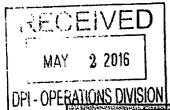


SPECIAL EVENT COMMITTEE APPROVAL FORM

MEETING DATE: 5/9/2016 EVENT NAME: Jagemann Stamping Company Picnic ORGANIZER: Jagemann Stamping Company - Amy Jagemann **EVENT DATE: 8/27/2016 NEW OR RECURRING: New** LOCATION/DESCRIPTION: Request to use Silver Creek Park & concession stand for a picnic for approx. 600 people. Food & beverages will be served. Portable toilets will be rented by company. No waiver of fees requested. Stake permit for bounce house. ESTIMATED CITY COSTS: ESTIMATED EVENT HOLDER CHARGES: POLICE 0 LATE APPL. FEE FIRE LICENSES **PARKS** STAKE PERMIT 0 50 RECREATION **DELIVERY CHARGES STREETS** 0 (if delivery requested) 0 TOTAL TOTAL COLLECTED 50 COMMITTEE CONCERNS: COMMITTEE DECISION: DENY **APPROVE** COUNCIL ACTION REQUIRED: ITEMS TO INCLUDE IN LETTER:



City of Manitowoc SPECIAL EVENTS APPLICATION FORM

NOTICE: This application must be turned in to the Parks Office a minimum of 60 days prior to the date of the event. Your Certificate of Insurance must be on file in the City Clerk's Office a minimum of 10 days prior to the date of the event. If you have questions, please see the Special Event Guidelines & Policy for a list of contacts.

1.	Name/Description of Event: Jagemann Stamping Co. Summer Piwic
2.	Date of Event: 8 / 20 / 16 multiple days, Start Date: / / End Date: / /
	Include dates and times needed for setup and take down / cleanup.
3.	Time Event will Begin Sctup: 8:00 MMPM Actual Start Time: 11:00 AMPM Finish Time: 4.00 AMPM
4.	Name and Complete Address of Organization/Individual Organizing the Event:
	Name of organization responsible for event
	Name (first, middle, and last) of event organizer Telephone # PRIOR TO event (416) 241-6718
	Day Na 129ch Telephone # DURING event (20 860, 143)
	Contact name DURING event (if different)
	5757 W Cuter St.
	Street Address
	Manitowoc, WISADD E-mail address ajagemann Pyrgemann Com City, State, Zip of event organizer
	Is the sponsoring organization a 501(c)(3) organization? Yes No
5.	Location of the Event: Generally describe your event and its purpose and attach a DETAILED map or diagram of your event.
	Also, indicate the direction of the route, if any, including all turns and the number of traffic lanes to be used. Maps of the City and its parks are available online at www.manitowoc.org.
	Silvercreak lark-Meal served for employers and
	tamilies.
	Use of concession stand (rental fee and
	deposit already paid
	Short soll
	Will the event be held in a Manitowoc park or utilize any park facilities? Yes Which park? Silver Creok \(\square\) No
	What park facilities will be needed (buildings, tennis courts, bull diamonds, disc golf courses, etc.)?
	plangward, disc got
	Have you reserved the park &/or park facilities? Yes No If no, please contact the Parks Division at (920) 686-3580.
	Does the event require streets to be closed? Yes No If yes, which street(s):
	~
	It is YOUR RESPONSIBILITY to provide federally approved traffic control items; however they may be rented from the Streets &
	Sanitation Division.
	Will the event be held on the sidewalk? Yes No



