SPECIAL EVENT COMMITTEE APPROVAL FORM

MEETING DATE: 7/26/2023

EVENT NAME: Heartless Concert

ORGANIZER: PetSkull Brewing - Paul Hoffman

E-MAIL ADDRESS: paul@petskullbrewing.com

EVENT DATE: 8/12/2023

NEW OR RECURRING: new

LOCATION/DESCRIPTION: Chicago Tribute band to play a free concert on the grass area next to PetSkull.

Using the bandwagon.

COMMITTEE CONCERNS: This approval from the Special Event Committee is contingent on PetSkull

Brewing providing proper insurance coverage by August 9th at 12pm.

COMMITTEE DECISION:

DENY

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u	OIA	CIL	MUI		NEW	UIRED:

ITEMS TO INCLUDE IN LETTER:

Special Event Applications must be received a minimum of 60 days in advance in order to avoid a late fee. Insurance must be received 30 days before an event to avoid the \$300 late insurance fee. Please pay the \$400 Late Application/Insurance Fee to City of Manitowoc, Attn: Dept. of Tourism, 900 Quay St, Manitowoc, WI 54220. The Special Event Committee would like to note that while there were multiple late applications and insurance coverages this summer for PetSkull, they are only charging \$400 insted of the full total, which would have been \$1400 to cover the four events.

Event 3 Copy to: Clerk



City of Manitowoc

SPECIAL EVENT PERMIT APPLICATION

DOWNLOAD FORM

Download the PDF Special Event Application to your computer or network drive, open with Adobe Reader and fill in. We do not recommend using any web browser to open the form as most have issues with fillable PDF Forms. If you do not have Adobe Reader installed on your computer, you may download the latest version free of charge: http://get.adobe.com/reader/otherversions

APPLICANT INFORMATION	ON SITE CONTACT INFORMATION During Event
Business/Org Name PetSkull Brewing Company	On-Site Contact Paul Hoffman
Name of Applicant Paul Hoffman	On-Site Cell Phone # 920-946-5670
Street Address 1015 Buffalo St	On-Site Security Contact Name Paul Hoffman
Mailing Address (If different)	On-Site Security Contact Phone # 920-946-5670
City, State, Zip Manitowoc WI 54220	-
Primary Phone 920-946-5670	-
Cell Phone 920-946-5670	-
Email paul@petskullbrewing.com	
Wisconsin Tax Exempt	
EVENT INFORMATION	Document Attached
Event Description and Map with Event Setup and Parking Required (Some maps	s available online)
Event Name Heartless - The Midwest's Premiere Tribute to Heart LIVE	Public Event YES X NO
Location PetSkull Brewing	Estimated Total Attendance 500
	Estimated Attendance 100
Staging Area	from outside City of Manitowoc Event Website https://www.facebook.com/events/5979478557
Event Date(s) <u>08/12/2023</u>	_
Event Start Time 6:30 AM PM	
Event End Time 9:00 AM PM	
Setup Date(s) <u>08/11/2023</u>	
Setup Start Time 6:00 AM PM	
Teardown Date(s) 08/14/2023	
Teardown End Time 4:00 AM PM (Event to be cleaned by 9 a.m. on day following the event)	

FACILITY REQUESTS	VENDORS & MONEY EXCHANGE				
Facility Location					
Mariner's Trail FROM	X Alcohol Served End Time10:00pm				
то	■ Beverage or Food Sales				
Athletic Field(s) Request	Merchandise Sales				
Special Power Requirements	Vendor(s) How many				
Special Lighting (ex. ball diamonds)	Collecting Money Donations				
ADA Accommodations	Charging Admissions On-Site				
ADA ACCOMINICUATIONS	Credit Card Sales/Transactions				
	Expected Revenue				
	Revenue to be used for				
ROUTE					
Route map must be submitted with application					
Describe location(s) + time(s)					
☐ Timed Route					
Road Crossing Describe where + If assistance needed					
Course Marking					
Describe type					
Cidewall.					
Sidewalk Describe usage					
EVENT STRUCTURES					
Site map must be submitted with application Staking Structures into Ground	Carnival Rides #				
(greater than 6")	Dumpster #				
Bounce House #	Stage #				
Portable Restrooms #					
	Tent # Size Other # Describe				
Signs/Banners #	U Other # Describe				
EVENT FEATURES	SOUND				
Animals # Type	Amplified Sound				
Fireworks - Time	Start Time 6:00 AM PM				
Drone #	End Time 9:00 AM PM				
Lights/Spotlights #	Type of Sound Live Music				

