

CITY OF MANITOWOC

WISCONSIN, USA www.manitowoc.org



October 11, 2017

Mr. Richard Rosinsky Manitowoc Co. Miracles Special Olympics 1716 Western Ave. Manitowoc, WI 54220 684-6909 GRAFFS@1501.nex

RE:

Manitowoc Co. Miracles Special Olympics Tournament, June 16 or 17 (rain date), 2018

Dear Mr. Rosinsky:

The above request was acted upon by the Special Event Committee at the meeting of October 9, 2017, at which time the Committee granted your request. Please contact the Manitowoc Youth Baseball Association to reserve the MYBA ball diamonds.

Your certificate of insurance on file expires on December 31, 2017. At least 10 days prior to your event, please provide us with a new Certificate of Insurance along with the separate additional insured endorsement.

For 2017, as part of the Mayor's budget all fees for special events were waived. The 2018 budget has not been set. Non-waivable fees will be charged as set by policy.

Deborah Newser

Deborah Neuser City Clerk

DAN:mrk

cc:

Chief of Police Nick Reimer

Fire Chief Todd Blaser

Randy Junk, Operations Division Mgr. (Streets)

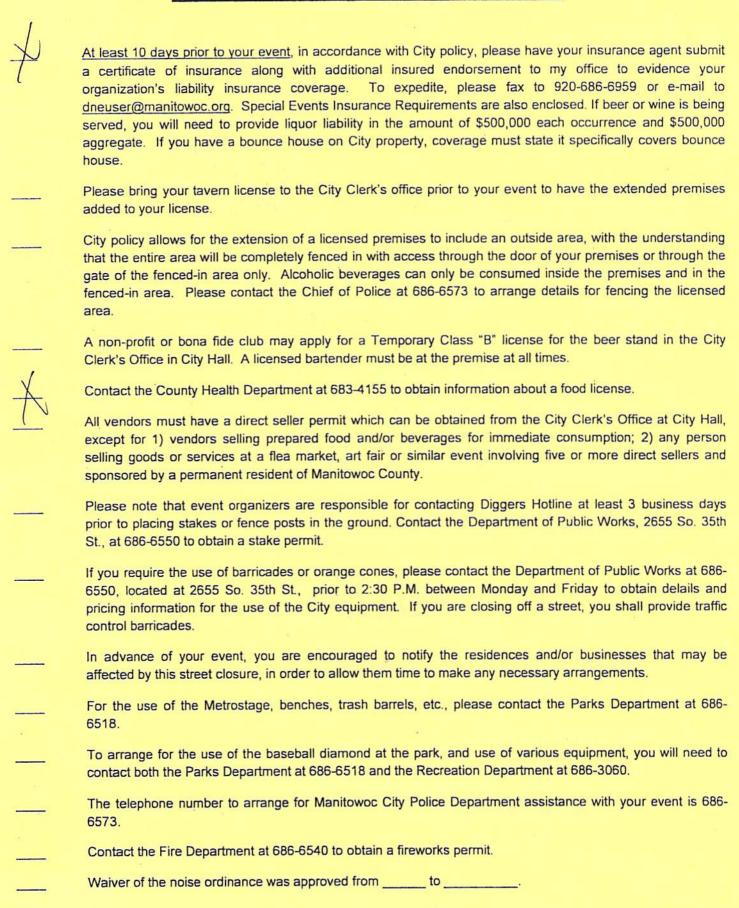
Chad Scheinoha, Operations Division Mgr. (Cemetery/Parks)

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



Conditions for Special Event Permit



SPECIAL EVENT COMMITTEE APPROVAL FORM

ORGANIZER: Manitowoc County Miracles Special Olympics - Richard Rosinsky

Park for a Special Olympics tournament in the sports of bocce ball, t-ball,

LOCATION/DESCRIPTION: Use of ball diamonds, concession stand & open air shelter at Citizen