		Contain manager
. Mariners Trail Permit:		W. 1
Will any portion of the Mariners Trail be used? Yes No	OF TWO RIVERS	Manual Coc
Will any portion of the Mariners Trail be used? Yes No If yes, where on the trail will the event begin:		
Where on the trail will the event end:		
When use of the trail is requested, consideration is given to how the public's use of the trail will be		
clean up, as well as other services provided by a City staff may be billed on a cost-recovery basis.		
a copy of event liability insurance naming BOTH CITIES as co-insured at least 10 days prior "exclusive use" of the trail and the general public must be allowed to share the permitted are:	to the event. P	ermits do not allow
This agreement is made and entered into by and between the Cities of Two Rivers and Manitowoc,		
and the above-named individual, hereinafter called "Permittee." The parties agree as follows: Book months in advance. The Permittee understands his/her responsibility is to set up, clean up and resto		
listed above.	no premises vem	in the line period
Limitation of Ura: Parmittee porces that the number of passage on the served premites during the ser	utal mariad shall	may are and the
Limitation of Use: Permittee agrees that the number of persons on the rented premises during the re- capacity of the facility and that no intoxicating liquor or fermented malt beverages shall be served to		
premises rented for the purpose stated above and no other. In the event this Limitation of Use is not		
charged and agrees to pay a fee of \$200.		
Pennittee agrees to abide by the rules and regulations contained in this agreement.		
FOR OFFICE USE ONLY:		
Signature of City of Two Rivers designee: Date:		
	THE GOAL TERPTONICHERS IN TO	THE PERSON NAMED IN COLUMN TO STATE OF THE PARTY OF THE P
What is the estimated attendance at your event, including observers? (000		
Tell Us About Your Event: What is the estimated attendance at your event, including observers? How many vendors will be at your event? How many vehicles? Do you require any special parking restrictions? Yes No If yes, what type, when, and when the special parking restrictions?	205/	727
How many vendors will be at your event? How many vehicles?	900	
Do you require any special parking restrictions? Yes No. If yes, what type, when, and wh	nere:	
Parking on grassy areas of a park is not allowed without prior approval. Contact the Police Depart	turner if the Man	output is a said of
	ment ij trajjie ce	introl is needed.
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	h Department.	
П. Ж.		
Will you be having a band or amplified music? Yes No		
Will a loudspeaker or similar electric sound amplification system be used outdoors? Yes	lo	
If yes, what hours:	U	
Will the City need to provide any special electrical assistance or lighting (of ball diamonds, etc.)?	Yes No	
If yes, please describe:		
Contact the Parks Division at 686-3580 with questions.		
Will any of the following services be required? Clean-up Street-sweeping		
For help defining your parking, clean-up, & traffic control needs, please contact the Streets & Sanita	tion Division at	(920) 686-6550.
		ances of prometing the properties.
Will any fireworks or pyrotechnic devices be used during the event? Yes No		
If yes, contact the Fire Department at (920) 686-6540 to secure the proper permits for firework usage	ge.	
Will animals be present at the event? Yes No If yes, please indicate what types of animals, h	IOW MADY SEA AV	pected and where
they will be located.	iow many are ex	pected, and where
1		
What toilet facilities will be made available to your participants? Indoor Outdoor	Entrate the second seco	
Please describe the toilet facilities that will be provided, including their locations and the number of	units:	

Will alcoholic beverages be served/sold? Yes No 1f 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.

