

# SPECIAL EVENT COMMITTEE APPROVAL FORM

**MEETING DATE:** 7/21/2021

**EVENT NAME:** WAIVER OF FEES: Mtwc. Co. Human Service Dept. Staff Apprec. Lunch

**ORGANIZER:** Manitowoc County Human Services - Lisa Stephan

**E-MAIL ADDRESS:** lisastephan@manitowoccountywi.gov

**EVENT DATE:** 9/15/2021

**NEW OR RECURRING:** New

**LOCATION/DESCRIPTION:** Use of Lincoln Park cabin 1 for a staff appreciation lunch for all staff at Human Services

**COMMITTEE CONCERNS:**

**COMMITTEE DECISION:**

APPROVE	DENY
Shawn Alfred/sr Todd Blaser/sr Jason Freiboth/sr Dan Koski/sr	

**COUNCIL ACTION REQUIRED:**

**ITEMS TO INCLUDE IN LETTER:**

Please remind participants that dogs are not allowed in the Lincoln Park Zoo area or inside park buildings.

RECEIVED

CITY OF MANITOWOC - DEPARTMENT OF PUBLIC INFRASTRUCTURE  
SPECIAL CONSIDERATION FOR WAIVER OF PART OR ALL FEES  
FOR USE OF CITY FACILITIES OR EQUIPMENT

JUL 15 2021

CITY OF MANITOWOC

ENGINEERING

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 (2) 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.

ALL QUESTIONS MUST BE ANSWERED

Name of event: Manitowoc County Human Service Dept. Staff Appreciation Lunch

1. Name of club/organization making request Manitowoc County Human Services

Address 926 S. 8th St. Telephone 920-683-2792

2. Names of club officers: Name Address Telephone Lisa Stephan

President \_\_\_\_\_

Secretary \_\_\_\_\_

Treasurer \_\_\_\_\_

3. Facility requested: Lincoln Park Cabin 1

Equipment requested: \_\_\_\_\_

4. Specific dates and hours facility/equipment will be used: Date(s) 9/15/21 Hrs. 10:30-2pm

5. Please explain your request, as to what fees you desire waived or reduced and reasons. We are looking to host a staff appreciation lunch for all HSD staff at this location

6. Which do you consider your group to be?  
A. Community service \_\_\_\_\_ B. Non-profit X C. Private business \_\_\_\_\_  
D. Club or organization \_\_\_\_\_ E. Other, please explain \_\_\_\_\_

7. Will money be collected, tickets sold, concessions sold or money raised in conjunction with the event?  
Yes \_\_\_\_\_ No X

8. If #7 is "yes," explain and list specific charges \_\_\_\_\_

9. What will revenues be used for? \_\_\_\_\_

10. Do you wish to meet personally with the Committee to discuss this request? Yes \_\_\_\_\_ No X  
If "yes," please provide the following information of individual to contact:  
Name \_\_\_\_\_ Address \_\_\_\_\_ Telephone \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

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 - Dept. of Public Infrastructure  
900 Quay St., Manitowoc, WI 54220 · Phone 920-686-3580 · Fax 920-686-6525 · E-mail parksadmin@manitowoc.org

Handwritten initials and date: A.N. 5/9/21