

Fee \_\_\_\_\_

Permit # \_\_\_\_\_

**VILLAGE OF WHITEFISH BAY**

**SPECIAL EVENTS PERMIT**

Name of Event \_\_\_\_\_ Date of Event \_\_\_\_\_

Home Phone of Contact person \_\_\_\_\_ Business Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Organization or Sponsor \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name of Alternate Contact Person \_\_\_\_\_ Phone of Alternate Contact Person \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

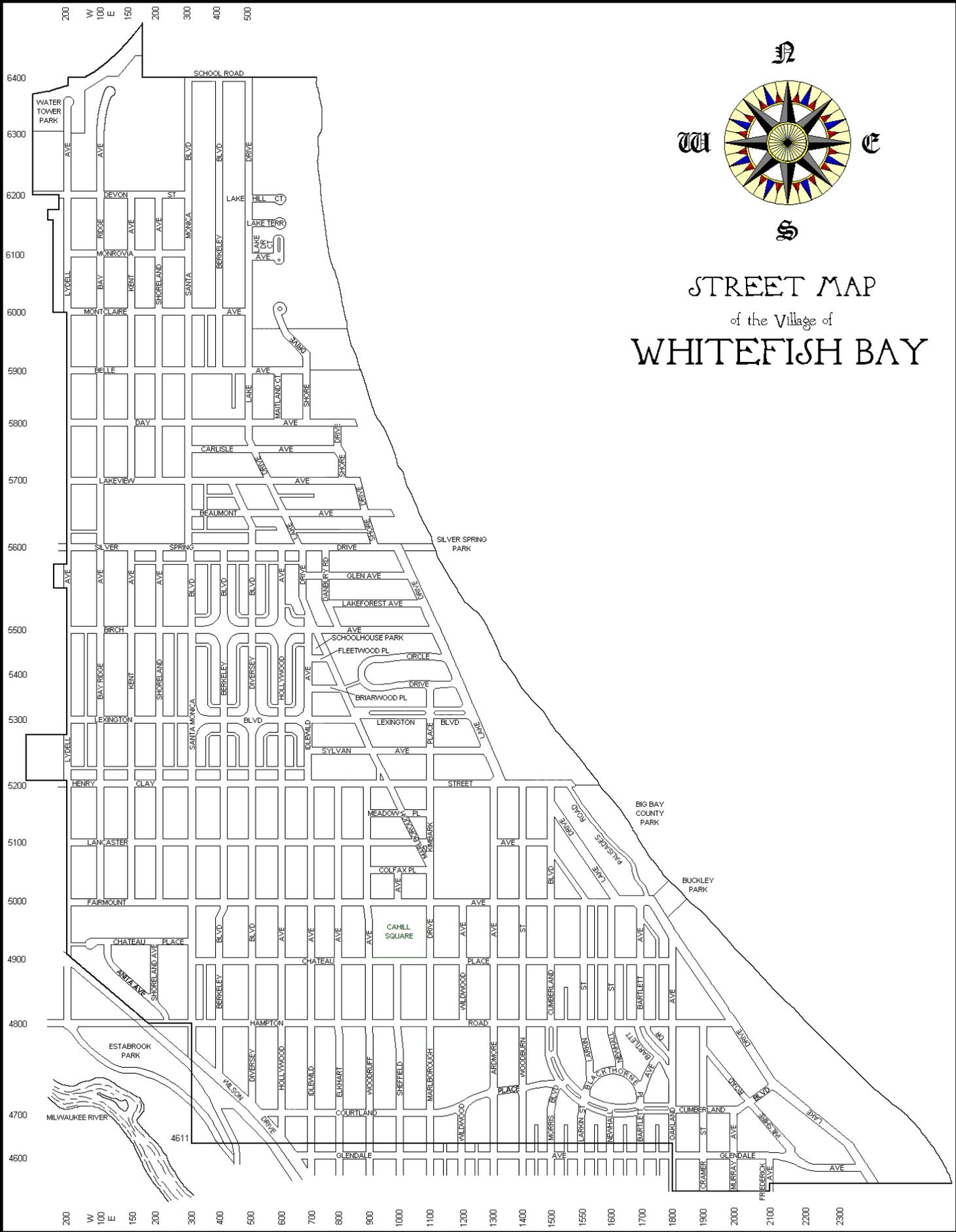
Route of Event: Indicate the route of the event on the map on the following page. Use arrows to indicate the direction of travel. Attach map of entire route if not limited to Whitefish Bay.

