

WATERTOWN SPECIAL EVENT PERMIT APPLICATION

APPLICANT INFORMATION: Name of person, entity, or organization holding the special event: Back/me - Schwcfe Defachmen # 349 Address: Street, City, State, Zip Plone: 910 185. 1747 Email: Brill Email: Phone: 910 185. 1747 Email: Brill Email: Br	New Event Repeat Event Date Re	ceived:	Date of	Event: 8-23-25 Fee Amount: \$50	
Name of person, entity, or organization holding the special event: Baff Me - Schwfe Defachment H349 Address: Street, City, State, Zip Polonx 25 Waferfown WI S3094 Phone: 920.285 V141 Email: Mc134480Na4-most Monprofit Tax-Exempt Number Solon Non-profit Group For Profit Other, please describe: Nonprofit Tax-Exempt Number Solon Seller Permit Number: Soles Tax, If applicable (Include photocopy) If the named applicant is not required to hold a Wisconsin Seller's Permit pursuant to s. 77.54 (7m), Wis. Stats., check this box EVENT INFORMATION: Event Name: M14 Monal Monal Monal Seller's Permit pursuant to s. 77.54 (7m), Wis. Stats., check this box Event Location Address include parking locations and streets to be used if applicable: M14 Monal Monal Personal Pe					
Address: Street, City, State, Zip POBOR 25 Waferfown WI 530946 Phone: 9LD. 285. VIH Email: M Non-profit Group For Profit Other, please describe: Nonprofit Tax-Exempt Number: 50(c) 4 MCL Headquartes 9AN 50(d) 5 inplicable (include photocopy) Is this the applicant's 1st special event application for the calendar year? Yes No Wisconsin Seller Permit Number: 50les Tax, if applicable (include photocopy) If the named applicant is not required to hold a Wisconsin Seller's Permit pursuant to s. 77.54 (7m), Wis. Stats., check this box EVENT INFORMATION: Event Name: M. Manual Anadraises Plant Event Date(s): Ana 22 22 25 Event Location Address include parking speciations and streets to be used if applicable: Washington Address include parking speciation, is it included? Yes No Is the event located in a City Park? Yes No park name: M. Alako Park If yes, do you have a park reservation? Yes No Park name: M. Alako Park Is the event closing of a Street/Alley/Right-of-Way/Parking Lot? Yes No Will you need City Services for your event? Yes No If yes, do you have written permission? Yes No Is the event a city sponsored parade or celebrating a Federal Holiday? Yes No Is the event a city sponsored parade or celebrating a Federal Holiday? Yes No Street Start/end time: # Alako Alakoho consumed, sold, or served? Yes No Event Description (purgose, activity, who can participate, etc. Attach additional shopt if necessary and Alakoho consumed, sold, or served? Yes No Event Description (purgose, activity, who can participate, etc. Attach additional shopt if necessary and Alakoho consumed, sold, or served? Yes No Event Description (purgose, activity, who can participate, etc. Attach additional shopt if necessary and Alakoho consumed, sold, or served? Yes No Event Description (purgose, activity, who can participate, etc. Attach additional shopt if necessary and Alakoho consumed, sold, or served? Yes No Figure 1 Alakoho Consumed, sold, or served? Yes No Figure 2 Alakoho Consumed, sold, or served? Yes No Figure 2 Alakoho Con					
Address: Street, City, State, Zip POBOX 25 Wafer four WI 530946 Phone: 9LD. 285. LTH Email: Mc134484 Marker act Mc13448 Marker	Bartelme-Schwefel Detachment #349				
Phone: 9(0, 286, V14) Email:	Address: Street, City, State, Zip POBOx 251 Water fown WI 53094				
S Non-profit Group	Phone: 920.285. 475	17 Email:	harter net	Website: MCL 349.089	
Wisconsin Seller Permit Number: Sales Tax, if applicable (include photocopy) If the named applicant is not required to hold a Wisconsin Seller's Permit pursuant to s. 77.54 (7m), Wis. Stats., check this box EVENT INFORMATION: Event Name: Manual Andraises Plania Event Date(s): Aug. 13, 1015 Event Location Address include parking locations and streets to be used if applicable: A DETAILED map is required upon submittal of application, is it included? Yes No Is the event located in a City Park? Yes No park name: Mala Park Is the event closing of a Street/Alley/Right-of-Way/Parking Lot? Yes No Will you need City Services for your event? Yes No for Is the event on private property? Yes No for Is the event a city sponsored parade or celebrating a Federal Holiday? Yes No Is the event a city sponsored parade or celebrating a Federal Holiday? Yes No Total Attendance: # Alcohol consumed, sold, or served? Yes No Yendors? Yes No Event Description (purpose, activity, who can participate, etc. Attach additional shept if necessary Conty Carty and Hay arguer plania. Verbrain Starked Cartes and Holiday? Who) Will your event be selling food? Yes No for Served? Yes, please explain: (Type of food and sold by who) MAIN EVENT ORGANIZER — PRIMARY CONTACT IF DIFFERENT FROM APPLICANT: Contact Name: For Address: Street City State Tio Phone: Email: OFFICE USE ONLY:	Non-profit Group For P	rofit Other, p	lease describe:	Nonprofit Tax-Exempt Number 5010 4 MCL Headquarters 990N	
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Event Location Address include parking locations and streets to be used if applicable:	Event Name: MCL Annual Fundraiser Prince Event Date(s): Aug. 23, 2025				
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Indemnification and Hold Harmless

