



SPECIAL EVENTS APPLICATION FORM

- 1. Name/Description of Event: Run for Shelter 5k
- 2. Date of Event: 5 / 2 / 2015 If multiple days, Start Date: / / End Date: / /
- 3. Time Event will start to form: 0730 AM PM Actual Start Time: 0900 AM PM Finish Time: 1130 AM PM
- 4. Name and complete address of Organization/Individual organizing the Event:

Lakeshore Humane Society

Name of organization, if applicable

Telephone # (920) 860 - 1169

Melissa Jacquart

Name (first, middle, and last) of individual organizing the Event

Business # (920) 684 - 5401
(if applicable)

1551 N. 8th Street

Street Address

Date of Birth 07 / 26 / 1982
of organizing individual

Manitowoc, WI 54220

City, State, ZIP

Is the sponsoring organization a 501(c)(3) organization? Yes No

5. Email address of organizer: mjacquart@comcast.net

6. Location of the Event: Please attach a detailed map or diagram of your event. Also, please indicate the direction of the route, if any, including all turns and the number of traffic lanes to be used. _____

Will the event be held in a Manitowoc park or utilize any park facilities? Yes No Which park? Lincoln Park

Have you reserved the park for this purpose? Yes No If no, please contact the Parks Department at (920) 686-3580.

Does the event require streets to be closed? Yes No If yes, which street(s): _____

Will need police assistance to control traffic at intersections of 8th Street and Reed Avenue, 8th Street and School Street and 8th Street and Magnolia Drive as race participants cross. Will also need to block parking lanes on south side of Magnolia Drive from N. 18th Street to start/finish line at Magnolia and N. 8th

Will the event be held indoors? Yes No If yes, what building? _____
Building Name & Street Address

7. Tell us about your Event:

Will food be prepared and/or served at the event? Yes No
You are responsible for obtaining any necessary permits for food from the Manitowoc County Health Department.

Will you be having a band or amplified music? Yes No

What is the estimated attendance at your event, including observers? Approximately 200

How many vendors will be at your event? 0 How many vehicles? Approximately 50-100

Do you require any special parking restrictions? Yes No If yes, what type, when, and where: Parking lane on south side of Magnolia Drive blocked from N. 18th Street to N. 10th Street

Will any of the following services be required? Barricades Clean-up Street-sweeping

For help defining your parking, clean-up, and barricade needs, please contact the Department of Public Works at (920) 686-6550.

Will a tent or any other temporary structures be erected? Yes No

Cones and no parking signs from Public works

Will any fireworks or pyrotechnic devices be used during the event? Yes No

Contact the Fire Department at (920) 686-6540 to secure the proper permits for firework usage.

What toilet facilities will be made available to your participants? Indoor Outdoor

Please describe the toilet facilities that will be provided, including their locations and the number of units: _____

Single stall bathroom located inside shelter.

Will alcoholic beverages be served/sold? Yes No If yes, a "Special Class B" license will allow sale/service of beer and/or wine. Please contact the City Clerk's Office at (920) 686-6950 to obtain a license.

8. Safety and Security for Your Event:

Do you have the correct level of insurance for your specific event? Yes No

Please see the Special Events Insurance Form to ensure you have the proper coverage. You must submit the insurance certificate to the City Clerk's Office at least 10 days before your event.

Designated contact person for the event:

Melissa Jacquart

Name of Day-of coordinator

(920) 860 1169
Phone # before event

(920) 860 1169
Phone # the day of the event

Is security needed for this event? Yes No

Name of Security Coordinator

() _____
Phone # before event

() _____
Phone # the day of the event

Do you have a plan in place to deal with medical emergencies that may occur during your event? Yes No

9. Fees & Reimbursement: The standard fees for equipment rental and licenses will apply. The City may also require reimbursement for extraordinary expenses for your event. To request a waiver of the extraordinary expenses, please submit a letter detailing your request.

10. Legal 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, liquor licenses, tent 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 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.

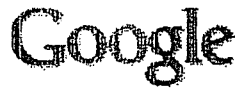
Signature of Applicant: Melissa Jacquart

