

CITY OF DODGEVILLE SPECIAL EVENT LICENSE

FEE: \$30.00

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ORGANIZATION/ENTITY NAME: Upland Hills Health

PRIMARY EVENT CONTACT: Angela Turpin

PHONE: (608) 930-7169

EMAIL: turpina@uplandhillshealth.org

ALT PHONE:

ADDRESS: 800 Compassion Way

CITY: Dodgeville

STATE: WI

ZIP: 53533

EVENT INFORMATIO	FORMATION
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NAME OF EVENT: Sip & Savor

START DATE/TIME: 7/12/2025 10:00

END DATE/TIME: 7/12/2025 10:00

(Include set-up and tear-down/clean-up time. A 48-hr notice is required if event time changes or is cancelled. If notice is NOT given, costs may be assessed for loss of City Staff time)

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Parade	Block Part	У
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Expo Other (Describe): Fundraising Event

EXEPECTED NUMBER OF ATTENDEES:

300

USE OF STREETS:

Are Street Barricades Required? No

State or County Approval Required? No

(For Events involving or crossing State or County Highways)

DESCRIPTION: Include a detailed description of all event activities such as vending, music, selling of food or alcohol beverages, location and use of tents, stages, sound amplification or other equipment, and attach a detailed plan for clean-up after the event, steps to be taken to prevent vehicular traffic from going through the area (if necessary), and steps that will be done to ensure underage people in are not served alcohol (if applicable). If using public streets, a detailed map MUST be provided with this application. Include additional pages if necessary.

Upland Hills Health will be hosting Sip & Savor again this year. At this event we will have food trucks, vendors, and alcohol served by licensed bartendors. This is a free to all community members. We will have a band but will not need the stage. We will use popup tents for vendors. All vendors and band will be located in the front parking lot unless rain, then we will be in the pavillion. We will have games in the pavillion for all kids to enjoy. We will have overflow parking in the church across the street. ID's are checked at both enterances and all who are 21 are asked to wear a bracelet.



Signature of Applican

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ADDITIONAL MATERIALS

With your application please include the following materials:

- A detailed map if street use is involved with the event.
- Certificate of Liability Insurance for general liability coverage (minimum of \$300,000 for the injury or death of any one person, \$50,000 for property damage, and \$1,000,000 aggregate coverage for the event).
- Additional applications as needed: Alcohol Licensing, Vending Permits, Facility Use or Pavilion rental agreements

ACKNOWLEDGEMENT If applicable, I understand that I may be required to set up barricades at the locations designated by 1 the City and to take down the barricades after the event. Generally, barricades may be set in place no earlier than ½ hour before the start of the event and must be removed immediately following the event and returned to the location designated by the City no more than 1 hour after the conclusion of the event. I understand that pursuant to Chapter 12.05 of the municipal code, I may be charged for the cost of 1 "Extraordinary Services" provided by the City that exceed \$500 as a result from the Special Event. I certify that I have read and understand Chapter 12.05 of the municipal code, and agree to adhere to all of the rules and requirements outlined in the ordinance. I certify that all information provided on this application is true and correct. , organizer of the event: Sip & Savor I, Angela Turpin (insert name of event) (insert name/organization) shall indemnify, hold harmless, and defend City of Dodgeville, its officers, agents, and employees from and against all claims, damages, losses, and expenses, including attorneys' fees, which arise from or out of the above specified event.

02/11/2025

Date