(Read carefully before signing!)

Indemnification: By signing below, I acknowledge that for good and valuable consideration, I (applicant), on behalf of myself and the organization, if applicable, agree to indemnify, defend and hold harmless the City of Watertown and its officers, officials, employees and agents from and against any and all liability, loss, damage, expenses and costs, including attorney fees, arising out of the activities performed as described herein, caused in whole or in part by any negligent act of omission of the applicant/organization, anyone directly or indirectly employed by any of them or anyone whose acts may be liable, except where caused by the sole negligence or willful misconduct of the City.

Certification: By signing below, I certify that I am at least 18 years of age and that I have reviewed and understand the City's Insurance Requirements and Ordinance for Special Events. My signature further confirms: (i) I understand the filing of this application does not ensure the issuance of a Special Event Permit; (ii) The special event application fee is non-refundable (iii)! will be responsible for ensuring the event and event participants comply with all applicable City ordinances, traffic rules, park rules, state health laws, fire codes, alcohol licensing regulations, and any other applicable laws, rules and regulation;. (iv) Fees for park facilities, food vendor permits, fireworks permit, any other applicable City of Watertown permits or licenses, other municipal services and equipment, etc., are in addition to the Special Event Permit application fee; (v) I am authorized to apply for this Special Event Permit on behalf of the organization holding the event (if applicable). (vi) The information contained in this application is true and correct to the best of my knowledge. I understand that intentionally providing false or misleading information in this application will be the basis for denial/revocation of the permit and may lead to civil or criminal penalties.

If there are any changes to the Special Event after submittal of the application, I agree to notify the City of Watertown of these

Name of Applicant:

SPECIAL EVENT APPLICATION FEE & EXTRAORDINARY SERVICES

Application fee is due when the application is submitted and is nonrefundable if the event is cancelled. If the event is rescheduled for a date within 6-months, the application fee would apply to the rescheduled date; if the event is rescheduled for a date later than 6-months of the original event date the application fee is nonrefundable.

\$50.00 - first application for the year of the applicant if submitted 45 days or more prior to event date. \$35.00 - each subsequent application of the applicant if submitted 45 days or more prior to event date. (The fee is doubled if submitted less than 45 days prior to event date)

Extraordinary Services - measurable financial costs which are above and beyond the normal levels of public health and safety services on a nonevent day. See the special event fee schedule for more information. Extraordinary services do not include the provision of police protection against hostile individuals targeting the event's message or intentions.

The applicant is liable for and must pay to the city clerk the actual cost of all extraordinary services provided by the city and is required to pay 50% of the estimated extraordinary services prior to the special event with the remaining amount billed at the conclusion of the event. Sales tax will be added if applicable. By signing the applicant acknowledges that they have been made aware of this information.

Signature of Applicant:

Date:

Submit Special Eyent Application and fee (cash or check) in person or by mail to

City Clerk 106 Jones Street PO Box 477

Watertown, WI 53094

Questions: 920-262-4010 or email cityclerk@watertownwi.gov