

☐ New Event

City of La Crosse, Wisconsin

APPLICATION FOR SPECIAL EVENT PERMIT

New Event Repeat Event	Repeat Event with Changes (expl	ain in the description)
Date Received: 4/18/13	\$16000	
*Deadline 60 days prior to event.	Fee:	Invoice No
EVENT ORGANIZER - Information ab	out the person, entity or organiza	ation holding the special event.*
La Crosse Avea F		
Address: Street 1140 Main Street	Lacrosse	State Zip Code
608.519.5493	Email: Knewkiyk@laxymca.ov	Website: Q (2XYMC). OVQ
Nonprofit Tax Exempt Number 501(c)3, if applicable (include photocopy)	: 39-0806172)
Wisconsin Seller Permit Number Sales Tax, if applicable (include photocopy) If the named organization is not required to hold a Wisconsin	one in Selled - Develo	
If the named organization is not required to hold a Wisco EVENT COORDINATOR - Information	for person to contact before du	(7m), Wis. Stats., check this box
Contact Name: First	Middle	Last
Address: Street	J.	Newkirk
1140 Main 2	City	State Zip Code
Phone:	La conse	WI 54601
6085195493	Email: Khe	NKIYK@laxymca.org
*Personal Data Sheet MUST be completed		
EVENT INFORMATION		
Event Name: Maple Leaf Run V	Valk	
Event Location: (Address or General Location/Route) Riversid	s the location: Park/Public Property	Street/Alley/Right-of-Way Private Property
Event Date(s): List each date of multi-day event September	er 30th, 2023	
Event Time: Start Time	Obam	End Time
Set Up/Take Down: Set Up Begins	20	Take Down Ends
	00 JW	12:00 pm
Total Anticipated Attendance: Base off previous events if recurring	100	•
Daily Anticipated Attendance: If a multi-day event (circle one) 0-250 250	-500 500-1000 1000 - 5000	5000
Admission Requirements: If applicable race registry		
Event Description (purpose, activity, who can participal	e, etc. Attach additional sheet if necessar	y.)
This race includes a half Riverside Park	marathon, 5 mile, 5t	2 & Kids race leaving from
If you have multiple activities in your event that incl	ude closure or use of right-of-way i.e. t	wo parades or a combination of parade and run/walk,

etc., a separate activity summary describing each event is required and must be submitted with this application.

If you are using a City park or facility, you must make the reservation through the Parks, Recreation & Forestry Department prior to filing the Special Event Application. The Park Office phone number is 608-789-7533.

If said location is private property, and is not owned by organizer, a signed statement from property owner that applicant has permission to use said property for the special event is required.

Applicant is responsible for assuring they have all necessary reservations, permits and licenses prior to hosting the special event. Relevant information and contacts are provided in the Policies & Procedures Manual as well as below. **Answer all questions regardless the size of the event; incomplete applications will be returned.**

