



CITY OF MANITOWOC

WISCONSIN, USA

www.manitowoc.org



January 31, 2020

Colleen Homb
PO Box 2315
Manitowoc, WI 54220

RE: Magical Trolley Ride to the North Pole – 12/4-12/5/2020 – Waiver of Fees

Dear Ms. Homb:

Your request for a waiver of fees for the use of traffic control equipment in order to block parking stalls for trolleys on the north side of Franklin Street between S. 8th and S. 9th Streets on December 4 & 5, 2020, for the Magical Trolley Ride to the North Pole event, was acted upon by the Special Events Committee on Wednesday, January 29, 2020 at which time the Committee granted your request.

After the event, please move traffic control equipment to the side. When listing sponsors for your event, we ask that you consider listing the City of Manitowoc since some or all fees have been waived for the event.

Please refer to the enclosed outlined conditions for a Special Event permit and insurance requirements.

If you have any questions, please contact me at 920-686-6950.

Very truly yours,

Deborah Neuser
City Clerk

DN:mrk

cc: Chief of Police Nick Reimer
Fire Chief Todd Blaser
Sandy Ronski, Operations Clerk II
Karen Dorow, Business Manager

Deborah Neuser, CMC, City Clerk
CITY HALL · 900 Quay Street · Manitowoc, WI 54220-4543
Phone (920) 686-6950 · Fax (920) 686-6959 · dneuser@manitowoc.org

SPECIAL EVENT COMMITTEE APPROVAL FORM

MEETING DATE: 1/29/2020

EVENT NAME: WAIVER OF FEES: Magical Trolley Ride to the North Pole

ORGANIZER: Lakeshore CAP - Colleen Homb

E-MAIL ADDRESS: collenh@lakeshorecap.org

EVENT DATE: 12/4 to 12/5/20

NEW OR RECURRING: Recurring

LOCATION/DESCRIPTION: Use of traffic control equipment to block parking stalls for trolleys on the north side of Franklin St. between S 8th & S 9th Sts.

DISCUSS ADA ACCESSIBILITY (Parking, toilets, ADA picnic tables, etc.) _____

ELECTRICAL NEEDED _____

GARBAGE PICKUP _____

WATER NEEDED _____

EVENT SIGNS _____

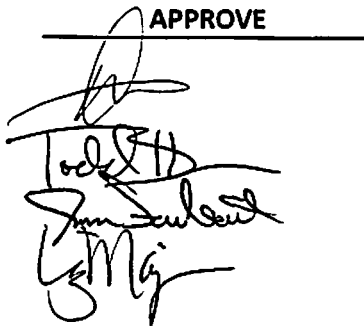
INFLATABLES/TENTS/FENCING _____

STREET CLOSURE TIME ^{NO PARKING} by 2 pm

PARKS DELIVERY TIME _____

COMMITTEE CONCERNS:

COMMITTEE DECISION:

APPROVE	DENY
	

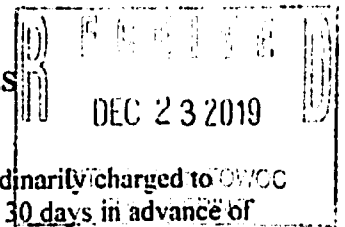
COUNCIL ACTION REQUIRED:

ITEMS TO INCLUDE IN LETTER:

After event, move ~~boxes~~ traffic control equipment to the side

When listing sponsors for your event, we ask that you consider listing the City of Manitowoc since some or all fees have been waived for the event.

CITY OF MANITOWOC - PARKS DIVISION
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 Public Infrastructure Committee and the group or organization will be notified within 15 days of submitted request.

A CURRENT FINANCIAL REPORT FOR THE PREVIOUS TWO (2) YEARS INDICATING ALL EXPENSES AND ALL REVENUES OF THE GROUP/ORGANIZATION MUST ACCOMPANY THIS FORM PRIOR TO THE COMMITTEE REVIEWING THE REQUEST.

ALL QUESTIONS MUST BE ANSWERED

Name of event: Magical Trolley Ride to the North Pole

1. Name of club/organization making request Lakeshore CAP Inc. of Wisconsin
Address PO Box 2315, Manitowoc, WI 54220 Telephone 920-682-3737

2. Names of club officers:

<u>Name</u>	<u>Address</u>	<u>Telephone</u>
President <u>Colleen Homb</u>	<u>PO Box 2315, Manitowoc, WI</u>	<u>920-682-3737</u>
Secretary <u>CASA Director-Julies Riblev</u>	<u>812 Washington Street, Manitowoc, WI</u>	<u>920-242-6727</u>
Treasurer _____	_____	_____

3. Facility requested: Parking spaces on North side of Franklin Street
Equipment requested: barricades and cones

4. Specific dates and hours facility/equipment will be used: Date 12/4 and 12/5 Hrs. 12-7:30pm

5. Please explain your request, as to what fees you desire waived or reduced and reasons.
We are requesting all fees to be waived. Funds spent on this expense to not end up going to the programs this fundraiser is supporting. If waived it is additional financial support staying within Lakeshore CAP programs that benefit the residents of Manitowoc County.

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 X No _____

8. If #7 is "yes," explain and list specific charges Tickets are \$30/adult and \$25/child. Tickets include the entire event which is a trolley trip to the North Pole (Holiday Inn) to see Santa, do crafts, games and other family friendly activities.

9. What will revenues be used for? To support programs at Lakeshore CAP and CASA of Northeast WI that work with at-risk families and children.

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 Colleen Homb Date 12/19/19

Sandy Ronski

From: Colleen Homb <colleenh@lakeshorecap.org>
Sent: Thursday, December 19, 2019 5:04 PM
To: ParksAdmin
Subject: Waiver for barricades.docx
Attachments: Waiver for barricades.docx

Hello,

I'm not sure if it is too early to make this request for barricades and cones in December of 2020, but we don't want to repeat what we did this year. We REALLY appreciate your willingness to go the extra mile for us this year!

Happy Holidays!

Colleen Homb
Lakeshore CAP