

**Village of Ashwaubenon
Application for Special Event Permit**

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

Specific location of Event: _____

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

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

A map, sketch or route of the Event must be attached.

Are street closures required? no yes List streets: _____

**Ashwaubenon Public Safety Department to be notified*

Will food be prepared or served? no yes, explain: _____

**Brown County Health Department to be notified*

Will alcohol beverages be sold or served? no yes, explain: _____

**Village Clerk office to be notified*

Will tents or other temporary structures be erected? no yes, explain: _____

**Village Building Inspector and Fire Inspector to be notified*

Applicant Certification

- ✓ It is understood by the applicant that any costs incurred by the Village of Ashwaubenon for services rendered due to the Event are the responsibility of the above listed organization making application. These fees may require a deposit upon approval.
- ✓ A one million dollar insurance certificate may be required and, if so, must be attached naming the Village of Ashwaubenon as an additional insured.
- ✓ 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

Permit fee paid: \$ _____ Deposit required? no yes Amount: \$ _____

Application Approved Denied by Department: Public Safety Public Works

Reason if denied: _____ Signature: _____

Village Board Review/Approval (date): _____