



Phone: (715) 839-5039
CommunityServices@EauClaireWI.gov

Special Events Committee

Agenda

Wednesday, September 4, 2024 | 1:00PM

North Conference Room – City Hall, 203 S. Farwell Street, Eau Claire, WI.

1. **Call to Order**
2. **Open Public Comment Period**
 - a. The public comment period will be for 20 minutes. Each speaker shall be permitted no more than 3 minutes to speak and shall only speak once per session.
3. **New Event Review**
 - a. Pinehurst Enduro Bike Race
 - b. Jeffers Park Trunk or Treat
 - c. Fall Festival Fire House Beer Garden
 - d. HalleAUween 5K - Eau Claire Marathon 5K Series
 - e. Chippewa Valley Skelebration
4. **Repeat Event Review**
 - a. Fall Festival
 - b. Comedy in the Park
 - c. Walk for Life
 - d. Dark History Tours
 - e. Walk to End Alzheimers – Chippewa Valley
 - f. Clearwater Winter Parade
5. **Discussion and Direction**
 - a. Discussion on Special Event Process and Procedure
 - b. Future Agenda Items
6. **Adjournment**

In order to accommodate the participation of persons with disabilities at this meeting, the City will provide the services of a sign language interpreter or make other reasonable accommodations on request. To make such a request, please notify the City at (715) 839-4902 at least 2 days prior to the meeting.

Lane Berg, Community Services Director
c: News Media



CITY OF EAU CLAIRE

2024 SPECIAL EVENT APPLICATION

Community Services
910 Forest Street
Eau Claire, WI 54703
715-839-8883

Summary of Event

EVENT NAME	<input checked="" type="checkbox"/> New Event <input type="checkbox"/> Repeat Event <input type="checkbox"/> Repeat Event with changes (Explain changes in the description below)	
	Event Name: Pinehurst Enduro Bike Race	
	Event Date(s): Sat 10/12/2024. 8am - 6pm	
	Name of Sponsoring Organization: OutdoorMore, Inc	
EVENT DETAILS	<input checked="" type="checkbox"/> Non-Profit Group <input type="checkbox"/> For Profit <input type="checkbox"/> Other, please describe:	
	Event description, including changes (attach additional sheet, if necessary): Bike racing on the trails at Pinehurst Park. Have held event for a few years now without meeting the requirements of a "special event". Planning to charge entrance fees and serve food for racers this year, so submitting special event application.	
	Estimated Daily Attendance: 75	Estimated Total Attendance: 75
	Donations, charges or entry fees: \$10 entry fee/donation for racers	
	Location(s) of Event: Pinehurst Park	
	Time Set Up Begins: 8am	Time Event Begins: 9am
Time Event Ends: 6pm	Time Clean-up Ends: 7pm	
CONTACT DETAILS	Organizer Name: Andy Wians	
	Address: 909 Oxford Ave	
	Work Phone:	Cell Phone: 920-850-8259
	Email: thepinehurstproject@gmail.com	
Please note if new organizer: Andy has helped organize event last few years. Andy is current President of OutdoorMore, Inc.		

Hold Harmless and Payment Agreements

- The applicant agrees to hold harmless, indemnify and defend, at no cost to the City, the City of Eau Claire, its employees, agents, representatives and elected city officials, for any and all claims, demands, suits, losses, costs, expenses (including attorney fees), or any other type of damages, that result from the Special Event. Applicant is responsible for any and all losses or claims that are in any way connected to their Special Event.
- The applicant agrees to be billed for any City services at the conclusion of their event. Events cancelled with less than 36 hours' notice may be responsible for the cost of planned services.

I also certify by my signature below that I am a duly qualified representative of my organization and authorized to sign this agreement.

Authorized Applicant Signature: Andrew Wians Digitally signed by Andrew Wians
 Date: 2024.08.10 08:54:52 -05'00' Date: 8/10/2024

Event Infrastructure

Check ALL items that apply to your event. All relevant items must be checked for appropriate approvals.

*Some items require additional forms; see the last page of the application for details.

ADMINISTRATIVE APPROVAL

- 100 or more persons are expected in a single day
- Entry fee or admission is charged
- Donations are accepted
- Merchandise or other items will be sold
- Fireworks, fires or other hazardous activities will be provided
- Overnight Camping
- Drones will be used at the event (Ordinance 9.76.110-B.2.)*
- Requesting the use of a boat with a motor on Half Moon Lake during the event
- Putting up tents/inflatables that require stakes to be driven into the ground
- Putting up tents larger than 250 square feet*
- Eau Claire River Lights sponsorship consideration*
- Food/concessions will be served OR sold*
- Selling or distributing 2+ kegs/half barrels of fermented malt beverage or wine*

CITY COUNCIL

- 1,000 or more persons are expected at the event
- Selling or distributing 6+ kegs/half barrels of fermented malt beverage or wine*
- Alcohol will be served past sunset or 8:00 pm in the evening, whichever is later
- Alcohol will be served on the streets, sidewalks, alleys or boulevards
- The event will close city streets, alley, sidewalk or boulevard
- The event will require the alteration of park operational hours (Every day, 4am-11pm)

Event Schedule Worksheet

Include set-up times, event times, race times, food service times, alcoholic beverage service times, firework times, amplified music times, clean-up times, etc. Attach additional sheet, if necessary.