subject to non-refundable fees. Photos a	nd more in	with the Spe formation ab	cial Event Con oout rental ite	ms ca	n be fo	und at www.manitowoc.org.
DELIVERY DATE 08/11/2023	TIME _	6:00	_ AM 🔀	PM		LOCATION Southeast corrner of Buffalo/No 11th
PICKUP DATE 08/14/2023	TIME _	6:00	_ AM 🔀	PM		Place Items in original drop-off location after event.
*Indicate Quantities on Line						
GAMES						
☐ Bean Bag Toss						
☐ Ring Toss						
Sports Kit						
STAGING / RISERS						
☐ RISERS – 4' x 8' Wooden Platforms	i					
6" H 12"H	18"H _					
☐ Staging — 8'x12'						
▼ Portable Bandwagon – 35′x8′						
TABLES & SEATING (Do NOT count any	tables, be	nches, etc. a	already locat	ted at	the p	ark or in a facility)
☐ Banquet tables – 8'x40"						
Benches – 4' wooden						
☐ Bleachers – 15'x5' portable ☐ Chairs – metal, folding						
Picnic Tables – 6' wooden						
Picnic Tables – 8' wooden, ADA ac	cessible _					
TENTS						
TENTS						
☐ Tent – 10'x 20'						
TRAFFIC CONTROL ITEMS						
☐ Barricades – 2'						
☐ Barricades – 3′						
☐ Barricades – 8′						
☐ Barricades — 12' rail-type						
Channelizer drums – 3' reflective_						
☐ Cones – 18" ☐ Cones – 28" reflective						
Delineators – 42" reflective						
Parking posts with concrete base -	– 42"H (ro	pe or tape	not included	4)		
☐ Traffic signs (sign only – typically p				/		
Road Closed						
Road Closed Ahead						
<u> </u>						
Ц						
MISCELLANEOUS ITEMS						
☐ Disc golf basket – portable						
☐Grill – 2' x 3' portable, outdoor	_					
P.A. system – microphone, sound b	ooard, 2 sp	peakers wit	h stands			
Post pounder / driver						
☐ Power pedestal – portable ☐ Safety vests						
Security stanchions						
☐ Snow fence – 50' rolls – plastic	woo	den				
☐Snow fence – posts)				
Ticket booths – outdoor						
▼Trash barrels Other						
LI Ottlet	_					

EQUIPMENT REQUESTS

EHICLES Parking must be included on site map
Expected number of vehicles 200
Where do you plan to park vehicles City streets
Are there any special parking considerations No (VIP, ADA, Security, Emergency Vehicles, etc)
AFETY & SECURITY The City requires security based on attendance
Do you need assistance from: Police Dept Fire Dept/Ambulance
Describe
Date/Time
Location
Other than dialing 911, do you have a plan in place to deal with medical emergencies that may occur? YES NO (If so, please attach)
ADDITIONAL QUESTIONS
Please attach any additional information which you feel will assist the Committee in evaluating your request.
Do you have any questions/comments/additional requests?
EGAL NOTICE
I understand the filing of this application does not ensure approval of a Special Event. I also understand that all Special Event organizers and participants must comply with all applicable City Ordinances, traffic rules, park rules, state health laws, fire codes, and liquor licensing regulations. Fees for park facilities, temporary beer/wine licenses, stake and fireworks permits, and other necessary licenses and permits are in addition to the fees submitted for the Special Events Application. I further understand that an incomplete application may be cause for the denial of the event.
The undersigned agrees to indemnify and hold the City of Manitowoc harmless for any and all damage claims or personal injury claims occurring during this event. It is further agreed that all personal property of any kind brought on the premises shall be at the sole risk of the undersigned, and that the City of Manitowoc shall not be liable for any injury, loss or damage to said property or injury to any persons on the premises. The undersigned agrees to be responsible for any damage caused to said facility or equipment by mischief or negligence. By signing, I acknowledge that I have authority to bind the sponsoring organization and acknowledge that I have received, read and understand the Special Events Guidelines and Policy and agree to be bound by all requirements as stated in the Special Events Policy and it is hereby incorporated by reference into this signed agreement.
Date of birth of applicant 08 / 24 / 1971
Signature of Applicant: Date: 07/24/2023