City Clerk - Call 608-789-7510 for the following additi	onal licenses,	permits and necessary information.
Will there be food prepared/served at the event? If yes, explain (i.e. food truck, food stand, catered, etc.):	Yes No	While food vendors are exempt from City permitting, event organizers MUST ensure vendors are properly permitted with County Health or the State of Wisconsin.
donuts will be served to participants		Not doing so may delay the permit or require a vendor to be removed. A list of vendors MUST be submitted
following the race		prior to the event with applicable information.
J		When serving food, contact the La Crosse County
		Health Department at 608-785-9771.
Will there be vendors selling merchandise?	Yes XNo	Merchandise vendors are exempt from City permitting
VVIII tilloro do voltado de imigratorio.		when participating in a special event; however, a list of vendors must be submitted. DOR reporting required.
Will alcohol beverages be sold/served/consumed?	Yes Yo	A Temporary Class B Retail License is required to sell,
If yes, explain (how, who, where):		serve or consume beer or wine (no liquor). Eligibility requirements apply.
The state of the s	100 A 119	If you are expanding an establishment license, an
		Expansion license is required:
*Fencing required.	1 10 400	Expansion to Private Property
*Licensed beverage operators must be present.		Expansion to Public Property
*Beer/wine must be purchased from a wholesaler. *Liquor Liability Insurance Required.		If a brewery is using a secondary location, please
See FAQs and Excerpts for additional information.	- 4	explain and a temporary license is not necessary.
Will there be a live amplified outdoor music?	Yes No	Noise is regulated in the City of La Crosse; see Sec.
If yes, explain:		32-134 of the Municipal Code. Event organizers shall contact nearby properties, so
Band DJ Other		they are aware of the event.
Will your event include any of the following:	Yes No	A legible route map and turn-by-turn list must be
run 🗡 walk 🗡 bike tour bike race	7	submitted; include assembly area, starting point and termination point.
parade other procession		Complete Activity Summary if necessary.
*if multiple activities, please complete an Activity Summary for each. *if closing a highway, a highway closure form must be submitted. This information is		Visit the Engineering/Construction Projects to view
provided to the Wisconsin Department of Transportation.	Yes No	upcoming projects to ensure your route is not affected.
If a recurring event, are you using the same route? Will your event include a carnival or amusement of any	Yes No	A Carnival, Circus or Menagerie License is required.
kind? i.e. bounce house, inflatables, amusement rides, etc.		*Additional insurance required.
Will your event include animals, petting zoo or other	Yes	Certain domesticated animals are allowed; see.
animal exhibition? If yes, describe (type of animals):		Sec. 6-8 of the Municipal Code. Events with wild or vicious animals, a Carnival, Circus
7.8		or Menagerie License is required.
Will your event include horse drawn carriage rides?	Yes	Operator must be licensed for Horse Drawn vehicles.
If was who is the operator?		33
Fire Department – Community Risk Management requirements and necessary information.	(CRM) - Call	608-789-7530 for the following additional permits,
Will there be a tent or canopy more than 400 feet?	Yes No	An Application for Tent/Structure Permit is required and
	,	an inspection prior to occupancy. Event organizer is responsible for calling Digger's Hotline and
		coordinating, as necessary.
Will fireworks or pyrotechnic special effects be used	Yes No	An Application for Display of Firework/ Pyrotechnic
during event?		Special Effects is required to be filed with the Fire
	M	Department. *Additional bond or insurance required.
Will you be proving portable toilets? If so, how many?	YYes No	Based on capacity as required by Ch.29 of IBC. Portable toilets are not provided by the City; you are
portable toilets accessible portable toilets		responsible to contract those services.
Will you be running temporary water/plumbing or electrical services to the event site?	Yes No	If yes, contact CRM. An Inspection will be required.
Will you be using temporary fencing for the site area? If yes, size of exits?	Yes	If yes, provide fencing details in the site map. An inspection and plan approval are required.
	The state of the s	Event organizer is responsible for calling Digger's Hotline and coordinating, as necessary.
Do you intend to have Fire/EMS vehicle access lanes?	Yes No	Required: emergency vehicle access lanes (min. 20').
Do you have an emergency plan?	Yes No	For accidents, injuries, fires, severe weather, etc.

