

TOWN OF LAKE MILLS- # 20__ - __
Permit application for Special Events
Pursuant Town Ordinances 2-4, 3-4 & 3-5

Date of application: _____ to what date is permission requested? _____

Applicants Name:

Last _____ First _____ Initial _____

Name of Business/Organization (if different) _____

Address of Applicant/Business: _____

City _____ State _____ Zip Code _____

Nature of Event: _____

Phone #: (____) _____ Home Phone: (____) _____ Fax: (____) _____

Driver's License/Business Tax ID (required) _____

Date of Birth (if applicable): _____

Address of Municipal or Counties in which applicant has engaged in holding similar events during past two years:

Name of Municipality/County: _____

Address: _____ Phone _____

Name of Municipality/County: _____

Address: _____ Phone _____

Name of Municipality/County: _____

Address: _____ Phone _____

Please use additional pages if necessary

Name of Person(s) in Charge or be present during event: _____

Date and Times requested for event: _____

Location of place the event will be held: _____

Address of Location: _____

Please provide the following information: With out this information the application may be considered incomplete and will be returned to you before the Town Board will review the application. If an item does not apply to your application please note that.

- 1) A detailed map of route.
- 2) A certification of insurance.
- 3) Description of lakes, rivers, or streams that will be used for the event
- 4) Date or dates for which the premises are to be permitted.
- 5) The maximum number of people involved in the event, including participants, workers, safety persons, etc.
- 6) The maximum number of vehicles used for the event including motor vehicles, watercrafts with and without motors, etc. With a plan for parking of vehicles.
- 7) Description of any temporary shelters that may be erected, purpose of, and location of.
- 8) A description of any fences, barriers, etc that may be used for the event with location of such.
- 9) A description of the method for collection and disposal of human waste, sewage, garbage and trash from the event.
- 10) A description of system and method to be used for the supply, storage, and distribution of water and food.
- 11) A plan describing fire protection, first aid facilities and emergency medical facilities.
- 12) A plan describing available police protection.

Please provide any additional information that you may have that is not listed above:

Do you/your business hold a physician's certificate? Yes No

Have you/your business been convicted of a crime, statutory violation, or ordinance violation within the last 5 years, the nature of which is directly related to the applicants request?

Yes No

If yes, list date of conviction, law violated and penalty imposed: _____

Application fee: \$10.00 (make checks payable to Town of Lake Mills)

Applicant understands the above fee and agrees to payment of the required fees;

Signature

AS PETITIONER, I UNDERSTAND AND WILL ABIDE BY THE REQUIREMENTS, RESTRICTIONS, AND EXEMPTIONS SET FORTH BY THE LAKE MILLS TOWN BOARD.

Signature

Date

.....
OFFICE USE ONLY

Date request was received _____

DATE _____

TOWN CHAIRPERSON Signature

_____ APPROVED

_____ DENIED

Conditions (if Apply): _____

All necessary background checks have been complete if applicable and the Town of Lake Mills Police Department has received a copy of this application on _____

DATE FINAL DECISION WAS SENT TO PETITIONER _____