NEW OR RECURRING: Recurring

EVENT NAME: Miracles Special Olympics Tournament

MEETING DATE: 10/9/2017

EVENT DATE: Jun. 16 or 17, 2018

	& softball. Use of picnic ta	bles, trash cans, & garbage bags. Us	e of
	various parks for practices		
ESTIMATED CITY COSTS:		ESTIMATED EVENT HOLDER CHA	RGES:
POLICE	0	LATE APPL. FEE (<60 days)	
FIRE	0	STAKE PERMIT	
PARKS	489.38	DELIVERY CHARGES	125
RECREATION		(if delivery requested)	
STREETS	0	TOTAL E.H. CHARGES	125
TOTAL	749.38	1	
		GRAND TOTAL	874.38
COMMITTEE CONCERNS:		· ·	
COMMITTEE DECISION:			
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APPROV	E	DENY	
SOM SKATENARY	2		
CARRIE			
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4			
(xWloz	ļ		
COUNCIL ACTION REQUIRED:			
COUNCIL ACTION REQUIRED.			
ITEMS TO INCLUDE IN LETTER:			
	Contact the Manitowoc Yo	outh Baseball Association to reserve	the MYBA ball
	diamonds.		

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 confacts.

Date of Event:		Name/Description of Event: MANITOWOC Co. MIRACLES Special OLYMPICS TOURI
Time Event will Begin Setup: 6 AMPM Actual Start Time: 9 AMPM Finish Time; 5 AMPM Name and Complete Address of Organization/Individual Organizing the Event: Name of organization responsible for event Richard R Rosinsky Telephone # PRIOR TO event (\$\frac{926}{926}) & \$\frac{944}{929}\$ Name (first, middle, and has) of event organizer Constact name DURING event (fidifferent) Telephone # DURING event (\$\frac{926}{926}) & \$\frac{944}{929}\$ Old Organization as DURING event (fidifferent) Telephone # DURING event (\$\frac{926}{926}) & \$\frac{924}{929}\$ Old Organization as DURING event (fidifferent) Telephone # DURING event (\$\frac{926}{926}) & Old Organization as DURING event (\$\frac{926}{926}) & Old Organization 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.manjtowoc.org. The second 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.manjtowoc.org. The second of the North Second Organization of the Event Control of the Event Control of the Event Contr		Date of Event: 6 / 6 / 8 If multiple days, Start Date: End Date:
Name and Complete Address of Organization/Individual Organizing the Event: MANITOWGE Co. MITALES Sp. OLy. Name of organization responsible for event RICHARD ROSINSKY Telephone # PRIOR TO event (920) 684 6 909 Name (first, middle, and last) of event organizer GLENN GRAFF Telephone # DURING event (928) 242 0166 Contact name DURING event (if different) 1716 WESTERN NVE Street Address MANITOWOC W. 54320 E-mail address GRAFFS Co. So. Next of event organizer Is the sponsoring organization a 501(c)(3) organization? Yes of event organizer Is the sponsoring organization 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. These sevent of at Clyse Forth. These a Special Olympics Lower on the special of at Clyse Forth. These accepted by the City and its parks are available online at www.manitowoc.org. These sevent of at Clyse Forth. These a Special Olympics Lower of the City and its parks are available online at www.manitowoc.org. These sevent of at Clyse Forth. These a Special Olympics Lower on the Special Olympics Lower organizer On the special of Special Olympics Lower of the City and its parks are available online at www.manitowoc.org. Will the event be held in a Manitowoc park or utilize any park facilities? Yes Which park? Clyse Porth. No What park facilities will be needed (buildings, tennis courts, ball diamonds, disc golf courses, etc.)? Burelall + softball decreases of parcur sheller, Concession stand 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 &	j	Include dates and times needed for setup and take down / cleanup.
MANITOWOC Co. MITACLES Sp. OLy. Name of organization responsible for event RICHARD R ROSINSKY Name (first, middle, and last) of event organizer Contact name DURING event (Fibrer) Telephone # PRIOR TO event (Fibrer) Tolephone # DURING event (Fibrer) TIG WESTERN AVE Street Address MANITOWOC W. 5432D E-mail address CRAFFS (Sol.). Net of event organizer Is the sponsoring organization a 501(c)(3) organization? Yes \[\] No 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 rout, if any, including all turns and the number of traffic lanes to be used. Maps of the City and its parks available online at www.maintowoc.org. This second 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 rout, if any, including all turns and the number of traffic lanes to be used. Maps of the City and its parks available online at www.maintowoc.org. This second 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 rout, 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.maintowoc.org. This second 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 City and its parks of the City		Time Event will Begin Setup: 6 AMPM Actual Start Time: 9 AMPM Finish Time; 5 AMPM
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It is YOUR RESPONSIBILITY to provide federally approved traffic control items; however they may be rented from the Streets &		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):
		L. VOLID DEGROUGHER FINA.
Damianon Division		It is YOOK RESPONSIBILITY to provide jederally approved traffic control items; however they may be rented from the Streets & Sanitation Division.