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Please provide a brief summary of this event (please include the following items which are not expressly allowed by this permit (1) amplified music, (2) alcohol licensing, (3) fireworks or pyrotechnic displays, (4) animals):

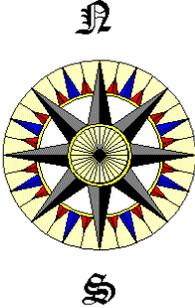
NOTE: The person(s) or sponsor will be responsible for the conduct of the group and for the condition of the public area. The permit is subject to all municipal codes in addition to all rules governing street right-of-ways. The applicant agrees that during use of the public area, the sponsoring organization will not exclude any person from participation in, deny anyone the benefits of, or otherwise subject anyone to discrimination because of race, color, national origin, or handicap. The applicant agrees to indemnify and save the Village harmless from and against all liabilities, claims, demands, judgments, losses, and all suits of law or in equity, costs, and expenses, including reasonable attorney fees, for injury or death of any person, or damage to any property arising from the holding of such special event.

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

\_\_\_\_\_  
Date



STREET MAP  
of the Village of  
WHITEFISH BAY



200 W 100 E 150 200 300 400 500

6400  
6300  
6200  
6100  
6000  
5900  
5800  
5700  
5600  
5500  
5400  
5300  
5200  
5100  
5000  
4900  
4800  
4700  
4600

200 W 100 E 150 200 300 400 500 600 700 800 900 1000 1100 1200 1300 1400 1500 1550 1600 1700 1800 1900 2000 2100 2200 2300

Applicants please fill out the following information:

**General**

<p>What does your organization need from Whitefish Bay Staff?</p> <ul style="list-style-type: none"> <li>• Personnel for setup</li> <li>• Direct traffic</li> <li>• # of picnic tables</li> <li>• garbage pick-up</li> <li>• # of barricades</li> </ul>	<p>Please outline where any street will be shutdown and when, including set up requirements. Display on map.</p>
<p>Hours of Event.</p>	<p>Hours of clean up.</p>
<p>Approximate # of Participants &amp; Vehicles.</p>	<p>Hours of set up.</p>
<p>Do any meters need to be “hooded” before or during the event? Display on map.</p>	<p>Where will the signage for this event be placed? Display on map.</p>
<p>Number and location of rest/refreshment areas. Display on map.</p>	<p>What type of emergency medical care will be available? Has a private ambulance service been contracted?</p>
<p>Is this a rain or shine event?</p>	<p>When is the rain date?</p>
<p>Are there parking restrictions associated with this event? Where? Display on map.</p>	<p>Will alcohol be sold at this event? If so, has a permit been taken out?</p>
<p>Will this event use fireworks or other pyrotechnic or explosive devices?</p>	<p>Has proof of Liability Insurance naming the Village of Whitefish Bay as an additional protected person been given? For larger events, a \$1,000,000 policy is required.</p>

**Volunteers**

How will volunteers be recognized (t-shirts, etc.)?	What times will the signage be placed and removed.
Number and location of volunteers who will be staffing the refreshment areas.	Number and location of volunteers who will be assisting with routing and traffic direction.
Number and location of volunteers who will be responsible for placement and removal of signage.	Number and location of volunteers who will be providing security assistance.
Number of volunteers who will be assisting with clean up of the event.	Number and location of portable toilets. Display on map.

Please list emergency contact telephone numbers for the organizers and volunteers on the day of the event:

**For office use only:**

\_\_\_\_\_  
**Police Chief** Date Approved: Yes No

# Of Police hours (Approximate): \_\_\_\_\_

Total Labor cost: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

Bus Company notified? \_\_\_\_\_

NSFD notified? \_\_\_\_\_

Has Battalion Chief Rick Boehlke (357-0113) been notified if necessary? \_\_\_\_\_

Dispatch notified? \_\_\_\_\_

Emergency vehicle access okay? \_\_\_\_\_

\_\_\_\_\_  
**DPW Director** Date Approved: Yes No

# Of DPW hours (Approximate): \_\_\_\_\_

Total Labor cost: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
**Village Manager** Date Approved: Yes No

Grand Total Labor cost: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Has proof of liability insurance been obtained?

Amount: