

SPECIAL EVENT PERMIT APPLICATION

City of Marshall ~ 344 West Main Street ~ Marshall MN 56258

Phone (507) 537-6763 ~ Fax (507) 537-6830

New Application

Renewal Of or Change in Application

I. TITLE, PURPOSE AND BRIEF DESCRIPTION OF EVENT:

Annual celebration for the city and residents of Marshall, MN. Official name:
Marshall Festivals Inc dba Marshall Sounds of Summer - Thursday August 15, 2019 to Sunday
August 18, 2019.

Refer media or citizen inquires: - Brock Klaith @530-5983 or Marc Klaith @532-4493 or 532-0131

II. APPLICANT AUTHORIZATION:

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

Applicant's Name and Title-Hitching Post Tom Handeland
Address: 1104 East Main Street. Marshall, MN. 56258.
Mailing Address: 1104 East Main Street Marshall, MN. 56258.

Affiliation-Running beer garden

Phone: Daytime 507-929-2228; Evening 507-929-2228; Emergency 612-418-5928

III. EVENT PRINCIPALS:

On the next sheet, please list, names, addresses, and telephone number of all the principals involved in any way in the proposed special event. Include professional event organizers, event promoters, financial underwriters, commercial sponsors, charitable agencies for whose benefit the event is being produced, the organizations in whose name the event is being advertised, and all others administratively, financially, or organizationally involved as principals in the production of the proposed special event. Make additional copies of the next sheet as needed to include all the principals involved in the proposed special event.

Name: Brock Klaith, President/Chair

Organization/Business/Agency/Affiliation: Marshall Festivals Inc. dba Marshall Sounds of Summer

Mailing Address: PO Box 1310, Marshall, MN 56258

Phone: Daytime 507-530-5983; Emergency 507-530-5983

Title and Functional Responsibility with Regard to the Event: President/Chair

Will this person have authority to cancel or greatly modify event plans? Yes No

Will this person be present at the event area or areas and in charge of the event at all times?

Yes No

Name: Marc Klaith - Treasurer

Organization/Business/Agency/Affiliation: Marshall Festivals Inc. dba Marshall Sounds of Summer

Mailing Address: PO Box 1310, Marshall, MN 56258

Phone: Daytime 507-532-4493; Evening 507-532-0131; Emergency 507-530-3048

Title and Functional Responsibility with Regard to the Event: Treasurer and Committee Member

Will this person have authority to cancel or greatly modify event plans? Yes No

Will this person be present at the event area or areas and in charge of the event at all times?

Yes No

IV. REQUESTED EVENT COMPONENTS:

A. Requested days and date (first choice): Thursday August 16, 2018 – Sunday August 19, 2018

B. Alternate days and dates: n/a

C. Requested hours of operation, from 8:00AM to 1:00 AM

D. Set up beginning day and date: Thursday August 15th, time 8:00 AM

Dismantle by day and date Sunday August 18th, time -10:00 /PM

E. Describe the number of and type of animals to be used in the event: N/A

F. Attach a draft of the entry form for participants/spectators.

G. Anticipated number of participants: 75-100 and spectators: 300-3,000

V. INSURANCE

Attach to this application either an insurance policy or a certificate of insurance including the policy number, and the provision that the City of Marshall is included as an additional insured. Insurance will be obtained through Town & Country Agency, 105 South Market Street. Marshall, MN 56258.. Copy will be provided to City prior to event.

VI. SANITATION

Attach your "Plan for Clean-up/Material Preservation." Include number, type and location of trash containers to be provided for the event. Indicate who and how many will be responsible for emptying and cleaning up around containers during the event. Indicate who and how many will be responsible for cleaning up after animals if they are used in the event. Indicate who and how many will be responsible for cleaning up the event area after the event. Describe the number, type and location of portable toilets to be provided for the event (or permanent toilets to be used for the event). Include any other plan you may have for ensuring post-event cleanliness and material preservation of city facilities, equipment, premises and streets.

Port-a-Pots will be placed on Schwans property/parking lots*. Southwest Sanitation will provide these as well as hand sanitizing stations.

Sounds of Summer have made arrangements with Southwest Sanitation to provide trash containers to pick up after the events in the areas used following the events and concerts. SOS will be working with volunteers from local businesses and organizations to assist with these duties.

*** Official names do not exist for these lots. Parcel numbers are 27-792003-0 and 27-792-002-0. This is the same location as prior years.**

VII. LOCATION MAP:

Check off below items that apply to your event. Indicate these items on attached separate maps. Use, where necessary, a to-scale drawing.

- A. If a route is involved, the beginning area, the route (indicate directions with arrows), and the finished area;
- B. If a route is involved, the places where buses or trains need to consider;
- C. If a route is involved, it will expedite approval of your event if you attach separate maps giving two or three alternate routes;
- D. If a relay is involved, indicate hand-off points;
- E. Entertainment or state locations (grandstand operators should provide you with a to-scale drawing);
- F. Alcoholic beverage concession areas; Hitching Post will coordinate with Schwans – everything will be in a fenced off area
- G. Non-alcoholic concession areas;
- H. Food concession areas;
- I. General merchandise concession areas;

- J. Portable toilet facilities (indicate number 10-20);
- K. First aid facilities;
- L. Event participant and/or spectator parking areas;
- M. Event organizer's command post;
- N. Fireworks or pyrotechnics site;
- O. Vehicle fuel handling site;
- P. Cooking areas;
- Q. Tables, enclosures, etc.
- R. Temporary or permanent structures constructed for the event; Tents, fencing
- S. Site of electrical wiring to be installed for the event;
- T. Trash containers (indicate number _____);
- U. Other. Please describe: _____

VIII. AVAILABILITY OF FOOD, BEVERAGES AND/OR ENTERTAINMENT;

- A. If there will be music, sound amplification or any other noise impact, please describe, including the intended hours of the music, sound or noise.

Music will be played in the Schwan parking lots to the west of West College Drive. Music will be played starting with Friday night August 16th, from approximately 4:00 p.m. to 9:00 p.m. and again on Saturday August 17th from approximately noon, to Sunday August 18th, ending approximately at 12:30 a.m.

- B. Alcoholic beverages to be served? Yes No
- C. If yes, describe what system will be used to ensure that alcoholic beverages will be consumed only by those persons 21 years and older.
The Hitching Post, Tom Handeland, in separate fenced off area, will handle all alcoholic beverages. **We are requesting that those under 21 be allowed into the fenced off area with parent or guardian until 1:00 a.m. on Sunday August 18th.**
- D. If yes, describe how, where, when and by whom the alcoholic beverages will be served.
It will be served in the beer garden area. The Hitching Post staff will serve the beverages. Hours will be from 12:00 p.m. (noon) to 1:00 a.m. on Saturday/Sunday August 17/18 2019. The Hitching Post staff/security will supervise this area to insure that only those of legal age will be able to purchase alcoholic beverages.
- E. If a casino party, a dance or live entertainment is part of your event, please describe.

Live entertainment with outdoor staging, lighting and sound will be held on Friday August 16th and again on Saturday August 17th.

- F. Please describe all of the activities of your event for which a license is required, for example, a cabaret license, a caterer's license, a general merchandise concession license, etc. (Attached to this application all required licenses).

Local establishments will cater food in on Friday and Saturday August 16-17, 2019. SOS committee members and or volunteers may assist with the serving of food items from these establishments. We are working with local vendors and businesses to coordinate and take care of all food on both nights. Other Concessions will possibly also be present on Saturday. All Vendors will be required to contact the city for proper insurance certificates prior to the event.

- G. Food and/or non-alcoholic beverages to be served? Yes No

- H. If yes, describe sanitation measures, food handling procedures and the nature of the food (such as pre-packaged foods, hot dogs, pre-mixed sodas, unpeeled fruit, raw meats, vegetables, and fish or peeled and cut fruits).

See above answer

- I. If yes, you may need to have a health permit from either the State of Minnesota or Lyon County. Attach a copy of your health permit to this application. All vendors will be required to operate under the State of Minnesota guidelines regarding all health related food issues. Proper permits, licenses will be obtained by vendors.