Activity	Location	Date	Start Time	End Time
Set Up	Pinehurst	10/12/24	8am	9:30am
Registration/Racing	Pinehurst	10/12/24	8am	4pm
Food Service	Pinehurst	10/12/24	10am	2pm
Awards/Event Ending	Pinehurst	10/12/24	4pm	6pm
Clean Up	Pinehurst	10/12/24	6pm	7pm

Event/Services Requested

If you need services or items from the City of Eau Claire for your special event, fill out the form below. Contact Community Services for fee information. This is NOT a comprehensive list of services that may be required for your event. (Item totals may be adjusted for safety reasons by City staff)

Service/Item	# of Items Requested
Police Department Services	
Fire Department Services	
<i>Ambulance Services (please specify EC Fire Dept or outside service)</i>	
Event Panels / Fencing (please specify)	
No Parking Signs (must be posted 24 hours before event start, posts not included)	
Barricades (it takes 4 barricades to close down 1 block of city street)	
Traffic Cones	
Extra Garbage/Recycling Bins <i>(please specify)</i>	
Other:	

Emergency Action Plan

ITEMS TO CONSIDER: Designated “lost child” area, evacuation procedure, securing valuables, crowd control, emergency response procedures and contact information, weather conditions, etc.

Describe your first aid and emergency action plans for the event. Will you have first aid kit(s) available, and/or more advanced medical care, including AED and/or medical personnel available for participants and spectators? How will you advise participants and spectators of locations for first aid if needed?

We will have at least one Outdoor Emergency Care certified ski patroller on hand with first aid supplies. Is there an AED pack in the warming shelter? There is also a stretcher in the warming shelter should we need one. Looking to see if we can get more patrollers to attend event as well. Race organizers and volunteer support staff will be connected via walkie talkies and cell phones, and will have bikes/vehicles on hand if we need to quickly reach an accident area.

How will you monitor weather during the event? Who will monitor the weather? How will you notify participants and spectators of emergency situations?

Race organizers will monitor weather. Organizers and volunteer staff will be connected via walkie talkie and cell phone to quickly relay any messages to racers or spectators.

How will you provide access to ambulance and fire trucks for the event in case of medical emergencies?

We have a key to unlock the gate that gives vehicle access to the park. The gate will be closed, but unlocked on event day to allow for quick access if needed. The XC ski trails will serve as access roads to various points on the race course. Many people will be on hand should we need to transport a person from a bike trail to an access road.

Emergency Action Plan (continued)

During an emergency, what communication tools will be available at the event and along race routes? If the event extends outside Eau Claire city limits or on UWEC property, what plans do you have in place?

Race organizers will be stationed at points along the race route and connected via walkie talkies and cell phone.

Waste Collection/Recycling

Describe the waste disposal and recycling needs/plan for your event.

We will provide trash bins at places around the event site where people congregate. Trash will be emptied during event cleanup.

What, if any, concessions or food products will be sold OR distributed during the event?

Still TBD - considering ordering pizza, grilling hot dogs, or bringing in a food truck

What type of products (cups, plates, etc.) will you use during your event?

Recyclable Compostable (biodegradable) Other:

User and Traffic Impact Plan

If the event will impact neighbors and other park users, contact Neighborhood and Business Associations, Chippewa Valley Museum, or Paul Bunyan Camp. How will you notify the affected users of alternate routes and parking options? Include letters of support from associations/businesses affected

Event will not exceed capacity of parking lot at Pinehurst. Will be reserving the shelter/park for the day of the event. Will place flyers on bulletin board at park notifying visitors of the upcoming event, as well as advertising event on our website, social media pages, and email list.

Describe the traffic and parking control plans for your event. How will you control traffic and parking to keep traffic and pedestrian lanes open?

Event will not exceed capacity of parking lot at Pinehurst.

Yes	No	Will the event offer off-site parking agreements with other parties or shuttle bus services?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	If yes, include information on those agreements.

Yes	No	Will you contract with a private company or organization to provide such services?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	If yes, what company will you use:

Street Closure Worksheet

If you are requesting street closures, complete this worksheet. Attach additional sheet, if necessary.
Please note: Volunteers CANNOT stop traffic; they can only control the pedestrians with your event.

Street Closure (Example: S. Barstow St from Gray St to Lake St)	Time Closing	Time Reopening

Firearms Information

Wisconsin residents have the right to carry a concealed weapon upon issuance of a state permit. City of Eau Claire code section 9.32.040 prohibits firearms on certain City property. Answer the following questions to assist City staff in determining the requirements for your special event.

- Is your event being held at one or more of the following City of Eau Claire buildings, facilities, or locations? (These facilities are permanently posted “Firearms Prohibited”) Check the correct facility:
 - Carson Park Football Stadium, Baseball Stadium, Hobbs Softball Field, or Gelein Softball Field
 - Chippewa Valley Museum OR Paul Bunyan Museum
 - Hobbs Ice Arena
 - Fairfax Pool
 - Neighborhood Shelter – Boyd, Lakeshore, McDonough, North Riverfronts, Pinehurst, Sundet
 - None of the above OR you are using another public space for your event, answer questions below.

- Are you charging admission/taking donations to your event AND having a controlled access area (fencing)?
 - Yes No
 - a. If yes to #2, are you posting your special event “Firearms Prohibited”? Yes No

- Will your event have a Temporary Class B picnic license to serve wine or beer?
 - Yes No
 - a. If yes to #3, will you be posting the enclosed area (i.e., beer garden) where beer or wine is served as “Firearms Prohibited”? Yes No

- If no to #2a OR #3a then you must include a written explanation that details your plan to ensure the health, safety and welfare of those attending the event.

- If no to #3a, “Guns and Alcohol Don’t Mix” signs are required at each public entrance to the licensed area.

