

City of Deadwood Special Event Permit Application and Facility Use Agreement for

Mardi Gras Feb10-11 2023

Instructions:

To apply for a Special Event Permit, please read the Special Event Permit Application Instructions and then complete this application. Submit your application, including required attachments, no later than forty-five (45) days before your event. Facility Use Agreements should also be completed at this time (if applicable).

Updated April 4, 2022

EVENT INFORMATION								
Type of Event: Run Street Fair	☐ Walk ☐ Triathlon	☐ Bike Tour ☐ Other	Bike Race	☐ Parade	Concert			
Event Title:	0/40 44/0000							
Event Date(s):	2/10-11/2023 (month, day, y	ear)	Total Anticipated Attendance:					
	(month, day, y	(# of	# of <u>Participants</u> # of <u>Spectators</u>					
Actual Event Ho	ours: (from):) 	AM / PM (to):_		AM / PM			
	ing Area: Main S							
Set up/assembl	y/construction Da	z/11/23 te:	Start Time	7pm	AM / PM			
Please describe	the scope of you	setup / assembly v	vork (specific details):					
List any street(s and time of re- and time of re- beadw Any rec which w Any rec	s) requiring closur opening: quest involving 25 o ood Street. quest involving 25-5 will not require stre-	e as a result of this r less motor vehicles of motor vehicles (not et closure. r more vehicles (whic	_ Completion time: 8pr event. Include street na will utilize Deadwood Street including motorcycles) - w	et and will be barric will park on the nort	and time of closing caded at both ends of th side of Main Street, m Wall Street to Shine			
Addition	nal security maybe	required at the discre	reet and Main Street and Netion of the Event Committ	ee.				
Commercia		ND SPONSORI	NG ORGANIZATI		nercial (nonprofit)			
Sponsoring Org	Dead	wood Chamber of	Commerce					
, -		ME): Lee Harstad						
Applicant (NAN	1E): Sarah Kryge	er	Business P	hone: (605) 5	578-1876			
501	Main Street		Deadwood	SD SD	57732			
Address:			(city)	(state)	(zip code)			
Daytime phone	: ()	78 Evening P	hone: (<u>605</u>) <u>863-12</u> 4	19 Fax #:	(605) 578-2429			
Please list any	orofessional even	t organizer or even	t service provider hired	by you that is au	ıthorized to work on			

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your behalf to produce this event.

N	ame: _					
A	ddress:					
		(city)	(state)	(zip code)		
Contact person "on site" day of event or facility u		n site" day of event or facility use	Pager/Cell #:	/Cell #:		
(Note: Thi	s pers	on must be in attendance for the duration of the event ar	ıd immediately availabl	e to city officials)		
		Attach a written communication from the Chief Officer of the organization which authorizes the applicant or professional event organizer to apply for this Special Event Permit on their behalf. FEES / PROCEEDS / REPORTING				
		FEES / PROCEEDS / REPOR	IIIVO			
NO	YES	Is your organization a "Tax Exempt, nonprofit" organization a "Tax Exemption Letter to this Special Ever certifying your current tax exempt, nonprofit status).				
ø		Are admission, entry, vendor or participant fees require and provide amount(s).:	d? If YES , please explain	n the purpose		

OVERALL EVENT DESCRIPTION: ROUTE MAP / SITE DIAGRAM / SANITATION

Please provide a **detailed description** of your proposed event. Include details regarding any components of your event such as use of vehicles, animals, rides or any other pertinent information about the event:

Crowing of King and Queen and Cajun Feast Friday 2/10/23 Mardi Gras Parade 2/11/23 7-8pm Request Street Closure for Parade. Tin Lizzie to Pine Saturday 2/11/23 7-8pm Request open container Friday 2/10/23 5-10pm Saturday 2/11/23 Noon-10pm