



SE Fee \$ _____	Date Rec'd ____/____/____
Tent Fee \$ _____	
Fireworks Fee \$ _____	
Receipt No. _____	Total Amount Paid \$ _____

Application for a Special Event

IMPORTANT: Incomplete Applications will be returned to the Event Organizer
APPLICATION FEES ARE NON-REFUNDABLE

SECTION 1 – ORGANIZATION INFORMATION – Answer all questions completely. Please PRINT clearly

Name of Organization				
Street Address		City	State	Zip
Telephone Number		Are you a 501(c)3 Organization?		Yes No
Event Contact Person (Last name, First name, Middle Initial)		← THIS INFORMATION MUST BE PROVIDED		
Address		City	State	Zip Date of Birth
Email	Telephone Number		Event Day Telephone Number	

SECTION 2 – EVENT INFORMATION – Answer all questions completely. Please PRINT clearly

Name of Event	Date(s) of Event	Time event will start to form: _____AM/PM	Actual Start time: _____AM/PM	Finish Time: _____AM/PM
LOCATION OF THE EVENT: _____				
WALKS/RUNS: <u>MUST</u> attach a map of the route				
Generally describe your event and its purpose:				
What is the estimated attendance at your event?	Amplified Music?	Number of vendors?	Number of vehicles?	

SECTION 3 – ADDITIONAL INFORMATION.

HEALTH DEPARTMENT – If you will prepare food for the public, contact the Outagamie County Health Department (920-832-5100) for additional permits or approvals.

	No	Yes	Action to be taken:
Will food be prepared and/or served at the event?			
Who will be preparing the food?			
Will portable restrooms be used?			Please review guidelines on portable restrooms

FIRE DEPARTMENT (920-832-6050) – If you answer Yes to any question in this SECTION, Grand Chute Fire Department will contact you for additional permits or approvals.

	No	Yes	Action to be taken:
Will the event be held indoors?			If Yes, what building (Provide street address)
Will a tent or any other temporary structure be erected?			
Will the tent be larger than 200 square feet?			A tent inspection is required \$25 FEE
Will any fireworks or pyrotechnic devices be used during the event?			Fireworks permit is required \$75 FEE

STREET CLOSURES – The Event Organizer or their contractor shall be required to provide an acceptable prepared Traffic Control Plan (TPC) to the Special Events Committee for review and approval no less than 4 weeks prior to the event.

	No	Yes	Action to be taken:
Are you requesting any street(s) to be closed to traffic?			Your barricading contract provider will be required to submit a Traffic Control Plan to the Special Event Committee.
Are you requesting any special parking restrictions?			

PARKS AND RECREATION – Contact Public Works (920-832-1581) to obtain park capacities and rules and for additional permits which may be needed, if applicable.

	No	Yes	Action to be taken:
Will the event be held in a Grand Chute park or utilize any park facilities?			Which park?
Have you reserved the park or pavilion for this purpose?			If No, immediately contact the Public Works.

SECURITY AND CONTROL SECTION

	No	Yes	Action to be taken:
Do you have a plan in place to deal with any medical emergencies that may occur during your event?			
Is security needed for this event?			
Do you have the correct level of insurance for your event?			You may be required to provide a certificate of insurance naming the Town as additional insured.
Will alcoholic beverages be served/sold?			Contact the Town Clerk to obtain a “Temporary Class B” license to allow you to sell/serve beer and/or wine (920-832-5644)

SECTION 4 – LEGAL NOTICE

I understand the filing of this application does not ensure the issuance of this license. I also understand that all Special Event organizers and participants must comply with all applicable Town ordinances, traffic rules, park rules, state health laws, fire codes and liquor licensing regulations. Fees for park facilities, food sales permits, tent and fireworks permits are in addition to the fees submitted for the Special Events Application. I further understand that an incomplete application may be cause for denial of the event.

HOLD HARMLESS INDEMNIFICATION AND DEFENSE.

FOR GOOD AND VALUABLE CONSIDERATION THE APPLICANT AND/OR THE ORGANIZATION AGREES TO INDEMNIFY, DEFEND AND HOLD HARMLESS THE TOWN OF GRAND CHUTE AND ITS OFFICERS, OFFICIALS, EMPLOYEES AND AGENTS FROM AND AGAINST ANY AND ALL LIABILITY, LOSS, DAMAGE, EXPENSES, COSTS, INCLUDING ATTORNEY FEES ARISING OUT OF THE ACTIVITIES PERFORMED AS DESCRIBED HEREIN, CAUSED IN WHOLE OR IN PART BY ANY NEGLIGENT ACT OR OMISSION OF THE APPLICANT/ORGANIZATION, ANYONE DIRECTLY OR INDIRECTLY EMPLOYED BY ANY OF THEM OR ANYONE WHOSE ACTS ANY OF THEM MAY BE LIABLE, EXCEPT WHERE CAUSED BY THE SOLE NEGLIGENCE OR WILLFUL MISCONDUCT OF THE TOWN.

Signature of Applicant: _____

Print Name: _____

SECTION 5 – FEE STRUCTURE

Days before the event		<p>EVENT APPLICATIONS RECEIVED AFTER THE 45-DAY DEADLINE MAY NOT BE APPROVED WITHOUT SHOWING GOOD CAUSE FOR THE DELAY.</p>
45 days or more	\$75	
15-44 days	\$150	<p>A small event is defined as under 500 attendees A large event is defined as 500 to 2000 attendees A significant event is defined as more than 2000 attendees</p> <p>Certain events <u>may</u> require Town Board approval. Submit your application early to prevent delays or denial.</p> <p>DO NOT ADVERTISE YOUR EVENT UNTIL IT HAS BEEN APPROVED.</p>
LESS THAN 15 DAYS	\$300	
Tent Inspection	\$25	
Fireworks Permit	\$75	

Submit completed application along with the appropriate fees to:
 Grand Chute Town Clerk
 1900 W. Grand Chute Blvd.
 Grand Chute, WI 54913-9613

FOR OFFICE USE ONLY

Department	Approve	Deny	By	Reason for Denial
FIRE				
INSPECTION				
POLICE				
PUBLIC WORKS				
TOWN CLERK				

Date licensed issued ____/____/____	License No.
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