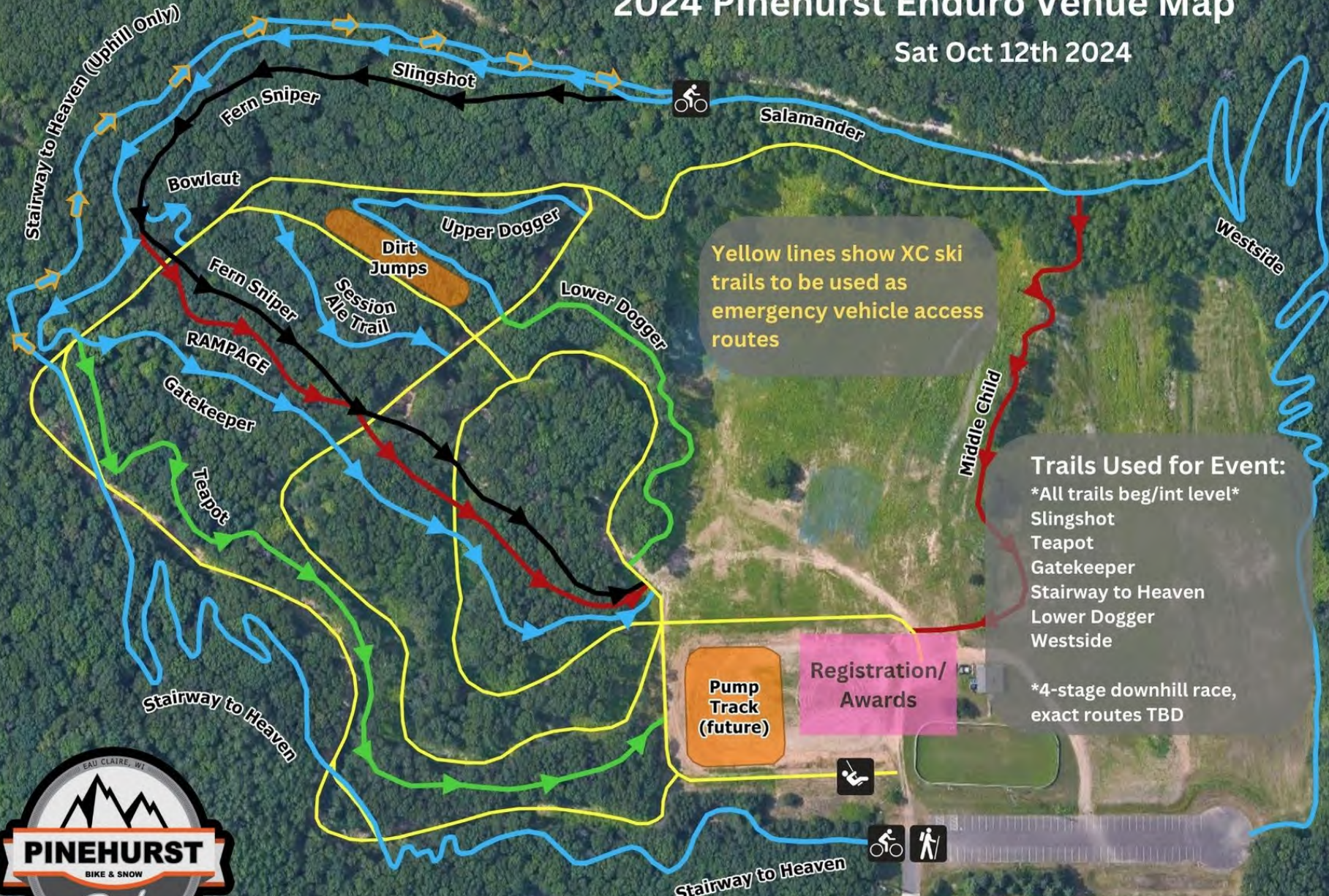
OFFICE USE ONLY

- | | |
|--|---|
| <input checked="" type="checkbox"/> No City Requirements | <input type="checkbox"/> Safety Plan required |
| <input type="checkbox"/> Posting “Firearms Prohibited” | <input type="checkbox"/> “Guns and Alcohol Don’t Mix” sign required |

2024 Pinehurst Enduro Venue Map

A. Wians

Sat Oct 12th 2024



Yellow lines show XC ski trails to be used as emergency vehicle access routes

Trails Used for Event:
 All trails beg/int level
 Slingshot
 Teapot
 Gatekeeper
 Stairway to Heaven
 Lower Dogger
 Westside
 *4-stage downhill race, exact routes TBD



Stairway to Heaven

Delbert Rd

Registration/Awards

Pump Track (future)

Non-Profit Temporary Food Service Application

Event: Pinehurst Enduro Bike Race

Event Date(s): Sat 10/12/2024 Year: 2024 Time: 9am-4pm

Location of this Event (Address): 3523 Delbert Rd. Eau Claire, WI 54703

Reminder that if you are not part of a Licensed Special Event then you must be on Private Property.

Name of Applicant/Organization: OutdoorMore, Inc.

On Site Operator Name/Contact: Andrew Wians

Mailing Address: 909 Oxford Ave. Eau Claire, WI 54703

E-mail: thepinehurstproject@gmail.com Phone#: 920-850-8259

Is this organization a religious, fraternal, youth, patriotic, service, or civic group (non-profit)?

Yes or No

If the answer to the previous question is yes, then has this group served food to the public during the past 12 months?

Yes , how many days?

No

Menu: Please list the foods that will be served and equipment used:

TBD

Order Pizzas OR

Food Truck OR

Grill hot dogs and pre-packaged chips and candy

Where will foods be prepared? ***No home prepared foods allowed!***

Grilled hot dogs would be only thing prepared on site during event. Other meal options would be prepared by food provider

Type of structure that will be used for food service (i.e., inside building, pop wagon, tent, a mobile unit).

Under pop up tents

Department Use:

Temporary restaurant license required? Yes or No

Discussed requirements with the Health Department:

Date:

R.S.

Signature



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/30/2024

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.

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.

PRODUCER: Associated, 1701 Golf Road #3-700, Rolling Meadows, IL 60008. CONTACT NAME, PHONE: (847) 427-8400, FAX: (847) 427-3430, E-MAIL ADDRESS: assocagencies@associated.cc. INSURER(S) AFFORDING COVERAGE: Mesa Underwriters Specialty In (36838), United States Fire Ins Co (21113).

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.

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL INSD, SUBR WVD, POLICY NUMBER, POLICY EFF (MM/DD/YYYY), POLICY EXP (MM/DD/YYYY), LIMITS. Rows include Commercial General Liability, Automobile Liability, Umbrella Liability, Workers Compensation, Accident Medical.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Certificate Holder, City of Eau Claire, is included as Additional Insured as respects the General Liability policy indicated above.