Parking Utility - Call 608-789-4908 for parking requirement	ents and neces	ssary information.
Do you have a parking plan?	Yes No	
Do you have handicap parking?	XYes No	
Parks, Recreation & Forestry Department - Call 608-789	-7533 for the r	equirements and necessary information.
Will the event be held in a City park or utilize any park facility?	XYes No	Reservation needs to be confirmed before Special Event Application can be filed.
Park Board approval was granted:		Some City property may require approval by the Board of Public Works i.e. Field for Kids.
Police Department - Call 608-789-7238 (non-emergency	for necessar	y information.
Do you have a security plan?	Yes No	
Street Department - Call 608-789-7340 for the necessary	y information.	D " to description and alto plan
Do you intend to use a street, alley or right-of- way?	Yes No	Describe area in description and site plan.
Closure of a highway (state or county)?	Yes No	Yes, complete a Request for Highway Closure. Barricades/signage can be provided by the city.
Do you need barricades or signage for your event?	A res_ No	A cost estimate based on needs will be provided with your permit and actual costs will be invoiced at the
If yes, include barricade placement in the site plan. If no, provide a traffic control plan*.		conclusion of the event.
If yes, do you want to pick up or have delivered Delivery by City required for larger events with a lot of equipment.		*If you are using equipment from a third party, you must provide a map showing where the traffic control equipment will be placed.
Do you have an established traffic control plan? If not using City traffic control equipment, submit your proposed traffic control plan with application.	XYes No	Police & Traffic Engineer will assist with developing a plan i.e. where barricades, signage or when Police assistance is needed.
Do you have a waste management plan?	Yes No	A solid waste and recycling plan must be provided detailing receptacle quantities and layout.
Contact Recycling Supervisor with questions 608-789-7507 Applicant understands that extraordinary service fees may be billed because of the event. Applicant will pay the actual costs for the use of equipment, resources, or services if the	Yes No	The City will invoice the event organizer after the conclusion of the event. Payment shall be made within thirty (30) days of the invoice.
event requires more than the reasonable and necessary services provided by the city. If money is owed from a previous event, the permit may not be approved until paid.		Organizers must notify the city if the event is cancelled or altered for any reason. If notice isn't given until after traffic control materials have been delivered, organizers will still be billed the cost of
If any traffic control materials are missing or returned damaged, fee for replacement/repair will be invoiced.		materials and labor.
Note: Extraordinary service fees are an addendum to the Policies & Procedures Manual.		
Special Event Checklist. <u>All forms are to be turned in</u> Incomplete applications will be returned. Please call	to the City Cle	rk's Office unless otherwise noted. estions.
Special Event Application (complete and signed). Inclu	ide additional Ac	tivity Summaries or Highway Closure, if necessary.
a LLE LE Look shock never le City Treesu		
Certificate of Liability Insurance AND Additional Insured Photocopy of Tax-Exempt Number, if applicable. *Req	uired to avoid sa	les tax if being billed for materials i.e. barricades.
Photocopy of Tax-Exempt Number, if applicable. **		
Photocopy of Wisconsin Seller Permit, if applicable. *F Statement from property owner, if applicable.	required unless t	exempt purduant to a. 11.01 (1.11).
Statement from property owner, if applicable.		the state of the s
Map of Special Event area (site plan); include any street, Site plan must include, as applicable, alcohol sales location(s garbage/recycling receptacles and dumpsters, fencing, exit lo emergency vehicles and personnel.	cations for fenced	events, accessible paths, handicap parking, access for
Map of Parade/Procession (and turn-by-turn list); also	include assembly	area, starting point and termination point.
Traffic Control Plan showing where barricades and sign	nage will be place	ed, if necessary.
Waste Management Plan including quantity of receptage	cles for solid was	te and recycling and their locations.
Merchandise/Food Vendor List, with all appliable inform	nation. *Due no	less than fourteen (14) days before the event.
The following additional applications (and associated fee) if app	licable:	
Application for Temporary Class B Retail Alcohol Licer	nse (liquor liabilit)	/ insurance required).
Application to Expand Alcohol Beverage License – pub	olic or private pro	perty (liquor liability insurance required)
Application for Carnival, Circus or Menagerie (addition		
Application for Tent/Structure Permit.		

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 La Crosse 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, that I have read and understand the Special Event Policy and that I agree to the terms and conditions contained in the Special Event Policy. My signature further confirms: (i) I understand the filing of this application does not ensure the issuance of a Special Event License. (ii) The special event permit fee is non-refundable pursuant to the terms of the Special Event Policy. (iii) I 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 and alcohol licensing regulations and any other applicable laws, rules and regulations including the Special Event Policy. (iv) Fees for park facilities, food vendor permits, tent and fireworks permits, other municipal services and equipment, etc., are in addition to the Special Event Permit 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 basis for denial/revocation of the permit and may lead to civil or criminal penalties.

Signature of Applicant:	K.9.1(U)991	Date: 452023	
Printed Name of Applicant:	Kirsten NewKirk	programme in the first of the first	

