



11011 Brigham Avenue
PO Box 189
Blue Mounds, WI 53517
Info@bluemoundsvillage.com
608-437-5197

PERMIT APPLICATION CHECKLIST

Submit the following materials when applying for a permit:

Note: Items 1, 2, and 3 are included in this packet.

- 1. **Completed Permit Application including Signed Indemnification / Hold Harmless**
- 2. **Completed Event Route Information Page**
 - Village must be notified of any route changes made after submission or approval of application
- 3. **Signed "Requirements for Permit to Use Streets" Page**
- 4. **Detailed Map of the Event Route**
- 5. **Submit application to our office via U.S. Mail to the above address**
 - Applications must be submitted at least 30 days prior to your scheduled event
 - **Only complete applications containing all required information shall be considered**
 - Completed applications can be e-mailed only if all the paperwork has been scanned to show original signatures. In that case, send to info@bluemoundsvillage.com
- 6. **Fee of enclosed**
 - Less than 200 participants: \$50.00
 - More than 200 participants: \$100.00

Other items to note:

- Event officials must coordinate all local road use with the affected municipalities and must contact the Wisconsin Department of Transportation to request permission to use any State Highways.
- No Markings of any kind are allowed on the streets.

Date Received: _____ BY: _____

Date to Police Chief: _____ Approved Denied BY: _____

Date to Superintendent of Streets and Parks: _____ Approved Denied BY: _____

Date to Village Board: _____ Approved Denied

Comments regarding notification of neighbors/clean up/charges:

Superintendent of Streets and Parks Signature: _____

APPLICATION FOR USE OF VILLAGE OF BLUE MOUNDS STREETS

EVENT DETAILS

Event Name	Event Sponsor	Event Website Address
Event Date	Number of Participants	Type of Start Staggered <input type="checkbox"/> Mass <input type="checkbox"/>
Event Type Festival <input type="checkbox"/> Parade <input type="checkbox"/> Run <input type="checkbox"/> Walk <input type="checkbox"/> Bicycle Ride <input type="checkbox"/> Other (describe):		
Total Time of Event from Setup to Teardown		Actual Time Participants will be on the Road
Start Time A.M. <input type="checkbox"/> P.M. <input type="checkbox"/>	End Time A.M. <input type="checkbox"/> P.M. <input type="checkbox"/>	Start Time A.M. <input type="checkbox"/> P.M. <input type="checkbox"/> End time A.M. <input type="checkbox"/> P.M. <input type="checkbox"/>

CONTACT INFORMATION

Contact Person	Day Phone	Evening Phone	Fax
Mailing Address	City, State, Zip		E-Mail Address

LOGISTICAL DETAILS

Type of Support Provided by Event Sponsor (Check all that Apply)
 Traffic Control Support Vehicles Medical Cones/barricade Other: _____

Do you feel you need law enforcement traffic control? Yes No
 • Road barricades/cones/no parking signs may be charged an additional fee.

INDEMNIFICATION / HOLD HARMLESS

I/We, _____, sponsor(s) and/or co-sponsors
(name/organization)

of _____,
(name of event)

shall indemnify, hold harmless, and defend Village of Blue Mounds, its officers, agents, and employees from and against all claims, damages, losses, and expenses, including attorneys' fees, which arise from or out of the above specified event.

Each party warrants for itself that it has complied with all necessary requirements to execute this Agreement and that the person(s) executing this Agreement on the event sponsor's behalf is authorized to do so.

Signature of Responsible officer, event sponsor/co-sponsor	Date
Signature of Responsible officer, event sponsor/co-sponsor	Date

Event Route Information is to be completed on the next page.

EVENT ROUTE (required information)

Event Name:

In this section list all streets, the beginning and ending location of use of the streets.

ROUTE INFORMATION

Additional roads should be listed in this format on a separate sheet of paper.

A Map of the Event Route must accompany this application

PLEASE NOTE: Event officials must coordinate all local road use with the affected municipalities.