	In the case of a pr a detailed explan			nt alcohol lice	nse, d	o you need an	exten	sion of your premise? Yes No If ves, give	
	Do you require a	waiver of the	restri	ction to serve	alcoho	ol in a park? [Y?	== 	
8.	Equipment Needed for Your Event: Equipment rental charges will apply unless a waiver of some or all fees is approved. A non-waivable delivery fee will be charged if delivery/pickup by City personnel is needed. Delivery fees are based on total rental costs.								
To make arrangements to pick up the items yourselves, please contact the Parks Division at 686-3580. All items must be pand returned weekdays between 7:00 A.M. and 2:30 P.M. It is the renter's responsibility to sign in all materials in the Stre Sanitation office or with a Parks staff member prior to unloading at the time of return. It is unacceptable to drop off rental outside of return hours and without signing them in.									
	Please indicate where a	ind when the i	tems	snould be deli					
Ples	se indicate the total nu	mber of item	s req	uested:					
Stree	ets & Sanitation Divisio	n Equipment (686-	<u>3580);</u>					
D	iiaadaa	# <u>Needed</u>		# of Days*		Cost/Day		<u>Total</u>	
Бап	ricades 2°		х		х	\$3.00	=	Flachere	
	3.		x		â	\$3.00	=	Flashers Flashers	
	8,		x	•	x	\$4.00	73	1 1001110	
	Rail type-long		x		x	\$2.00	=		
	Rail type-short		X		x	\$2.00 \$2.00	2.	****	
Char	nnelizer Druins		x		â	\$3.00	a		
	18"		Х		X	\$1.50	=		
	28"		Х		X	\$1.50	=		
Safe	ty vests		X		X	No charge	•	No Charge	
	w fence					ŭ		,	
	Rolls		Х		X	\$4.00	=		
	Posts		X		X	No Charge	=	No Charge	
	Post driver/pounde		x		Х	No Charge	_	No Charge	
Traff	lic signs	·	X		X	\$2.00	13	Description	
			x		X	\$2.00		Description	
			x		X	\$2.00	=	Description	
Traff	fic signs (Portable)		x		X	\$3.00	=	Description	
11411	ire artina (1 ormore)		X		x	\$3.00		Description	
			x		x	\$3.00	=	Description	
Othe	τ (list items and amount	s)	<u>~</u>						
		· · · · · · · · · · · · · · · · · · ·		70	1 2			and the state of t	
		<u>(40-3340):</u>		ı couni any p		\$5.00	e can. ⇔	s, etc. already located at the park.	
	tuet tables, 8'		X		X		-		
	benches		X		X	\$7.00			
	ic tables		X		X	\$7.00	=	Danadation	
	rs, platform		X		X	\$15.00	=	Description	
	rity stanchions		X		X	\$ 5.00	=		
	. 10'x10'		X		X	\$30.00	=		
	. 10'x20'		X		X	\$35.00	=		
	et booths, outdoor		X		X	\$15.00	=	N1- (1)	
	n cans		X		X	No Charge	=	No Charge	
Weng	ger portable bandwagon,	35x8'**	x		x	\$240.00	=		
Other	r (list items and amounts	s)							
									

TOTAL RENTAL CHARGES

^{*}Include the day of return but not the day of pickup/delivery. Items must be picked/returned weekdays between 7:00 am and 2:30 pm.

^{**}The bandwagon shall not be removed from the City limits without the approval of the Park & Recreation Committee and must be delivered/setup by City Personnel.

If you are requesting delivery/pickup by City personnel, the following non-waivable delivery fees will apply.

Y FEES
Delivery Fee
\$ 50.00
\$ 75.00
\$125.00
\$250.00
\$350.00

Delivery fees will be adjusted based on actual items rented.

9.	Stake Permit: There is a \$50.00 NON-WAIVABLE stake permit fee per event, if any items will be staked into the ground. The event organizer is responsible for ensuring Diggers Holline is contacted a minimum of three business days before set-up.							
	Will any of these items (or items of similar nature) be erected or placed on the event grounds?							
	Tent or canopy Yes No							
	Fence Yes No							
	Sign \(\busepec \text{Yes} \buildress No							
	Bounce house Yes No 1f electric, where will item be plugged in?							
	Other Yes No If electric, where will item be plugged in?							
	If yes for any, give a detailed explanation under #5,							
10.	Safety and Security for Your Event:							
•••	Do you have the correct level of insurance for your specific events Yes No							
	Please see the Special Events Insurance Form to ensure you have the proper coverage. You must submit the insurance certificate ANL required endorsements to the City Clerk's Office at least 10 days before your event.							
	Do you need assistance from the Police or Fire Departments? Yes No If yes, please describe:							
	Mattellist (91=,918.0337)							
	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?							
	The City reserves the right to require a detailed written plan.							
11.	Fees & Reimbursement: Unless waived by the Special Event Committee, the standard fees for all rentals and licenses will apply. The City may also require reimbursement for extraordinary expenses. Charges will apply for lost, stolen, or damaged equipment.							
	Is a waiver of some or all fees requested? Yes No							
	If yes, please explain what fees you desire waived or reduced and the reason(s):							
	Will money be collected, tickets or concessions sold, registration fees charged, or money raised in conjunction with the event? Yes No If yes, explain and list specific charges							
	What are your estimated revenues and what will the revenues be used for?							

Please attach any additional information which you feel will assist the committee in evaluating your request. The City reserves the right to request a current financial report for the previous two years indicating all expenses and all revenues of the group/organization.