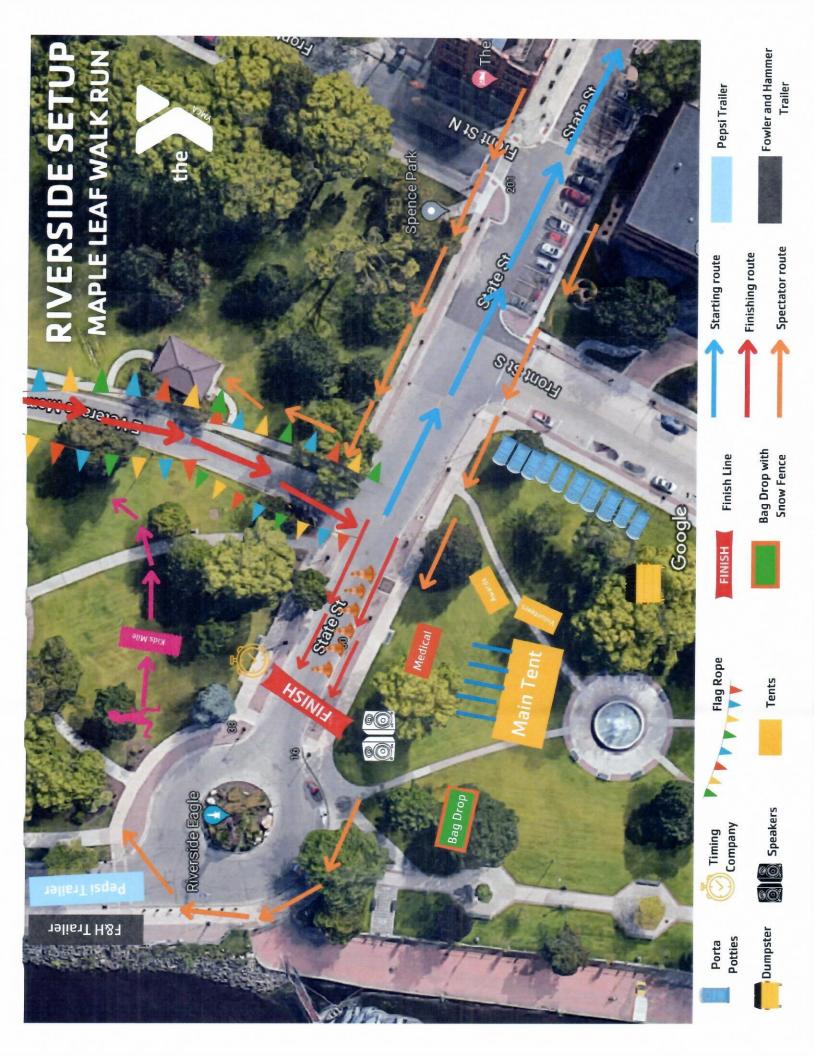
Submit Special Event Application and fee (including any other applicable license/permit applications and fees) to:

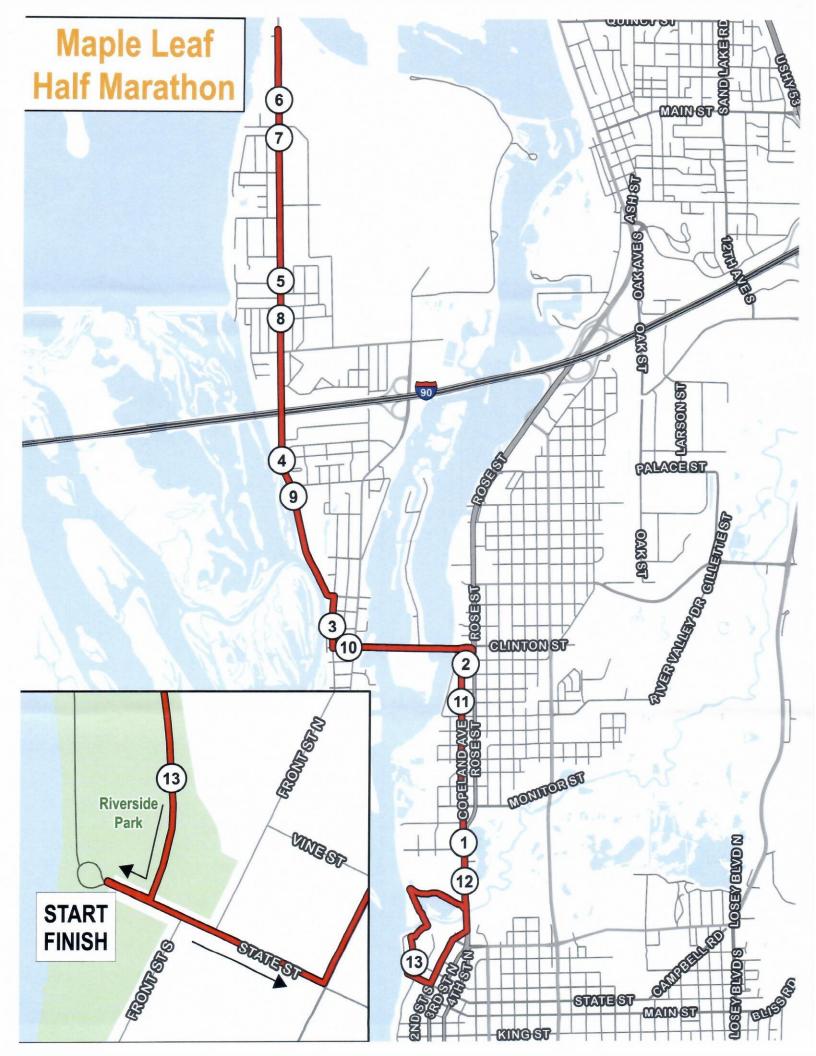
City Clerk 400 La Crosse Street La Crosse WI 54601