CERTIFICATE HOLDER

CANCELLATION

Certificate Holder: City of Eau Claire, 203 S. Farwell Street, Eau Claire, WI 54701. Cancellation text: SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE signature.



CITY OF EAU CLAIRE

2024 SPECIAL EVENT APPLICATION

Community Services
 910 Forest Street
 Eau Claire, WI 54703
 715-839-8883

Summary of Event

EVENT NAME	<input checked="" type="checkbox"/> New Event <input type="checkbox"/> Repeat Event <input type="checkbox"/> Repeat Event with changes (Explain changes in the description below)	
	Event Name: Jeffers Park Trunk or Treat	
	Event Date(s): October 24, 2024	
	Name of Sponsoring Organization: Eau Claire Nationals, Inc.	
<input checked="" type="checkbox"/> Non-Profit Group <input type="checkbox"/> For Profit <input type="checkbox"/> Other, please describe:		

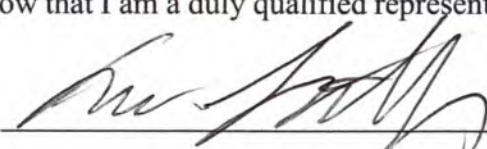
EVENT DETAILS	Event description, including changes (attach additional sheet, if necessary): Trunk or Treat event open to the public	
	Estimated Daily Attendance: 750-999	Estimated Total Attendance: 750-999
	Donations, charges or entry fees: Donations - no charges or entry fees	
	Location(s) of Event: 5710 Jeffers Road Eau Claire WI 54703	
	Time Set Up Begins: 4:00 pm	Time Event Begins: 5:00 pm
	Time Event Ends: 7:30 pm	Time Clean-up Ends: 8:00 pm

CONTACT DETAILS	Organizer Name: Eau Claire Nationals, Inc	
	Address: 1311 Stephi Road Eau Claire WI 54703	
	Work Phone:	Cell Phone: 715-379-6311
	Email: lschultz3131@gmail.com	
	Please note if new organizer: yes	

Hold Harmless and Payment Agreements

- The applicant agrees to hold harmless, indemnify and defend, at no cost to the City, the City of Eau Claire, its employees, agents, representatives and elected city officials, for any and all claims, demands, suits, losses, costs, expenses (including attorney fees), or any other type of damages, that result from the Special Event. Applicant is responsible for any and all losses or claims that are in any way connected to their Special Event.
- The applicant agrees to be billed for any City services at the conclusion of their event. Events cancelled with less than 36 hours' notice may be responsible for the cost of planned services.

I also certify by my signature below that I am a duly qualified representative of my organization and authorized to sign this agreement.

Authorized Applicant Signature:  Date: 8/20/24

Event Infrastructure

Check ALL items that apply to your event. All relevant items must be checked for appropriate approvals.

*Some items require additional forms; see the last page of the application for details.

ADMINISTRATIVE APPROVAL

- 100 or more persons are expected in a single day
- Entry fee or admission is charged
- Donations are accepted
- Merchandise or other items will be sold
- Fireworks, fires or other hazardous activities will be provided
- Overnight Camping
- Drones will be used at the event (Ordinance 9.76.110-B.2.)*
- Requesting the use of a boat with a motor on Half Moon Lake during the event
- Putting up tents/inflatables that require stakes to be driven into the ground
- Putting up tents larger than 250 square feet*
- Eau Claire River Lights sponsorship consideration*
- Food/concessions will be served OR sold*
- Selling or distributing 2+ kegs/half barrels of fermented malt beverage or wine*

CITY COUNCIL

- 1,000 or more persons are expected at the event
- Selling or distributing 6+ kegs/half barrels of fermented malt beverage or wine*
- Alcohol will be served past sunset or 8:00 pm in the evening, whichever is later
- Alcohol will be served on the streets, sidewalks, alleys or boulevards
- The event will close city streets, alley, sidewalk or boulevard
- The event will require the alteration of park operational hours (Every day, 4am-11pm)

Event Schedule Worksheet

Include set-up times, event times, race times, food service times, alcoholic beverage service times, firework times, amplified music times, clean-up times, etc. Attach additional sheet, if necessary.

Activity	Location	Date	Start Time	End Time
Set Up	5710 Jeffers Road Eau Claire WI 54703	10/24/2024	4:00pm	5:00pm
Trunk or Treat Event (exact times TBD)	5710 Jeffers Road Eau Claire WI 54703	10/24/2024	5:00pm	7:30pm
Clean Up	5710 Jeffers Road Eau Claire WI 54703	10/24/2024	7:30 pm	8:00 pm

Event/Services Requested

If you need services or items from the City of Eau Claire for your special event, fill out the form below. Contact Community Services for fee information. This is NOT a comprehensive list of services that may be required for your event. (Item totals may be adjusted for safety reasons by City staff)

Service/Item	# of Items Requested
Police Department Services	
Fire Department Services	
Ambulance Services (please specify EC Fire Dept or outside service)	
Event Panels / Fencing (please specify)	
No Parking Signs (must be posted 24 hours before event start, posts not included)	
Barricades (it takes 4 barricades to close down 1 block of city street)	
Traffic Cones	
Extra Garbage/Recycling Bins (please specify)	10
Other: We are not requesting additional service to manage the event, unless the city see's fit. But we are inviting all services (Police, Fire Department, and Ambulance to join us at the event!)	

Emergency Action Plan

ITEMS TO CONSIDER: Designated "lost child" area, evacuation procedure, securing valuables, crowd control, emergency response procedures and contact information, weather conditions, etc.

Describe your first aid and emergency action plans for the event. Will you have first aid kit(s) available, and/or more advanced medical care, including AED and/or medical personnel available for participants and spectators? How will you advise participants and spectators of locations for first aid if needed?