Rev. 12/2021

E-MAIL

PRINT



CITY OF MANITOWOC - DEPARTMENT OF TOURISM 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). A financial report for the previous two years indicating all expenses and all revenues of the group/organization may be requested by the committee. Groups or organizations must be current on all financial accounts with the City of Manitowoc. For more information about park facilities, equipment for special events and/or the City of Manitowoc Special Event Guidelines and Policy for events on City property, visit www.manitowoc.org/parks.

Name of event: "Heartless - The Midwest's Premiere Tribute to Heart"

1. Name of club/organization making request: PetSkull Brewing Company Address. 1015 Buffalo St Manitowoc WI Telephone 920-946-5670 2. Names of club officers: Name Address **Telephone** President Paul Hoffman Treasurer _____ 3. Facility requested: None # of people. Equipment requested: City Bandshell Date & time facility/equipment will be used: Date(s) 8/12/23 Hrs. All Day 4. Please explain your request, as to what fees you desire waived or reduced and reasons. I am looking to 5. have the fees waived for the use of the City Bandshell on the grass lot next to our patio. "Heartless" is a major draw and we are looking at bringing upwards of 500 people to beautiful downtown Manitowoc, specifically to our new River Point District. This is a free/non-ticketed event for our community. The city's assistance in helping offset a major cost would be greatly appreciated. 6. Which do you consider your group to be? B. Non-profit_____ C. Private business. X A. Community service_____

D. Club or organization E. Other, please explain E.

7.	Will money be collect Yes. X No_	cted, tickets sold, concessions sol	d or money raised in co	onjunction with the event?
8.	If #7 is "yes," explain or tickets. This is a fr	n and list specific charges. We vee event to attend.	vill sell our beer, but we	will not be charging entry fee
9.	What will revenues b	e used for? Helping our business	s to pay our bills	
10.	•	personally with the Committee to de the following information of	-	Yes No <u>. X</u>
	Name	Email		Phone #
under ordin- tempo waiva The u or per broug liable agree signir receiv requir	rstand that all Special E ances, traffic rules, parl orary beer/wine licenses able. I further understand andersigned agrees to in rsonal injury claims occupht on City property shape for injury, loss or dames to be responsible for ang, I acknowledge that it wed, read, and understand	s application does not ensure application does not ensure applicated and participants is rules, state health laws, fire coos, stake and firework permits, and that an incomplete application addennify and hold the City of Macurring during this event. It is full be at the sole risk of the under age to said property or injury to any damage caused to said facility I have authority to bind the spond the Special Events Guidelines Special Events Guidelines and I	must comply with all a des and liquor licensing d other necessary licens a may be cause for deni- anitowoc harmless for a rther agreed that all per- signed, and that the Cit- any persons on the pres- ty or equipment by mis soring organization and and Policy and agree t	applicable municipal gregulations. Fees for sees and permits are nonial of the waiver. any and all damage claims resonal property of any kind ty of Manitowoc shall not be mises. The undersigned schief or negligence. By dacknowledge that I have to be bound by all
Signe	ed Paul 112	/df	Date7/	/5/23

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

When completed. return this form to:

City of Manitowoc – Tourism Department 900 Quay St., Manitowoc, WI 54220 E-mail: tourism@manitowoc.org

Fax: 920-686-6525 Phone: 920-686-3508