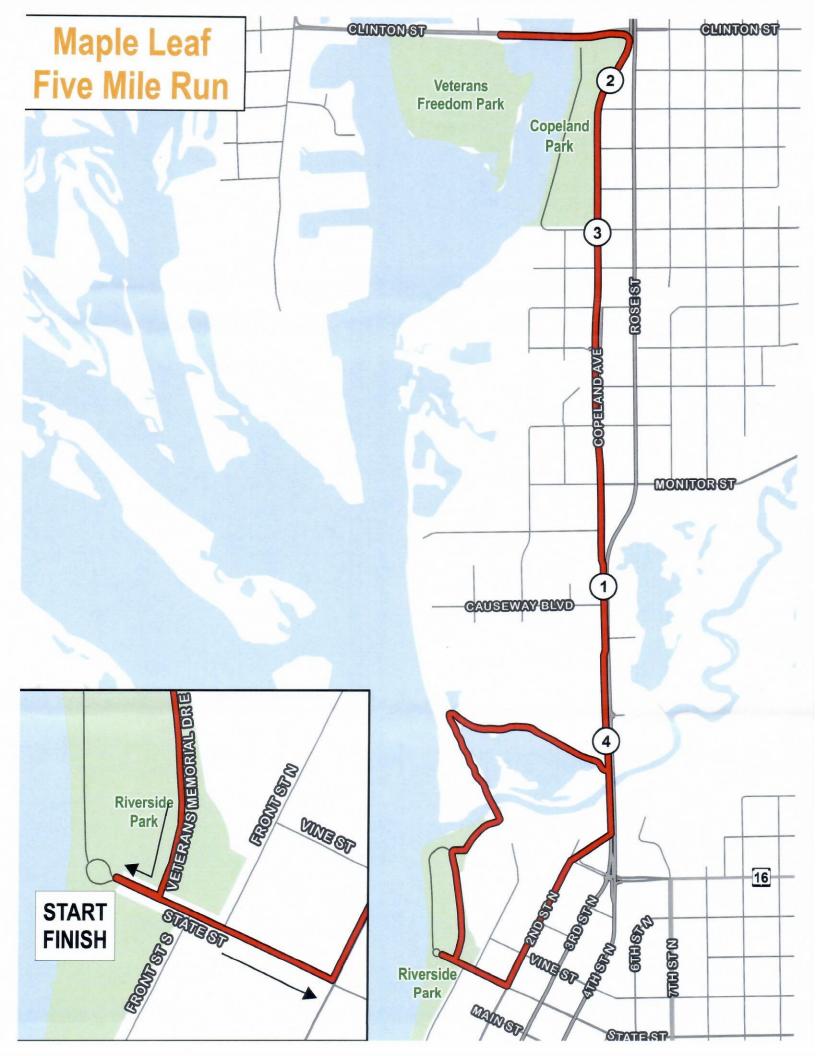
Questions: 608-789-7510 or email licenses@cityoflacrosse.org