- J. If you intend to cook food in the event area, describe your area layout, including fuel or electrical sources to be used.

All food will be catered in.

IX. SECURITY AND SAFETY PROCEDURES:

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

We're working with the Marshall Director of Public Safety, Jim Marshall to provide all necessary security during the course of the celebration.

- B. If the event is to occur at night, describe how you are going to light the event area in order to increase the safety or participants and spectators coming to and leaving the event.

Our intention is to use the general parking lot lighting on Friday and Saturday evening in the Schwan parking lots, west of West College Drive. The entertainers will provide stage lighting, and licensed electrical contractors and Marshall Municipal Utilities will provide electricity to the stage area.

- C. If you event includes vehicles or animals, describe the minimum and maximum speeds of the event and the minimum and maximum intervals of space to be maintained between units.

N/A

- D. Attach to this application a copy of your building permit (or permits) if you are installing any electrical wiring on a temporary or permanent basis and/or if you are building any temporary or permanent structures such as bleachers, scaffolding, a grandstand, reviewing stands, stages or platforms.
- E. Attach a copy of your fire department permit or permits to this application if you will use parade floats; an open flame; fireworks or pyrotechnics; vehicle fuels; cooking facilities; enclosures (and tables within those enclosures), tents, air-supported structures, canopies, or any fabric shelters.
- F. Give names, address and phone number of the agency or agencies, which will provide first aid staff and equipment. Attach additional sheets if necessary.

Name of Agency North Memorial Ambulance

Name of Representative Dan DeSmet

Address Marshall, MN 56258

Phone Numbers 507-537-9677

Indicate medical services that will be provided for the event.

<u>Medical Service</u>	<u>How Provided</u>
<u>X</u> Ambulance	<u>On-site EMT's with ambulance service</u>
_____ Doctors	_____
_____ Nurses	_____
_____ Paramedics	_____

X. VENDORS OR CONCESSIONAIRES:

- A. Describe what vendors or concessionaires you will allow in conjunction with the event and the purpose or purposes of these concessions.

Only festival approved vendors will be allowed to operate within the confines of the events.

- B. Describe how you intend to regulate, monitor and control the type, number and quality of vendors/concessionaires who you may permit to operate in conjunction with the event.

See above.

XI. MITIGATION OF THE IMPACT ON OTHERS:

Describe how you intend to mitigate the impact of the special event on businesses, churches, neighbors, motorists, mass transit users and others. Attach additional sheets, if necessary entitled "Mitigation of the Impact on Others".

Local businesses and residents will be advised of these events, outlining the hours of operation, and the hours that the Schwan parking lots will be used. Notification will be with advance publicity of the events that will inform the general public about noise and the celebration activities.

XII. SERVICES/EQUIPMENT:

Describe city services and/or equipment requested for this event. City barricades, cones, and no-parking signs may be borrowed on an as-available basis. You should plan to pick up and return this equipment. If you or your volunteers cannot pick up and return this equipment, please attach a letter requesting these services and explaining why your organizations cannot perform them. This will be reviewed and approved or denied by the City Administrator.

We will be in contact with Glen Olson, City Engineer for the city of Marshall regarding street closures, barricades required etc for the days of the celebration. He has indicated to us that his department will be taking the necessary responsibilities to have these things done. SOS committee members and or volunteers will also be working with the city employees as needed and requested.

XIII. OTHER PERTINENT INFORMATION:

Name and Type of Event _____

Location/Area _____

Day, Date and Time _____

(X or N/A, not applicable) – (City Use)

- _____ 1. Final check has been made of application requirements.
- _____ 2. Event is approved by City Administrator.
- _____ 3. All required permits are issued and on file.
- _____ 4. Refundable clean-up fee has been paid via cashier's check.
- _____ 5. Insurance certificate is on file.
- _____ 6. Surety bond is on file to secure payment for applicant's obligation to the City.
- _____ 7. Application is complete.
- _____ 8. Special conditions are attached: # _____.