide proof of permission from neighboring businesses/properties if street closure impacts daily activity*
☐ I will be selling beer and/or wine*	Alcohol license and licensed bartender(s) required. Contact City Clerk (920) 397-9901 prior to submitting this application. **Restroom Plan also required with sales of beer and/or wine. Refer to the Special Event Guide.*
☐ I will be erecting a tent, canopy or other temporary structure.*	**Event coordinator is responsible for ensuring that the temporary structure is safely installed. Event Coordinator is required to contact Diggers Hotline at least 4 business days prior to the event. Diggershotline.com, 1-800-242-8511*
☐ I am having a walk/race*	**See map instructions above. In addition to the previously listed map requirements, clearly mark your walk/race route on the map.*

By signing, I agree to the following statements:

I understand I am responsible for a fire safety and medical plan. I understand it is my responsibility to read the Special Events Guide. I understand I may be required to provide Proof of Insurance. I understand that I may need to contact multiple Departments to arrange for assistance. I understand I am responsible for timely clean up after the event. I understand that additional charges may apply and that I can be billed after my event.

Responsible Party Signature: _____

Submission Date:

For Office Use Only:

Date Received: _____

Date Paid: _____

Council Approval / Denial Date: _____

Date applicant notified of Council action and any event stipulations: _____

Event Stipulations: