

**Village of Ashwaubenon
Application for Special Event**

Submit to: Village Clerk's Office, 2155 Holmgren Way, Ashwaubenon WI 54304
This application must be completed and submitted **45 days* prior** to the event.

**If non-compliant to the submittal, a penalty fee will be applied:
less than 45 days = additional \$100 fee; less than 15 days = may not be considered*

Special Event Fee: \$25 non-profit; \$50 other; N/A

Request for: Parade Run/Walk Exhibition Other _____

Name of Event: _____

Date of Event: _____ Rain Date: _____

Name of Sponsoring Organization: _____

Address: _____ City: _____ State: _____ Zip: _____

Contact Person: _____ Phone: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Time Event to assemble: _____ Time Event to start: _____ end: _____

Specific location of Event: _____

Estimated number of participants: _____ spectators: _____ vehicles: _____ animals: _____

Any above normal noise anticipated? no yes, explain: _____

*** A map and/or route of the Event MUST be attached - including details of layout ***

Are street closures required? no yes Note attached detail for street closure or controlled intersection.
If yes, contact Public Safety at 593-4461 to review details of barricades for closure and/or officers for traffic control.

Will any park or trail be utilized? no yes List park or trail: _____
If yes, contact Director of Parks & Recreation at 492-2331 to review details.

Will food be prepared or served? no yes, explain: _____
If yes, contact Brown County Health Department at 448-6417 to review regulations/approval.

Will alcohol beverages be sold or served? no yes, explain: _____
If yes, contact Clerk's office at 492-2302 for temporary Class B license application.

Will tents or other temporary structures be erected? no yes, explain: _____
If yes, contact Building Inspector at 492-2309 for building/fire regulations and/or tent permit application.

APPLICANT CERTIFICATION

- ✓ I understand that I am responsible to mail notification of road closure to residents and/or businesses at least **2 weeks prior** to the Event.
- ✓ I understand that any costs incurred for Village services, due to the Event, are the responsibility of the above listed organization or person making application. NOTE: These fees may require a deposit upon approval.
- ✓ I understand that a one million dollar insurance certificate may be required and, if so, must be attached naming the Village of Ashwaubenon as an additional insured.
- ✓ I understand that additional permits for food, alcohol, tent, or direct selling may be required to comply with Village of Ashwaubenon municipal code and/or Brown County Health Department regulations.
- ✓ I hereby certify that the foregoing facts concerning this Special Event are true to the best of my knowledge.

_____ Applicant Signature

_____ Date

FOR VILLAGE USE ONLY:

Date application received: _____ By whom: _____

Certificate of Insurance with required coverage on file: no yes waived

Fee paid: \$ _____ Deposit required: no yes Amount: \$ _____

Application Approved Denied by Department: Public Safety Park & Rec Other _____

Reason if denied: _____ Signature: _____

If necessary, Village Board Review/Approval (date): _____

