

TEMPORARY EXTENSION OF ALCOHOL LICENSE AREA APPLICATION

City of Marshall ~ 344 West Main Street ~ Marshall MN 56258
Phone (507) 537-6763 ~ Fax (507) 537-6830

1. Title, Purpose and Brief Description of Event:

Name and Type of Event: Hopfest Beer and music festival
Location: Brau Brothers Brewing Co.
Date: Sept 6-7 2019
Description: Live Bands, Food, beer + soda served in the parking lot of the brewery Friday night and all day Saturday.

2. Applicant Authorization:

Attach a written communication from the organization in whose name the event will be advertised which authorized you, the applicant, to apply for this special event permit on its or their behalf.

Applicants Name and Title: Brau Brothers Brewing Co LLC
Address: 1010 E Southview Dr Marshall
Affiliation: Brewery / Owner
Contact Information: Ph: 507-929-2337 Email: dustin@braubrew.com

3. Requested Event Components:

Dates of Event: Sept 6-7 2019
Requested Hours of Operation: 5-12 pm Friday; 12A-12p Saturday
Anticipated Number of Participants: 3,000

4. Insurance

Attached a certificate of insurance

5. Sanitation - Plan for Clean-up/Material Preservation.

Number, type and location of trash containers to be provided for the event: _____

Roughly 10 portable trash containers + 1 large dumpster in alley
Number, type and location of portable (or permanent) to be used for this event: (toilets?)
Breweries 2 permanent + 4 portable (see map)

Other plans insurance post-event cleanliness and material preservation of premises and parking lot: Parking lot is cleaned nightly & garbages are dumped nightly.

6. Location Map:

Indicate items on attached maps:

- a. Entertainment Locations
- b. Alcoholic beverage concessions areas
- c. Portable toilet facilities (number 4)
- d. Event participant parking areas
- e. Temporary or permanent structures constructed for the event
- f. Site of electrical wiring to be installed for the event
- g. Trash containers (number 10)
- h. Other. _____

7. Availability of Food, Beverage and Entertainment:

Food and/or non-alcoholic beverages to be served: Yes _____ No

If yes, you made to have a health permit issued from the State of Minnesota Department of Health. ✓

If music, sound amplification or any other noise impact please describe, included the intended hours: Live music on stage w/ amplification

Friday 5pm - 12 AM Saturday 12pm - 12 AM

8. Security and Safety Procedures

Describe proposed procedures for set up, operation, internal security and crowd control.

Area is roped off to indicate where beer is allowed. Employees are designated as security.
~~IDs~~ IDs are checked on entering and issued wristbands

Will the event take place at night? Yes _____ No

If yes, how will you light the event area in order to increase the safety or participants coming to and leaving the event. Existing building + parking lot lights.

Additional lighting is strung under the tents

Attached a copy of any permits obtained regarding the installation of any electrical wiring on a temporary or permanent basis and/or if you are building any temporary or permanent structures.

None

Attach a copy of any obtained permits from the Fire Department.

None

Attach a list of names, address and contact information of the agency or agencies, which will provide first aid staff and equipment.

None

9. Vendors or Concessionaires

List each vendor or concessionaire that will be allowed in conjunction with the event.

Attach a separate form if necessary.

None at this date

10. Services/Equipment

List (if any) city services and/or equipment that is being requested for this event.

Stage

11. Other Information

No major changes from previous years



■ Garbages