First Aid Kits available otherwise local emergency services would be called for any life threatening emergencies.

How will you monitor weather during the event? Who will monitor the weather? How will you notify participants and spectators of emergency situations?

Board Members will be monitoring the weather before, during, and after the event. Participants and spectators will be notified via social media post if there is severe weather that would impact the event from taking place. During the event would we communicate with onsite participants via word of mouth and post to social media to inform them to of any changes and or if the area should be avoided.

How will you provide access to ambulance and fire trucks for the event in case of medical emergencies?

Jeffers Park has a large parking lot and an emergency back entrance that would allow medical services through.

Emergency Action Plan (continued)

During an emergency, what communication tools will be available at the event and along race routes? If the event extends outside Eau Claire city limits or on UWEC property, what plans do you have in place?

Event will be contain to the Jeffers Park Field on Jeffers Road allowing for ease of commuication to all participants

Waste Collection/Recycling

Describe the waste disposal and recycling needs/plan for your event.

Waste Disposal/Recycling pickup would be needed post event. (Typically there are garbage cans already at the park, unless these are collected at the end of the year.)

What, if any, concessions or food products will be sold OR distributed during the event?

Hot Dogs, Hot Chocolate, Popcore, Pop, Water

What type of products (cups, plates, etc.) will you use during your event?

Recyclable Compostable (biodegradable) Other:

User and Traffic Impact Plan

If the event will impact neighbors and other park users, contact Neighborhood and Business Associations, Chippewa Valley Museum, or Paul Bunyan Camp. How will you notify the affected users of alternate routes and parking options? Include letters of support from associations/businesses affected

Signs will be posted in the park area pre event notifying local/neighborhood park users of the event. The Eau Claire Nationals and Eau Claire Fast pitch reserve first rights to Jeffers Park Baseball and Softball Dimond area, where this event will take place in between the fields. Up to the concessions stand. This event will not impact Mircle Field or the Playground are, thus should not impact normal park goers activity.

Describe the traffic and parking control plans for your event. How will you control traffic and parking to keep traffic and pedestrian lanes open?

The Trunk or Treat event we will have Cars line up by the concessions stand and down the side walk. If any of the parking lot is needed to host trunks (which we do not believe at this time), it will be blocked/roped off. Otherwise participants will be able to use the normal off street parking lot for the vent. Due to the nature of the event being a trunk or treat, participants do not typically linger too long.

Yes No Will the event offer off-site parking agreements with other parties or shuttle bus services?
 If yes, include information on those agreements.

Yes No Will you contract with a private company or organization to provide such services?
 If yes, what company will you use:

Street Closure Worksheet

If you are requesting street closures, complete this worksheet. Attach additional sheet, if necessary.
Please note: Volunteers CANNOT stop traffic; they can only control the pedestrians with your event.

Street Closure (Example: S. Barstow St from Gray St to Lake St)	Time Closing	Time Reopening

Firearms Information

Wisconsin residents have the right to carry a concealed weapon upon issuance of a state permit. City of Eau Claire code section 9.32.040 prohibits firearms on certain City property. Answer the following questions to assist City staff in determining the requirements for your special event.

- Is your event being held at one or more of the following City of Eau Claire buildings, facilities, or locations? (These facilities are permanently posted "Firearms Prohibited") Check the correct facility:
 - Carson Park Football Stadium, Baseball Stadium, Hobbs Softball Field, or Gelein Softball Field
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 - Hobbs Ice Arena
 - Fairfax Pool
 - Neighborhood Shelter – Boyd, Lakeshore, McDonough, North Riverfronts, Pinehurst, Sundet
 - None of the above OR you are using another public space for your event, answer questions below.

- Are you charging admission/taking donations to your event AND having a controlled access area (fencing)?
 - Yes No
 - a. If yes to #2, are you posting your special event "Firearms Prohibited"? Yes No

- Will your event have a Temporary Class B picnic license to serve wine or beer?
 - Yes No
 - a. If yes to #3, will you be posting the enclosed area (i.e., beer garden) where beer or wine is served as "Firearms Prohibited"? Yes No

- If no to #2a OR #3a then you must include a written explanation that details your plan to ensure the health, safety and welfare of those attending the event.

- If no to #3a, "Guns and Alcohol Don't Mix" signs are required at each public entrance to the licensed area.

OFFICE USE ONLY

- | | |
|--|---|
| <input checked="" type="checkbox"/> No City Requirements | <input type="checkbox"/> Safety Plan required |
| <input type="checkbox"/> Posting "Firearms Prohibited" | <input type="checkbox"/> "Guns and Alcohol Don't Mix" sign required |



CITY OF EAU CLAIRE 2024 SPECIAL EVENT APPLICATION

Community Services
910 Forest Street
Eau Claire, WI 54703
715-839-8883


Summary of Event

EVENT NAME	<input checked="" type="checkbox"/> New Event <input type="checkbox"/> Repeat Event <input type="checkbox"/> Repeat Event with changes (Explain changes in the description below)	
	Event Name: Fall Festival Fire House beer garden	
	Event Date(s): 9/14/24	
	Name of Sponsoring Organization: The Fire House	
EVENT DETAILS	<input type="checkbox"/> Non-Profit Group <input checked="" type="checkbox"/> For Profit <input type="checkbox"/> Other, please describe:	
	Event description, including changes (attach additional sheet, if necessary): Beer garden encompassing parking lot adjoining 202 Gibson St (The Fire House) and Gibson St immediately in front of the building, including the stage area for the DECI Fall Festival	
	Estimated Daily Attendance: 500 - 1000	Estimated Total Attendance: 500 - 1000
	Donations, charges or entry fees: n/a	
	Location(s) of Event: 202 Gibson Street	
	Time Set Up Begins: 8:00am	Time Event Begins: 10:00am
Time Event Ends: 4:00pm	Time Clean-up Ends: 6:00pm	
CONTACT DETAILS	Organizer Name: Chance Smith	
	Address: 202 Gibson Street, Eau Claire WI 54701	
	Work Phone: 715-225-6314	Cell Phone: 715-225-6314
	Email: csmith@gfhotel.com	
Please note if new organizer: new organizer		

