



CITY OF LA CROSSE STREET DEPT

2000 Marco Drive (Isle La Plume) Ph. 608-789-7340

APPLICATION AND PERMIT FOR USE OF ALLEYS AND STREETS FOR RECREATIONAL PURPOSES

Rev 7/2017

NAME OF APPLICANT: The Charmant Hotel

CONTACT NAME & PHONE NUMBER: Sean Castady - 310-910-3722

DATE(S) AND TIME OF EVENT: 8-17-18 10am-11pm

PURPOSE/TYPE OF EVENT: Live Music Performance

DESCRIPTION OF STREET OR ALLEY TO BE USED: State St between Front St & 2nd St.

(ex: Main St between 9th & 10th)

If in the downtown area (Cass to La Crosse St, 7th to Front St), see 3 below.

(see attached layout)

Will there be music at this event? ☒ Yes ☐ No

If there will be live music, a Special Event Outdoor Cabaret license may be required. Contact the City Clerk at 789-7510.

Sean Castady

SIGNATURE OF APPLICANT

PERMIT

A PERMIT IS HEREBY GRANTED TO THE APPLICANT NAMED ABOVE FOR THE EVENT DESCRIBED FOR USE OF THE CITY STREET OR ALLEY ON _____, 20____, BETWEEN THE HOURS SET FORTH; SUBJECT TO THE TERMS AND CONDITIONS SET FORTH BELOW AND ALL LAWS OF THE STATE OF WISCONSIN AND RULES AND REGULATIONS OF THE CITY OF LA CROSSE.

SUPERINTENDENT OF STREETS

TERMS & CONDITIONS

1. Applicant must be a resident/business of the block for which a permit is applied.
2. Applicant must obtain written consent of all residents/businesses of the block and submit said consent with this application.
3. Application for a permit must be received by the Street Department Office (2000 Marco Drive, Isle La Plume) no less than ten (10) business days prior to the event. **NOTE:** If the block party is in the downtown area (Cass St to La Crosse St, 7th St to Front St), said application (along with a detailed plan for signage and barricades) must be considered by the Board of Public Works. **There may be different deadlines for other required permits/licenses.*
4. No alcoholic beverages shall be consumed on any public street or alley right-of-way. **Exception for an establishment licensed for alcohol which has been granted permission by the Common Council to expand the licensed premise for a special event onto adjacent public property. Contact the City Clerk at 789-7510 at least two months in advance of event.*
5. Applicant must adhere to the City noise ordinance (Sec. 32-134 Municipal Code). **Exception if the event has been granted a Special Event Outdoor Cabaret License by the Common Council. Contact the City Clerk at 789-7510 at least two months in advance of event.*
6. Block parties shall not start before 10 a.m. and shall conclude no later than 11 p.m.
7. Access to the street or alley must be given upon request of any resident of the block.
8. Applicant is responsible for pickup/return of barricades. If City serviced, a fee will apply. If barricades are required for Saturday or Sunday activities, they must be picked up at the Street Department prior to 3 p.m. Friday and returned no later than 3 p.m. Monday. For mid-week activities, barricades must be picked up prior to 3 p.m. on the day preceding the event and returned by 3 p.m. the day following the event.
9. Applicant must post a \$100.00 cash or money order deposit when picking up barricades to insure the return of the barricades and site clean-up. The deposit will be returned upon satisfactory return and inspection of the barricades and site.

Copy: FIRE DEPARTMENT

POLICE DEPARTMENT

EMERGENCY DISPATCH

Block Party Consent Form

Written consent from all residents/businesses of the impacted street/alley is required for event to be held on the date of Aug 17th, 2018 and located on State St
(Description of street/alley to be used)

NAME (Print) Dan Trussoni ADDRESS 400 LaCrosse St
SIGNATURE [Signature] PHONE# 608-789-4915 DATE 6/1/18

NAME (Print) Kristine H. Cleary ADDRESS 100 2nd St. N - Parcel # 20007-10
SIGNATURE [Signature] PHONE# 414-617-7119 DATE 6/19/18

NAME (Print) Kristine H. Cleary ADDRESS 100 ^{Building} Harborview Plaza - Parcel 20001-10
SIGNATURE [Signature] PHONE# 414-617-7119 DATE 6/19/18

NAME (Print) Kristine H. Cleary ADDRESS 121 State St - Parcel 20008-50
SIGNATURE [Signature] PHONE# 414-617-7119 DATE 6/19/18

NAME (Print) Kristine H. Cleary ADDRESS 129 State St - Parcel 20008-40
SIGNATURE [Signature] PHONE# 414-617-7119 DATE 6/19/18

NAME (Print) _____ ADDRESS _____
SIGNATURE _____ PHONE# _____ DATE _____

NAME (Print) _____ ADDRESS _____
SIGNATURE _____ PHONE# _____ DATE _____

NAME (Print) _____ ADDRESS _____
SIGNATURE _____ PHONE# _____ DATE _____

NAME (Print) _____ ADDRESS _____
SIGNATURE _____ PHONE# _____ DATE _____

NAME (Print) _____ ADDRESS _____
SIGNATURE _____ PHONE# _____ DATE _____

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lot City side

2nd State Lot

2nd State Lot

Charmant Hotel – River Roast 2018 Street Permit Layout 8.17.18