Will the event be held on the sidewalk? Yes No





6.	Mariners Trail Permit: 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 affected. Set up / take down and clean up, as well as other services provided by a City staff may be billed on a cost-recovery basis. The event organizer must provide a copy of event liability insurance naming BOTH CITIES as co-insured at least 10 days prior to the event. Permits do not allow "exclusive use" of the trail and the general public must be allowed to share the permitted areas.
	This agreement is made and entered into by and between the Cities of Two Rivers and Manitowoc, Wisconsin, hereinafter called "City" and the above-named individual, hereinafter called "Permittee." The parties agree as follows: Bookings must be made no earlier than 12 months in advance. The Permittee understands his/her responsibility is to set up, clean up and restore premises within the time period listed above.
	Limitation of Use: Permittee agrees that the number of persons on the rented premises during the rental period shall not exceed the capacity of the facility and that no intoxicating liquor or fermented malt beverages shall be served to minors. Permittee agrees to use premises rented for the purpose stated above and no other. In the event this Limitation of Use is not complied with, Permittee shall be charged and agrees to pay a fee of \$200.
	Permittee agrees to abide by the rules and regulations contained in this agreement.
	FOR OFFICE USE ONLY: Signature of City of Two Rivers designee: Date:
7.	Tell Us About Your Event: What is the estimated attendance at your event, including observers? 500 People
	How many vendors will be at your event? None How many vehicles? None
	Do you require any special parking restrictions? Yes No If yes, what type, when, and where:
	Parking on grassy areas of a park is not allowed without prior approval. Contact the Police Department if traffic control 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 Department.
	Will you be having a band or amplified music? Yes No
	Will a loudspeaker or similar electric sound amplification system be used outdoors? Yes No
	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 Nona required. For help defining your parking, clean-up, & traffic control needs, please contact the Streets & Sanitation Division at (920) 686-6550.
	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.
	Will animals be present at the event? Yes No If yes, please indicate what types of animals, how many are expected, and where they will be located.
	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:

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.

		······				L CHARGES		
Other ((list items and amount	ts)						
wenge	r portable bandwagon	ı, 35x8'**	x		x	\$240.00	=	
frash o		20.000	X		X	No Charge	=	No Charge
	booths, outdoor		X		X	\$15.00	=	
	0'x20'		X		X	\$35.00	=	
	0'x10'		X		X	\$30.00	=	
	ty stanchions		X		X	\$ 5.00	=	
	, platform		X		X	\$15.00	==	Description
Picnic	tables		X		X	\$7.00	=	
	enches		X		X	\$7.00	=	
Banqu	et tables, 8'		X		X	\$5.00	=	· · · · · · · · · · · · · · · · · · ·
Parks J	Division Equipment (686-3580): <i>I</i>	o NO	T count any p	icnic :	tables, garbas	e can	s, etc. already located at the park.
JMCI. ((list items and amoun	13 <i>)</i> _						
Other -	(list items and ama	*c)	X		X	\$3.00	==	Description
			X		X	\$3.00	_	Description
raific	signs (Portable)		X		X	\$3.00	=	Description
T 42° -	sione (Part-1-1		X		X	\$2.00 \$3.00	=	Description
			X		X	\$2.00	=	Description
ıratiic	signs		X		X	\$2.00	=	Description
m	Post driver/pound	er	X		X	No Charge	=	No Charge
	Posts		Х		X	No Charge	=	No Charge
	Rolls		X		X	\$4.00	=	N 0
Snow			**	•		***		
Safety			X		X	No charge	-	No Charge
0.0.	28"		X		X	\$1.50	=	W. Ch
	18"		X		X	\$1.50	==	
Cones			•		٠,	61.60		
	elizer Drums		X		X	\$3.00	=	
	Rail type-short		X		X	\$2.00	=	
	Rail type-long		X		X	\$2.00	=	
	•		X V		X	\$4.00 \$2.00	=	•
	3°		X X		X			Flashers
	3'		X		X	\$3.00 \$3.00	=.	Flashers
рыпс	aces 2'		v		v	\$3.00	=	Elechere
Barrica	adec	# <u>Needed</u>	٠	# of Days*		Cost/Day		Total
	·	# Mandad		# of Done		Cont/Des		Total
Streets	s & Sanitation Divisio	n Equipment	(686-	<u>3580);</u>				
			_					·
Please	indicate the total nu	ımber of iter	ns req	uested:				
-								
_		<u></u>						
P	lease indicate where a	and when the	items :	should be deliv	vered:	1		
	•		_	_				•
	utside of return hours					-		-
S	anitation office or wit	h a Parks stat	ff mem	iber prior to un	ıloadi	ng at the time	of ren	urn. It is unacceptable to drop off rental materials
ar	nd returned weekdays	between 7:0	O.A.M.	and 2:30 P.M	. It is	the renter's re	spons	sibility to sign in all materials in the Streets &
T	o make arrangements	to pick up the	e item:	s yourselves, p	lease	contact the Par	rks D	ivision at 686-3580. All items must be picked up
					•			
d	elivery/pickup by Ci	ty personnel	is nec	ded. Delivery	fees	are based on to	otal re	ental costs.
E	quipment rental charg	es will apply	unless	s a waiver of se	ome o	or all fees is ap	prove	d. A non-waivable delivery fee will be charged i
					•			
3. E	quipment Needed fo	r Your Even	t:					
	De journales a			-			_	
	Do you require a v	waiver of the	restric	tion to serve a	icoho!	lin a park?	Yes	s Ł/No
							_	
	a detailed explan							
	In the case of a pro	emise with a	conten	t alcohol licen:	se, do	you need an c	xtens	ion of your premise? Yes No If yes, giv