Date: 10/10/14

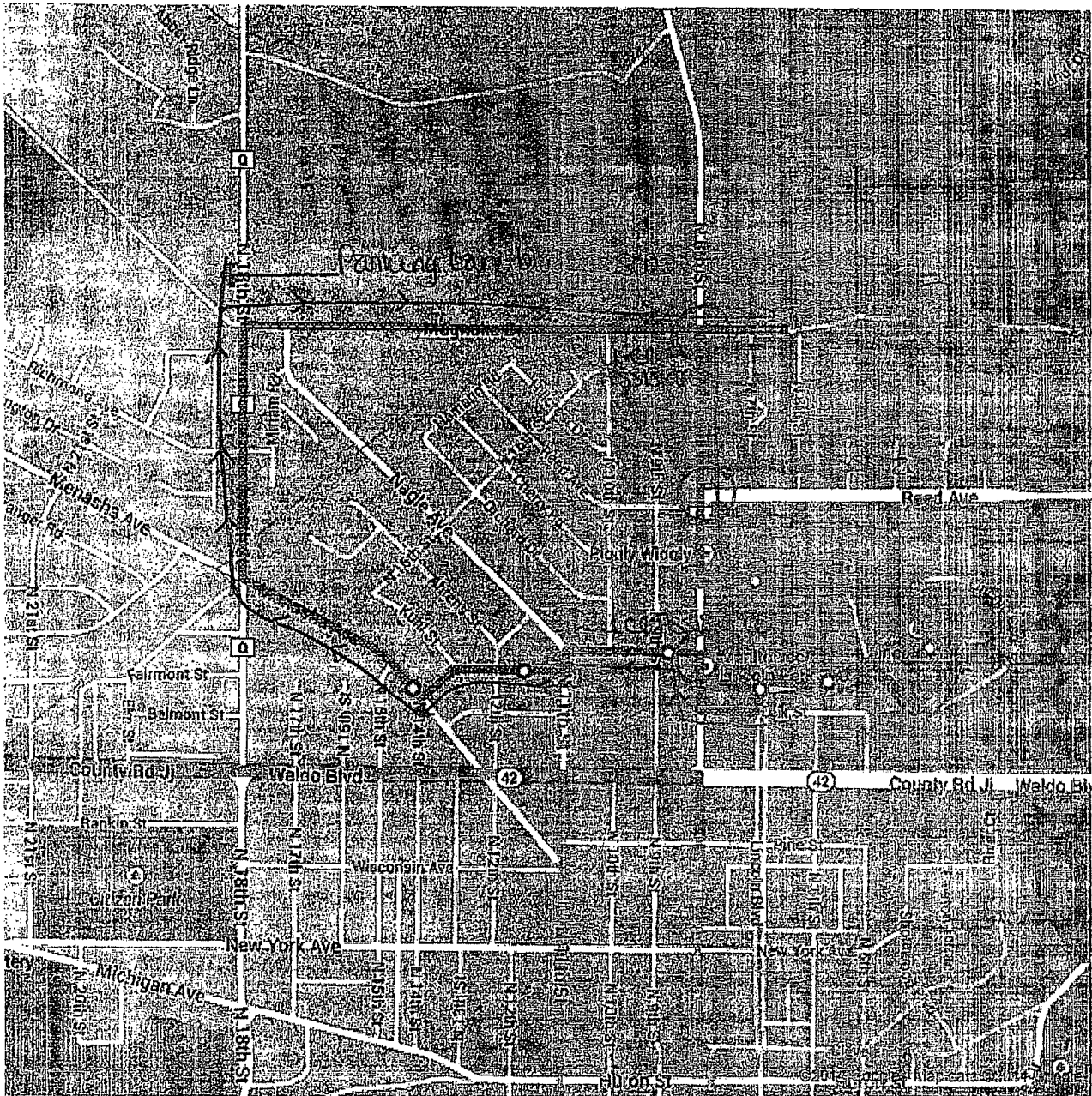
COMMITTEE RECOMMENDATION: _____ DATE: _____


COMMON COUNCIL APPROVAL: _____ DATE: _____

DID COMMON COUNCIL WAIVE FEES & REIMBURSEMENT ? Yes No





Directions to Magnolia Dr
3.2 mi – about 12 mins





 Magnolia Dr


- 1. Head west on **Magnolia Dr** toward **N 7th St** go 0.1 mi
total 0.1 mi


-  2. Take the 2nd left onto **N 8th St**
About 1 min go 0.1 mi
total 0.2 mi


-  3. Take the 3rd left onto **Lincoln Park Rd**
About 1 min go 0.3 mi
total 0.8 mi


-  4. Take the 2nd right toward **Lincoln Park Rd** go 0.1 mi
total 0.9 mi


-  5. Turn right onto **Lincoln Park Rd** go 489 ft
total 1.0 mi


-  6. Take the 1st left to stay on **Lincoln Park Rd** go 0.1 mi
total 1.1 mi


-  7. **Lincoln Park Rd** turns slightly left and becomes **Lincoln Blvd** go 243 ft
total 1.2 mi


-  8. Turn right onto **Oak St** go 0.1 mi
total 1.3 mi


-  9. Turn right onto **N 8th St** go 417 ft
total 1.4 mi


-  10. Take the 1st left onto **School St**
About 1 min go 0.1 mi
total 1.5 mi

-  11. Turn left onto **N 11th St** go 151 ft
total 1.6 mi

-  12. Take the 1st right onto **Fairmont Ln**
About 49 secs go 0.1 mi
total 1.7 mi

-  13. Take the 3rd right onto **Menasha Ave**
About 1 min go 0.3 mi
total 2.1 mi

-  14. Take the 1st right onto **N 18th St** go 0.1 mi
total 2.2 mi

-  15. Take the 2nd right onto **Magnolia Dr**
About 2 mins go 0.8 mi
total 3.2 mi

 Magnolia Dr

These directions are for planning purposes only. You may find that construction projects, traffic, weather, or other events may cause conditions to differ from the map results, and you should plan your route accordingly. You must obey all signs or notices regarding your route.

Map data ©2014 Google

Directions weren't right? Please find your route on maps.google.com and click "Report a problem" at the bottom left.

RE: Lakeshore Humane Society Run for Shelter 5-2-15

REVIEWING DEPARTMENT RECOMMENDATION

Department to complete the form and return to the City Clerk ASAP, but not later than 14 days.
Your request was acted upon in accordance with the contents of this application with the following conditions

PARKS _____
(683-4537) _____

	N/A	NO CHARGE	CHARGE
LABOR _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EQUIPMENT _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MATERIALS _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Dept. Head or Designee Signature _____ Date ____/____/____

POLICE _____
(686-6500) _____

	N/A	NO CHARGE	CHARGE
LABOR _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EQUIPMENT _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MATERIALS _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Dept. Head or Designee Signature _____ Date ____/____/____

FIRE _____
(686-6500) _____

	N/A	NO CHARGE	CHARGE
LABOR _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EQUIPMENT _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MATERIALS _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Dept. Head or Designee Signature _____ Date ____/____/____

DPW _____
(683-4550) _____

	N/A	NO CHARGE	CHARGE
LABOR _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EQUIPMENT _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MATERIALS _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Dept. Head or Designee Signature _____ Date ____/____/____