Hold Harmless and Payment Agreements

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Authorized Applicant Signature:  Date: **8/22/24**

Event Infrastructure

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ADMINISTRATIVE APPROVAL

- 100 or more persons are expected in a single day
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- Fireworks, fires or other hazardous activities will be provided
- Overnight Camping
- Drones will be used at the event (Ordinance 9.76.110-B.2.)*
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- Selling or distributing 2+ kegs/half barrels of fermented malt beverage or wine*

CITY COUNCIL

- 1,000 or more persons are expected at the event
- Selling or distributing 6+ kegs/half barrels of fermented malt beverage or wine*
- Alcohol will be served past sunset or 8:00 pm in the evening, whichever is later
- Alcohol will be served on the streets, sidewalks, alleys or boulevards
- The event will close city streets, alley, sidewalk or boulevard
- The event will require the alteration of park operational hours (Every day, 4am-11pm)

Event Schedule Worksheet

Include set-up times, event times, race times, food service times, alcoholic beverage service times, firework times, amplified music times, clean-up times, etc. Attach additional sheet, if necessary.

Activity	Location	Date	Start Time	End Time
Set Up	202 Gibson Street	9/14	8:00am	10:00am
Beer garden & Stage performances			10:00am	4:00pm
Beer garden reduced to parking lot only			4:00pm	4:30pm
Fence enclosing street section taken down			4:30pm	5:30pm
Beer garden in parking lot only			4:30pm	7:00pm
Beer garden closed and fences removed			7:00pm	8:00pm
Clean Up			7:00pm	8:30pm

Event/Services Requested

If you need services or items from the City of Eau Claire for your special event, fill out the form below. Contact Community Services for fee information. This is NOT a comprehensive list of services that may be required for your event. (Item totals may be adjusted for safety reasons by City staff)

Service/Item	# of Items Requested
Police Department Services	
Fire Department Services	
<i>Ambulance Services (please specify EC Fire Dept or outside service)</i>	
Event Panels / Fencing (please specify)	Fencing - 245ft
No Parking Signs (must be posted 24 hours before event start, posts not included)	
Barricades (it takes 4 barricades to close down 1 block of city street)	4
Traffic Cones	
Extra Garbage/Recycling Bins <i>(please specify)</i>	
Other:	

Emergency Action Plan

ITEMS TO CONSIDER: Designated “lost child” area, evacuation procedure, securing valuables, crowd control, emergency response procedures and contact information, weather conditions, etc.

Describe your first aid and emergency action plans for the event. Will you have first aid kit(s) available, and/or more advanced medical care, including AED and/or medical personnel available for participants and spectators? How will you advise participants and spectators of locations for first aid if needed?

First aid kits will be available in The Fire House. Fire House staff and volunteers will all have cell phones with the non-emergency ECPD line programmed in, and will be instructed to call 911 in the event of serious emergencies. Fire House staff will work with DECI volunteers in the case of any emergency.

How will you monitor weather during the event? Who will monitor the weather? How will you notify participants and spectators of emergency situations?

The Fire House general manager will monitor weather and inform participants of emergency situations via the stage PA.

How will you provide access to ambulance and fire trucks for the event in case of medical emergencies?

Fire House staff and volunteers stationed at all entrances and exits will be trained on how to quickly unhook and remove fence panels and barricades, allowing quick street access to fire trucks or ambulances.

Emergency Action Plan (continued)

During an emergency, what communication tools will be available at the event and along race routes? If the event extends outside Eau Claire city limits or on UWEC property, what plans do you have in place?

The stage PA system will be used to communicate to the participants; all Fire House staff will have cellphones with the manager's phone number and the ECPD non-emergency line programmed in.

Waste Collection/Recycling

Describe the waste disposal and recycling needs/plan for your event.

n/a - The Fire House has garbage cans and Downtown Eau Claire Inc will have additional garbage and recycling bins set up in the area.

What, if any, concessions or food products will be sold OR distributed during the event?

Alcoholic and non-alcoholic beverages will be sold from The Fire House bar and a tap trailer located in the adjoining parking lot, all in non-breakable containers to be consumed anywhere in the beer garden area. No alcohol will be served in the public right of way or street.

What type of products (cups, plates, etc.) will you use during your event?

Recyclable Compostable (biodegradable) Other:

User and Traffic Impact Plan

If the event will impact neighbors and other park users, contact Neighborhood and Business Associations, Chippewa Valley Museum, or Paul Bunyan Camp. How will you notify the affected users of alternate routes and parking options? Include letters of support from associations/businesses affected

Describe the traffic and parking control plans for your event. How will you control traffic and parking to keep traffic and pedestrian lanes open?

The South sidewalk of Gibson St will not be included in the beer garden fenced in area, allowing access to those local businesses as well as a pedestrian route from Graham Ave to S. Barstow St.

Yes	No	Will the event offer off-site parking agreements with other parties or shuttle bus services?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	If yes, include information on those agreements.

Yes	No	Will you contract with a private company or organization to provide such services?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	If yes, what company will you use:

Street Closure Worksheet

If you are requesting street closures, complete this worksheet. Attach additional sheet, if necessary.
Please note: Volunteers CANNOT stop traffic; they can only control the pedestrians with your event.

Street Closure (Example: S. Barstow St from Gray St to Lake St)	Time Closing	Time Reopening
Gibson St from S. Barstow to Graham Ave	8:00am	6:00pm

Firearms Information

Wisconsin residents have the right to carry a concealed weapon upon issuance of a state permit. City of Eau Claire code section 9.32.040 prohibits firearms on certain City property. Answer the following questions to assist City staff in determining the requirements for your special event.

