

SPECIAL EVENT COMMITTEE DENIAL FORM

MEETING DATE: 3/5/2025

RENTAL: Manitowoc County Fair

ORGANIZER: Jennell Shelton

E-MAIL ADDRESS: jennellshelton@manitowocountywi.gov

RENTAL DATE: 8/20-24/2025

LOCATION/DESCRIPTION: Use and delivery of 30 rolls of fencing, 30 picnic tables, 4 portable stop signs and 4 stop ahead signs

COMMITTEE CONCERNS: The scope of the request is too large to accommodate for free.

COMMITTEE DECISION:

APPROVE	DENY
	Eric Nyce /ec Todd Blaser /ec Brock Wetenkamp /ec

ITEMS TO INCLUDE IN LETTER:

The City of Manitowoc reserves the right to amend its fee structure on a case-by-case basis. Factors include, but are not limited to, resources requested by the applicant, applicant classification, whether and to what extent the event benefits a charity, effect on the community, effect on tourism, history of the event, and potential scheduling conflicts.



CITY OF MANITOWOC - DPI
SPECIAL CONSIDERATION FOR WAIVER OF PART OR ALL FEES
FOR USE OF CITY FACILITIES OR EQUIPMENT

Groups or organizations requesting special consideration for waiver of all or partial fees ordinarily charged to groups for the use of City-owned facilities or equipment must fill out this form, completely, at least 30 days in advance of the event. The request will be reviewed by the Special Event Committee and/or the Public Infrastructure Committee and the group or organization will be notified by e-mail or letter of their decision(s). Groups or organizations must be current on all financial accounts with the City of Manitowoc in order to be considered for a waiver of any fees.

ALL QUESTIONS MUST BE ANSWERED

Name of event: Manitowoc County Fair

Applicant: Jennell Shelton

JennellShelton@manitowoccountycl.gov

4921 Expo Dr, PO Box 1011, Manitowoc WI 54221-1011

920-683-4378

Address

Phone

1. Name of club/organization making request Manitowoc County Expo

Club/organization: Same as above

Address

Phone

Email

2. Facility requested: _____ # of people _____

Equipment requested: 30 pieces of fencing; 30 Picnic Tables; 4 portable stop signs; 4 portable stop ahead signs

3. Specific dates and hours facility/equipment will be used: Date(s) August 20-24 2025 Hrs. _____

4. Please explain your request, as to what fees you desire waived or reduced and the reason you believe you are entitled to a waiver Picnic tables for seating, the stops signs to be used at Ice Center Entrance and Merchants Gate Entrance

5. Which do you consider your group to be?

A. Community service _____ B. Non-profit ☒ _____ C. Private business _____
D. Club or organization _____ E. Other, please explain _____

6. Will money be collected, tickets sold, concessions sold or money raised in conjunction with the event? Yes ☒ _____
No _____

7. If #6 is "yes," explain and list specific charges and anticipated revenues There is admission for the county fair.

8. What will revenues be used for? The Manitowoc County Expo is overseen by the county but does not receive tax levy dollars.

The Manitowoc County Expo is self-sufficient.

9. Do you wish to meet personally with the Committee to further explain your request? Yes _____ No ☒ _____

10. Insurance requirements: The City reserves the right to require a Certificate of Insurance evidencing coverage with sufficient limits listing the City as an additional insured as well as an Additional Insured Policy endorsement accompanying the Certificate of Insurance. Said certificates must be turned in to the City Clerk no less than 30 calendar days prior to the event.

Legal Notice and Submission: I understand the filing of this application does not ensure approval of a fee waiver. The undersigned agrees to indemnify and hold the City of Manitowoc harmless for any and all damages, claims or personal injuries that may occur or are alleged to have occurred during this event. The undersigned agrees to be responsible for any damage caused to said facility or equipment by mischief or negligence of any person or party. By signing, I acknowledge that I have the authority to bind the sponsoring organization and acknowledge that I have received, read and understand the guidelines set forth in this application.

Signed Jennell Shelton

Digitally signed by Jennell Shelton
DN: cn=Jennell Shelton, o=DPI, email=JennellShelton@manitowoccountycl.gov, c=US
Date: 2025.02.27 19:32:44 -0500

Date February 27, 2025

Please attach any additional information which you feel will assist the committee in evaluating your request.

When completed, return this form to the City of Manitowoc – Parks Division
900 Quay St. Manitowoc, WI 54220 · Phone 920-686-3580 · E-mail parksadmin@manitowoc.org