



APPLICATION FEE
\$25.00

CITY OF ANTIGO
APPLICATION FOR PARADE, SPECIAL EVENT, OR STREET USE PERMIT

DATE OF APPLICATION: _____ AGENT NAME: _____
MUST BE AUTHORIZED TO SIGN FOR SPONSORING ORGANIZATION

MAILING ADDRESS: _____ STATE: _____ ZIP: _____

EMAIL: _____

PHONE#: _____ WORK/CELL NUMBER#: _____

SPONSORING ORGANIZATION: _____

ORGANIZATION'S EXECUTIVE OFFICER: _____ PHONE: _____

EVENT DATE(S): _____ START TIME: _____ AM PM END TIME: _____ AM PM

NAME OF EVENT: _____

REASON FOR EVENT: _____

PERSON(S) RESPONSIBLE FOR DATE/SITE _____
Must be present at the event and on the premises for the reservation date for the duration of the event.

ANTICIPATED NUMBER OF PARTICIPANTS/ATTENDEES: _____

TYPE: <input type="checkbox"/> Parade/Walk/Run <input type="checkbox"/> Special Event <input type="checkbox"/> Street Use/Closure For each "TYPE" checked please complete the corresponding section (see below)

PARADE/WALK/RUN

ANTICIPATED NUMBER OF PARADE VEHICLES OR FLOATS: _____

ASSEMBLY POINT _____ DISBANDING POINT _____

PARADE/WALK/RUN ROUTE: _____

SPECIAL EVENT

LOCATION OR FACILITY OF EVENT: _____

STREET USE/CLOSURE

A PETITION FOR STREET USE MUST BE SIGNED BY AT LEAST 75% OF RESIDENTS OVER EIGHTEEN (18) YEARS OF AGE LIVING ALONG THE PORTION OF THE STREET IDENTIFIED AS THE DESIGNATED AREA FOR THE PROPOSED PERMIT AND RETURNED WITH THE COMPLETED APPLICATION AND FEE.

PURSUANT TO ARTICLE IX, ANTIGO MUNICIPAL CODE, I REQUEST A STREET USE PERMIT FOR:

THE _____ (NUMBER) HUNDRED BLOCK(S) OF _____ (STREET NAME).

REASON STREET CLOSURE IS NECESSARY: _____

PLEASE ANSWER **YES OR NO** TO THE FOLLOWING:

1. **ARE YOU SERVING OR SELLING ALCOHOLIC BEVERAGES?** YES NO
YOU MUST OBTAIN A SPECIAL CLASS B LICENSE AT THE CITY CLERK'S OFFICE TO SELL OR SERVE FERMENTED MALT BEVERAGES AT A PUBLIC EVENT
2. **ARE YOU PLANNING ON PLAYING MUSIC OR USING AMPLIFICATION ?** YES NO
EXCESSIVE VOLUME MAY BE DISRUPTIVE TO NEARBY NEIGHBORS. PLEASE LIMIT VOLUME TO A REASONABLE LEVEL
3. **WILL YOU BE WORKING WITH OUTSIDE VENDORS** (I.E., BOUNCY HOUSES/CATERERS) YES NO
PLEASE CONSULT CITY STAFF FOR GUIDELINES IF YOU ARE HIRING OUTSIDE VENDORS
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RULES & REGULATIONS

1. You are **required** by state law to provide sufficient containers to separate recyclable materials from trash at parade and special event locations.
 2. Throwing candy, toys, souvenirs, etc., from moving parade vehicles is prohibited. Please distribute items by walking along parade route.
 3. Operators of all parade units, regardless of power, shall be a minimum of 16 years of age.
 4. Any damage to parking lots, streets, etc. will be billed to the applicant. (i.e. tent stakes in blacktop, etc.)
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REQUESTED CITY SERVICES

- PLEASE NOTE THE REQUESTED CITY SERVICES ARE NOT GUARANTEED
- IT IS YOUR RESPONSIBILITY TO CONTACT THE APPROPRIATE DEPARTMENT

TRAFFIC CONTROL

BARRICADES

TRASH BARRELS

EMS SERVICES ON SITE

OTHER; PLEASE LIST: _____

POLICE: 715.627.6411

FIRE / AMBULANCE DEPARTMENT: 715.623.3633 ext 142

PUBLIC WORKS: 715.623.4754

PARKS: 715.623.3633 ext 131

CITY OF ANTIGO INSURANCE REQUIREMENTS

1. **CERTIFICATE TO BE ON FILE FOR \$1,000,000 IN GENERAL LIABILITY COVERAGE**
2. **THE CITY OF ANTIGO (WITH ADDRESS LISTED) MUST BE LISTED AS AN ADDITIONAL INSURED**
3. **A COPY OF THIS INSURANCE CERTIFICATE MUST BE INCLUDED WITH THIS APPLICATION**

NAME OF YOUR LIABILITY INSURANCE CARRIER _____

We request the City of Antigo waive this insurance requirement. Only the City of Antigo Common Council is empowered to grant an insurance waiver request. AN INSURANCE WAIVER DOES NOT MEAN YOU ARE COVERED UNDER THE CITY'S INSURANCE POLICY.

The applicant shall defend, indemnify and hold harmless the City, its elected or appointed officials, officers, agents, employees and volunteers, from and against all claims, demands, suits, loss, bodily injury, personal injury, death and liability, direct or indirect (including any and all costs and expenses in connection therewith), incurred by any reasons of act or omission of the applicant, its officers, agents, employees or anyone, in any way connected with the applicant's services and obligations under this agreement. This indemnification obligation shall not be limited in any way by any limitation of the amount or type of insurance carried by the applicant. Applicant agrees at its own cost, expense and risk, to defend any and all claims, actions, suits or other legal proceedings brought or instituted against the City, its directors, officers, agents, employees and volunteers or any of them, arising out of the applicants service, omissions or acts in connection with this agreement, and to pay and satisfy any resulting judgments.

BY SIGNING THIS FORM, I ACKNOWLEDGE THAT ALL ANSWERS ARE TRUE AND CORRECT. I ALSO ACKNOWLEDGE THAT I HAVE RECEIVED A COPY OF THE PARADE AND SPECIAL EVENTS OR STREET USE ORDINANCE AS APPROVED BY THE ANTIGO CITY COUNCIL.

APPLICANT'S SIGNATURE _____

DATE _____