- Is your event being held at one or more of the following City of Eau Claire buildings, facilities, or locations? (These facilities are permanently posted "Firearms Prohibited") Check the correct facility:
 - Carson Park Football Stadium, Baseball Stadium, Hobbs Softball Field, or Gelein Softball Field
 - Chippewa Valley Museum OR Paul Bunyan Museum
 - Hobbs Ice Arena
 - Fairfax Pool
 - Neighborhood Shelter – Boyd, Lakeshore, McDonough, North Riverfronts, Pinehurst, Sundet
 - None of the above OR you are using another public space for your event, answer questions below.

- Are you charging admission/taking donations to your event AND having a controlled access area (fencing)?
 - Yes No
 - a. If yes to #2, are you posting your special event "Firearms Prohibited"? Yes No

- Will your event have a Temporary Class B picnic license to serve wine or beer?
 - Yes No
 - a. If yes to #3, will you be posting the enclosed area (i.e., beer garden) where beer or wine is served as "Firearms Prohibited"? Yes No

- If no to #2a OR #3a then you must include a written explanation that details your plan to ensure the health, safety and welfare of those attending the event.

- If no to #3a, "Guns and Alcohol Don't Mix" signs are required at each public entrance to the licensed area.

OFFICE USE ONLY

- | | |
|---|---|
| <input type="checkbox"/> No City Requirements | <input type="checkbox"/> Safety Plan required |
| <input checked="" type="checkbox"/> Posting "Firearms Prohibited" | <input type="checkbox"/> "Guns and Alcohol Don't Mix" sign required |



TEMPORARY ALCOHOL LICENSE
EXPANSION APPLICATION FEE: \$44.00

Legal Business Name: Fire N Ice LLC
Business Trade Name: The Fire House
Phone No.: (715) 225-6314
Street Address: 202 Gibson Street
City: Eau Claire
State: WI
Zip: 54701
Email Address: csmith@gfhotels.com
Person in charge of the event (First and Last Name): Chance Smith
Title: General Manager
Brief description of proposed expansion: Expand liquor license into Strobel parking lot and Gibson Street for beer garden during Downtown Fall Festival

- 1. Is this a new event? [X] Yes [] No If no, what was the date of the last event?
2. Date(s) 9/14/2024 Hours of operation 10am 8pm
3. Number of persons expected at the event each day 500 - 1000
4. Have neighbors been notified? [X] Yes [] No
5. Will you be using items such as loud speakers, call systems, live music, etc.? [X] Yes [] No
6. Type of cooking equipment used (deep fryer, charcoal, etc.): N/A
7. Attach a letter addressed to the City Council requesting a temporary expansion (see format on reverse).
8. Attach a security plan that explains how alcohol consumption will be monitored. Provide specific details on how you intend to control consumption of the licensed premise and how you will prevent underage alcohol consumption.
9. Attach a siteplan showing the location of the proposed expansion in relation to the existing premise. Include:
A. Location and materials to be used for the security fence enclosing the expansion
B. Identify the "reasonable" separation barrier between any exterior smoking area and the smoke-free interior.
C. Location of entry and exit points
D. Siteplan must be drawn to scale (example: 1 inch = 10 feet). Show dimensions of:
[] Size of the area occupied by the event
[] Distance from structures on the premises and adjoining parcels
[] Set-back of fence from property lines, streets, sidewalks, etc.
[] Placement and size of any tents
[] Placement of any cooking equipment
[] Show emergency exits
[] Show exit from bar to fenced outdoor area

Fee: \$44.00 Tran Code: 1110
Office use only

Signature Required on Reverse
Submit form with attachments and payment to:

Paperwork: licensing@eauclairewi.gov
Payment: www.eauclairewi.gov/payment
Mail: City of Eau Claire, PO Box 909, EC, WI 54702
Drop box: 203 S. Farwell St., EC, WI 54701
Phone: 715-839-4923

12/23 5.28.110 cc City Atty: LRC:

APPLICANT'S STATEMENT

I hereby certify that the answers on this application are true and correct to the best of my knowledge. I agree, in the consideration of the granting of this license expansion, to comply with the laws of the State of Wisconsin, and to the provisions of the Municipal Code of Ordinances of the City of Eau Claire.

Signature CSmith

Date 08/21/2024

FOR OFFICE USE ONLY:

1. Does applicant have any outstanding bills _____No _____Yes
2. Check Zoning for any issues with expansion _____No _____Yes
3. Building permit number, if any _____



THE FIRE HOUSE

DATE: 8/22/2024

TO: Eau Claire City Council

FROM: Fire 'N Ice LLC DBA The Fire House

SUBJECT: Temporary expansion of alcohol license premise

Fire 'N Ice, LLC d/b/a The Fire House, located at 202 Gibson Street, is requesting an expansion of the liquor licensed premise on 9/14/2024 from 10am – 8pm.

The request for expansion is to have a beer garden (no wine or liquor will be served outside) in the parking lot adjoining The Fire House on the east side of the building and on Gibson Street immediately in front of the building from 10am – 4pm. At the conclusion of the Fall Festival, the beer garden will be reduced in size to cover only the adjoining parking lot for the duration of the expansion until 8pm.

This parking lot is privately owned, and permission has been granted by the owner to use the lot on this date.

This expansion will allow patrons to enjoy adult beverages outside during the Downtown Fall Festival while watching entertainment on the Fall Fest stage in front of The Fire House.

Please direct any questions or concerns to Chance Smith at 715-225-6314.

Thank you for your consideration.

Chance Smith, General Manger
Fire 'N Ice, LLC d/b/a The Fire House

Security Plan for The Fire House, “Fall Fest Beer Garden” event on 9/14/24

The Fire House (202 Gibson Street) intends to hold an outdoor event on September 14th, 2024 from 10am – 8pm. Outdoor alcohol sales (only beer will be served outdoors, but wine and liquor served inside may be consumed outside) will begin at 11pm and cease at 7:00pm. There is an estimated attendance of 500-1000 people throughout the duration of the event. Below are specific details regarding how management of The Fire House intends to keep the premises secure, safe, and legal.