[.] 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.

DELIVERY FEES				
Total Cost of Items Rented	Delivery Fee			
\$0.00 - \$100.00	\$ 50.00			
\$100.01 - \$250.00	\$ 75.00			
\$250.01 - \$500.00	\$125.00			
\$500.00 - \$1,000.00	\$250.00			
\$1,000.01 and above	\$350.00			

Delivery fees will be adjusted based on actual items rented.

€.	Stake Permit: There is a S50.00 NON-WAIVABLE stake permit fee per event, if any items will be staked into the ground. The event organizer is responsible for ensuring Diggers Hotline 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		
	Bounce house Yes No If 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 event? X Yes No		
	Please see the Special Events Insurance Form to ensure you have the proper coverage. You must submit the insurance certificate AND		
	required endorsements to the City Clerk's Office at least 10 days before your event.		
	Demonstration of the Property of the Control of the		
	Do you need assistance from the Police of Fire Departments? Yes No If yes, please describe: 100 Case 07		
	serious injuries we will contact 911, otherwise sum morted		
	Do you need assistance from the Police or Fire Departments? Yes \[] No If yes, please describe: \[\frac{\text{In Case of}}{\text{of}} \] Serious Conjunctes we well Confact 911, otherwise none needed		
	Name of Security Coordinator () () Phone # before event Phone # the day of the event		
	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? X Yes No		
	The City reserves the right to require a detailed written public safety plan.		
	ony that the right to require a destance written public sujety plant.		
1.	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.		
	Stake Permit Fees, License Fees and Delivery Fees will not be waived.		
	Is a waiver of some or all fees requested? X Yes No		
	If yes, please explain what fees you desire waived or reduced and the reason(s): Reduce the fees for		
	use of diamondo, open air shelter " Concession Start Vile		
	If yes, please explain what sees you desire waived or reduced and the reason(s): Reduce the fees for use of chamorols, open air shelter Concession Start, We are a soon - profit Agency		
	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	<u> </u>	3 <u>0</u>		
Signature of Applicant:			Date:	·
			٠.	