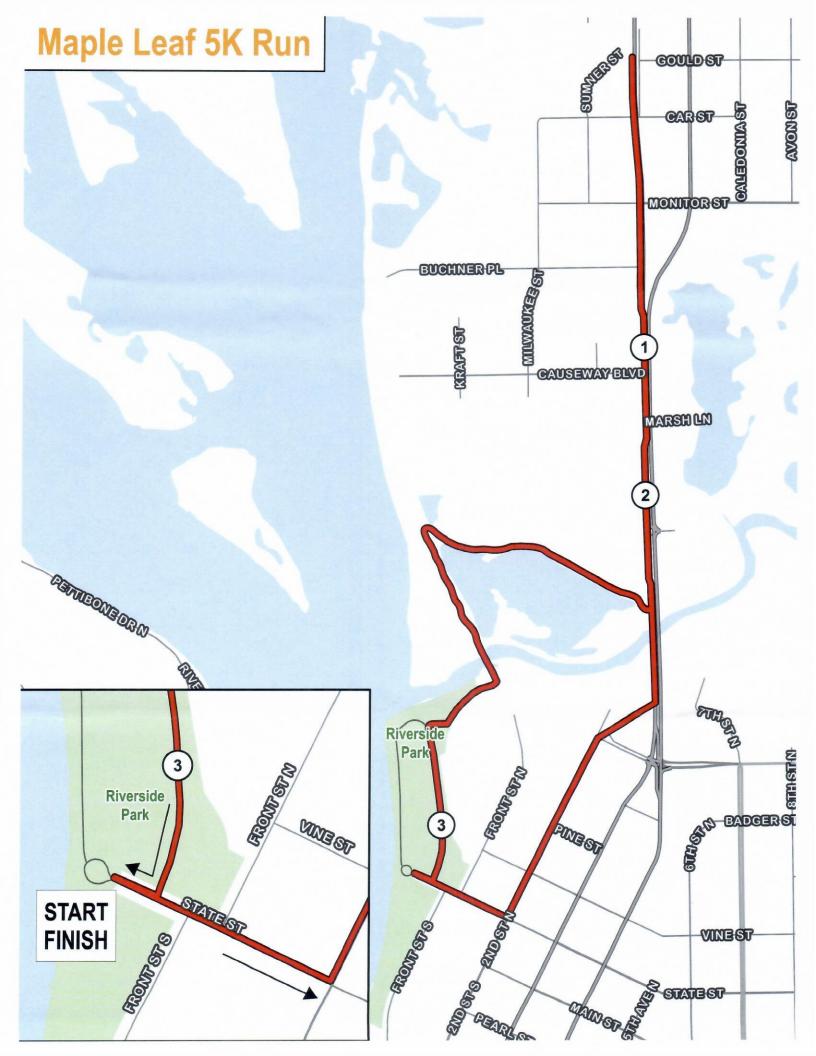
Date Routed:		F	or Office Use Only	
DEPARTMENT	APPROVE	DENY	BY	REASON (if denied)
Special Event Staff			Liberton with the	maternates are one metaplicates may be stated a stated
La Crosse County Health				The state of the s
Parks, Recreation & Forestry		4.22	D. <u>11-4-1</u>	
Police				
Fire Department - CRM				
Engineering & Public Works			- 150 H - 141 E	
Streets				
Recycling	1000-		and the second	- New rate algorithms at a 1-to production a
Parking Utility				andre on the continuous of
Transit			20	e ce su perme a la proprie
City Clerk				
Investigation - Personal Data S	heet			
Police – Records				
Delinquencies - Organization as	nd Personal D	ata Sheet		
Legal				
Treasurer				
Utilities (water, storm, sewer)				
Municipal Court				361 (6) (6) (6)
Parking Utility				

License Issue Date:	License No:	
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JGALLUP