12. 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, 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 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 12 1914	7/0/11/
Signature of Applicant: () - yhlmour	Date: 5/2/16



CERTIFICATE OF LIABILITY INSURANCE

DATE (NIM/DD/YYYY) 04/20/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER, THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). CONTACT NAME: Burkart-Heisdorf - Sheboygan A Division of McClone 1807 Erie Avanue PHONE IAIC, No. EXU: E-MAIL ADDRESS: FAX (A/C, No): Sheboygan, WI 53081 Mark McCabe, CPCU INSURER(S) AFFORDING COVERAGE NAIC # INSURER A: Zurich North America Jagemann Stamping Co. & TMJ Investments LLC INSIBED INSURER C 5757 West Custer Street Manitowoc, WI 54220-9790 INSURER D : INSURER E : INSURER F:

			TE NUMBER:	REVISION NUMBER:					
	HIS IS TO CERTIFY THAT THE POLICIES NDICATED. NOTWITHSTANDING ANY RE								
C	ERTIFICATE MAY BE ISSUED OR MAY	PERTAIN,	, THE INSURANCE AFFORDE	ED BY THE POLICIE	S DESCRIBE	D HEREIN IS SUBJECT TO			
ĮΕ	XCLUSIONS AND CONDITIONS OF SUCH	I POLICIES	Š. LĪMITS SHOWN MAY HAVE (BEEN REDUCED BY	PAID CLAIMS.	.			
INSR LTR	TYPE OF INSURANCE	INSR WVD	POLICY NUMBER	MM/DD/YYYY	POLICY EXP (MM/DD/YYYY)	LIMIT	8		
	GENERAL LIABILITY				['	EACH OCCURRENCE	5	1,000,000	
Α	X COMMERCIAL GENERAL LIABILITY		CPO0185461	10/01/2015	10/01/2016	DAMAGE TO RENTED PREMISES (Ea occurrence)	3	300,000	
	CLAIMS-MADE X OCCUR	1				MED EXP (Any and person)	s	10,000	
					'	PERSONAL & ADV INJURY	\$	1,000,000	
					!	GENERAL AGGREGATE	\$	2,000,000	
ļ	GEN'L AGGREGATE LIMIT APPLIES PER:			1		PRODUCTS - COMP/OP AGG	3	2,000,000	
_	POLICY PRO- LOC		<u></u>	<u> </u>	l!		\$		
	AUTOMOBILE LIABILITY			1		COMBINEO SINGLE LIMIT (Ea accident)	5	1,000,000	
Α	X ANY AUTO	[CPO0185461	10/01/2015	10/01/2016		5		
ĺ	ALL OWNED SCHEDULED AUTOS				1		\$		
	HIRED AUTOS AUTOS	1			1 !	PROPERTY DAMAGE (PER ACCIDENT)	\$		
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\vdash	X UMBRELLA LIAB X OCCUR		İ			EACH OCCURRENCE	5	10,000,000	
A	EXCESS LIAB CLAIMS-MADE	.	AUC0185558-00	10/01/2015	10/01/2016	AGGREGATE	\$	10,000,000	
	DED X RETENTIONS 0	3 1					5		
_	WORKERS COMPENSATION	1				WC STATU- OTH-			
A	AND EMPLOYERS' LIABILITY ANY PROPRIETOR PARTNER/EXECUTIVE		WC0185457	10/01/2015	10/01/2016		\$	500,000	
	CFFICER/MEMBER EXCLUDED? (Mandatory In NH)	N/A				E.L. DISEASE - EA EMPLOYEE		500,000	
j	If yes, describe under DESCRIPTION OF OPERATIONS below				1	E.L. DISEASE - POLICY LIMIT		500,000	
A	Transportation		CPO0185461	10/01/2015	10/01/2016			250,000	
	,	1 1				ĺ		-	
	1								
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL	LES (Attacl	n ACORD 101, Additional Remarks S	ichedule, if more space is	required)			-	
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CE	RTIFICATE HOLDER			CANCELLATION					
<u> </u>	SILCR-1								
l	SILUR*I								

THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. SILVER CREEK PARK 3001 S 10th St **AUTHORIZED REPRESENTATIVE** Manitowoc, WI 54220 Mark McCabe, CPCU

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