MANTOWOC PARK & RECREATION DEPARTMENT SPECIAL CONSIDERATION FOR WAIVER OF PART OR ALL FEES FOR USE OF CITY FACILITIES OR EQUIPMENT

Groups/Organizations requesting special consideration for waiver of all or partial fees ordinarily charged to groups for 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 Park and Recreation 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
1.	Name of Club or Organization making request Mantone Courty Mirocles Special Olym Address 13228 Proper Red. Newton 53063 Telephone 6933977
	Address 1308 Progress Rol Newton 53063 Telephone 6933979
2.	Names of Club Officers: Name Address Telephone
	President Kris Zollles 13228 Proness Rd. Newton 6933977
	Secretary Richard Rosensky 1110 Hamilton 50 6846909
	Treasurer
3.	Facility requested: Cityens Pork, Habreson Park, Westford Pork
	Equipment requested:
4.	Specific Dates and Hours facility/equipment will be used: Date S. a. attoched Hrs. Some
5.	Please explain your request, as to what fees you desire waived or reduced and reasons. Educa fees for use of decemends, open cur shalter, + concession stand
	Which do you consider your group to be? A. Community Service B. Non Profit 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
8.	If Yes, explain and list specific charges
9.	What will revenues be used for?
10.	Do you wish to meet personally with the Board/Committee to discuss this request? Yes No
Sign	
	When completed, this form is to be returned to The Manitowoc Recreation Department, 930 North 18th Street, Manitowoc, WI 54220.
Con	Denied Denied Date

MANITOWOC PARK & RECREATION DEPARTMENT EQUIPMENT & FACILITY REQUEST FORM

FACILITY REQUESTED	EOUIPMENT REGUESTED (Re 2 bectire)
SB DiamondsX	Garbage Cans 12 extra
BB Dlamonds	Picnic Tables 12 extra
Soccer Field	Benches
Tennis Courts - How Many?	Other
Pool	June 16th / June 17 Rundlate
AREA REQUESTED Citizens Park	- Diamondo 2+3, open air shelles
Number of People Say DATE DESIRED	- Diamonds 2+3, open ar shelles for stand ON BACK TIME REQUESTED 7AM-5PM Be Specific
WHAT WILL THE EQUIPMENT/FACILITY	BE USED FOR? Special Olympus
Summer Sports Tours	
PERSON WHO WILL BE RESPONSIBLE R	chard Rosinsky TELEPHONE 6846909
PERSON MAKING REQUEST REC	hard Rosene by.
TELEPHONE 68-46909	ADDRESS 1110 Hamilton St
WHO WILL BE BILLED IF THERE ARE ANY	
NAME Kris Zollits	heis
ADDRESS 13238 Pconcer	Rd Newton Phone 6933977
occurring during the term of this contract. It is further agreed that all property of undersigned and that the City shall not be liab person on the premises. The undersigned agrees to be responsible by mischief or negligence.	ty harmless for any and all damage, claims or personal injury claims any kind brought on the premises shall be at the sole risk of the le for any injury, loss or damage to said property or injury to any bie for any damage caused to said building, property or equipment
CHARGES	SIGNED Rechard Rosensky (Person Responsible)
	DATE 10-3-17
DENIED	DATE 70 3 77
	Date 10-3-17
Director, Parks & Recreation	•
ATTENDANT(S)	START TIME:

Sandy Ronski

From:

Denise Larson

Sent:

Monday, September 25, 2017 3:38 PM

To:

Sandy Ronski

Subject:

RE: Special OLymics event 2018

Those are not special events they are just practices that we have never charged for. These are less than 25 kids at the practices.

----Original Message----

From: Sandy Ronski

Sent: Monday, September 25, 2017 3:08 PM

To: Denise Larson

Cc: Karen Dorow; Sue Reilly; Melissa Franz Subject: RE: Special OLymics event 2018

He also lists Halvorsen & Westfield Parks. Please send me those dates as well for reimbursement purposes.

Thank you,

Sandy Ronski
Operations Clerk II
Cemetery/Parks/Transit/Streets & Sanitation Divisions City of Manitowoc 2655 S 35th St.
Manitowoc, WI 54220
920-686-6518
920-686-6525 fax
www.manitowoc.org

----Original Message-----From: Denise Larson

Sent: Monday, September 25, 2017 2:54 PM

To: Sandy Ronski

Subject: FW: Special Olymics event 2018

Here you go.

----Original Message-----

From: Denise [mailto:dlarson@manitowoc.org]
Sent: Monday, September 25, 2017 1:36 PM

To: Denise Larson

Subject:

This E-mail was sent from "RNPD79286" (MP 6000/LD260).

Scan Date: 09.25.2017 13:25:06 (-0400)