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/4/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). CONTACT Jodi Gallup Robertson Ryan - La Crosse PHONE (A/C, No, Ext): (608) 881-8496 1746 FAX (A/C, No):(608) 784-4774 PO Box 547 La Crosse, WI 54602 E-MAIL ADDRESS: jgallup@robertsonryan.com INSURER(S) AFFORDING COVERAGE NAIC # INSURER A : WEST BEND MUTUAL INSURANCE COMPANY 15350 INSURED INSURER B : UNITED HEARTLAND La Crosse Family YMCA INSURER C: 1140 Main Street INSURER D La Crosse, WI 54601 INSURER E INSURER F: **COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:** THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDL SUBR POLICY EFF POLICY EXP (MM/DD/YYYY) TYPE OF INSURANCE POLICY NUMBER LIMITS A X COMMERCIAL GENERAL LIABILITY 1,000,000 EACH OCCURRENCE CLAIMS-MADE X OCCUR A046385 DAMAGE TO RENTED PREMISES (Ea occurrence 300,000 7/1/2022 7/1/2023 X Sexual Misconduct X 2.000 MED EXP (Any one person) 1,000,000 PERSONAL & ADV INJURY 2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: GENERAL AGGREGATE \$ POLICY PRO-2,000,000 PRODUCTS - COMP/OP AGG OTHER: COMBINED SINGLE LIMIT (Ea accident) AUTOMOBILE LIABILITY 1.000.000 X ANY AUTO A046385 7/1/2022 7/1/2023 BODILY INJURY (Per person) SCHEDULED AUTOS OWNED AUTOS ONLY BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) HIRED AUTOS ONLY NON-OWNED AUTOS ONLY X X UMBRELLA LIAB OCCUR 8,000,000 EACH OCCURRENCE A046385 **EXCESS LIAB** 7/1/2022 7/1/2023 CLAIMS-MADE 8,000,000 AGGREGATE \$ DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY OTH-ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) WCP 100032072 7/1/2022 7/1/2023 100,000 E.L. EACH ACCIDENT N/A 100,000 E.L. DISEASE - EA EMPLOYEE If yes, describe under DESCRIPTION OF OPERATIONS below 500,000 E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Maple Leaf Walk Run on September 30th. The City of La Crosse, the County of La Crosse and the Town of Campbell are listed as an additionally insured on the general liability policy with respect to the insured's sponsored events. CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. City of La Crosse, County of La Crosse and the Town of Campbell 400 La Crosse Street La Crosse, WI 54601 AUTHORIZED REPRESENTATIVE

ACORD 25 (2016/03)

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – AUTOMATIC STATUS WHEN REQUIRED BY WRITTEN CONTRACT WITH YOU

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

A. Section II - Who is An Insured is amended to include as an additional insured any person or organization you are required by a written contract to name as an additional insured.

The written contract must be:

- Currently in effect or becoming effective during the term of this policy; and
- Signed by all parties to the written contract or written agreement prior to the "bodily injury," "property damage," "personal injury and advertising injury."
- B. The insurance provided to the additional insured is limited as follows:
 - That person or organization is only an additional insured with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused in whole or in part, by:
 - a. your ongoing operations performed for the insured at the location designated in the written contract; or
 - b. premises owned or used by you.

However:

- The insurance afforded to such additional insured only applies to the extent permitted by law; and
- b. If coverage provided to the additional insured is required by a written contract or written agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.
- C. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to:

 "Bodily injury", "property damage" or "personal and advertising injury" arising out of the rendering of, or the failure to render, any professional architectural, engineering or surveying services, including:

- a. The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; and
- Supervisory, inspection, architectural or engineering activities.
- "Bodily injury" or "property damage" occurring after:
 - a. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed: or
 - b. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principle as a part of the same project.
- D. As respects the coverage provided under this endorsement, Paragraph 4.b. Section IV COMMERCIAL GENERAL LIABILITY CONDITIONS is amended with the addition of the following:
 - 4. Other Insurance
 - b. Excess Insurance

This insurance is excess over:

Any other valid and collectible insurance available, procured by or on behalf of the additional insured whether primary, excess, contingent or on any other basis unless a written contract specifically requires that this insurance be either primary or primary and noncontributing. Where required by written contract, we will consider any other insurance maintained by the additional insured for injury or damage covered by this endorsement to be excess and noncontributing with this insurance.

If no written contract specifically requires primary or noncontributory coverage, then this insurance is excess, as a condition of coverage, the additional insured shall be obligated to tender the defense and indemnity of every claim or suit to all other insurers that may provide coverage to the additional insured, whether on a contingent, excess or primary basis.

When this insurance is excess, we will have no duty under Coverage **A.** and Coverage **B.** to defend the insured against any "suit" if any other insurer has a duty to defend the insured against that "suit". If no other insurer defends, we will undertake to do so, but we will be entitled to the insured's rights against all those other insurers.