The indoor area of The Fire House, surrounding private parking lot, and portion of Gibson Street immediately in front of The Fire House and parking lot will be used for this event. The parking lot and street will be enclosed by a secured fence (to be no less than six feet tall, per city guidelines) to keep customers from entering and exiting without authorization.

The sidewalk on the South side of Gibson Street will be left open to provide access to local businesses and unimpeded pedestrian traffic from Graham Avenue to Barstow Street without entering the expanded premise.

The primary entrance and exit will be on the sidewalk on the East boundary of the proposed expansion. There will be one emergency exit in the parking lot on the North Side of The Fire House, and one emergency exit located behind the stage. These will be exit only, and no patrons will be allowed reentry from these exits.

There will be at least two employees and/or volunteer positioned at each entrance/exit to the business and parking lot throughout the event. These employees and volunteers will be responsible for and have been trained to check customers’ identification to ensure that they are of legal drinking age.

Water will be served, and multiple water stations will be available throughout the premise. Fire House management and additional staff will be present on the premise during the event serving as security to monitor customers and to ensure that good behavior expectations are being met.

In addition to the above, the following guidelines will be followed for this event:

- Persons under the age of 21 who wish to enter the premises during the Fall Festival (10pm – 4pm) will have their hands marked to indicate their status as underage to the staff.
- All persons under the age of 21 (unless accompanied by a parent or guardian) will be asked to leave the premises after the D.E.C.I. sponsored Fall Festival concludes at 4pm.
- Customers aged 21 and up will have their identification checked at the door and will be provided with a wristband to indicate to staff that they are above the legal drinking age.
- Beer and other beverages will be served at the bar inside the building. Only tap beer and canned beverages will be served at the temporary bar set up in the parking lot. No alcoholic beverages will be sold on City property. All beverages may be consumed outside.
 - o For this reason, all beverages will be served in non-glass/non-breakable containers throughout the duration of the event.

Security Plan for The Fire House, "Fall Fest Beer Garden" event on 9/14/24

- The South half of the parking lot and entire street section will be designated non-smoking, while the North half will be designated smoking.
- The expanded licensed premise will be reduced at the conclusion of the D.E.C.I. sponsored Fall Festival (at 4pm) to encompass only the adjoining parking lot for the remainder of the proposed expansion, until 8:00pm



Emergency Exit

Service area w/
Beer Tap Trailer

The Fire House

Smoking
Non-Smoking

Primary Entry/Exit

Stage

Emergency Exit/
Stage Load In/Load Out

Shepard Law, S.C.
Shepard Law, S.C.

Digitally Ahead

The Fire House

Lot 3 Mercantile Co
Gift shop

205

Google

Urban Style Salon

Gibson St

Graham St

on St



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/22/2024

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.

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).

PRODUCER Spectrum Insurance Group - Eau Claire 4233 Southtowne Dr Eau Claire WI 54701	CONTACT NAME: PHONE (A/C. No. Ext): 715-858-9865		FAX (A/C. No): 715-858-9866
	E-MAIL ADDRESS:		
INSURER(S) AFFORDING COVERAGE			NAIC #
INSURER A : Society Insurance Company			15261
INSURED Rad Racer LLC Fire N Ice LLC PO Box 2035 Eau Claire WI 54702	RADRACE-01		INSURER B :
			INSURER C :
			INSURER D :
			INSURER E :
			INSURER F :

COVERAGES

CERTIFICATE NUMBER: 1294893896

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		BP18036616	11/1/2023	11/1/2024	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$
							MED EXP (Any one person)	\$ 1,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
								\$
A	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	Y		CA23031580	11/1/2023	11/1/2024	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$	Y		UM18036716	11/1/2023	11/1/2024	EACH OCCURRENCE	\$ 5,000,000
							AGGREGATE	\$ 5,000,000
								\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				PER STATUTE	OTH-ER
							E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$
A	Liquor Liability	Y		BP18036616	11/1/2023	11/1/2024	Occurrence	1,000,000
							Aggregate	1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 City of Eau Claire is listed as an additional insured in regards to the General Liability.

CERTIFICATE HOLDER**CANCELLATION**

City of Eau Claire
 203 S. Farwell Street
 Eau Claire WI 54703

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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CITY OF EAU CLAIRE 2024 SPECIAL EVENT APPLICATION

Community Services
910 Forest Street
Eau Claire, WI 54703
715-839-8883

Summary of Event

EVENT NAME	<input checked="" type="checkbox"/> New Event <input type="checkbox"/> Repeat Event <input type="checkbox"/> Repeat Event with changes (Explain changes in the description below)	
	Event Name: halEauween 5K	
	Event Date(s): Friday, October 25th 2024	
	Name of Sponsoring Organization: Eau Claire Marathon	
EVENT DETAILS	<input type="checkbox"/> Non-Profit Group <input checked="" type="checkbox"/> For Profit <input type="checkbox"/> Other, please describe:	
	Event description, including changes (attach additional sheet, if necessary): Halloween themed 5K Race	
	Estimated Daily Attendance: 300	Estimated Total Attendance: 300
	Donations, charges or entry fees: \$30-\$45	
	Location(s) of Event: Phoenix Park	
	Time Set Up Begins: 4:00 p.m.	Time Event Begins: 6:30 p.m.
Time Event Ends: 7:30 p.m.	Time Clean-up Ends: 8:00 p.m.	
CONTACT DETAILS	Organizer Name: Emi Uelmen	
	Address: 320 Putnam Street, Eau Claire, WI 54703	
	Work Phone: 952-239-9866	Cell Phone:
	Email: emi.uelmen@eauclaireremarathon.com	
Please note if new organizer:		

Hold Harmless and Payment Agreements

- The applicant agrees to hold harmless, indemnify and defend, at no cost to the City, the City of Eau Claire, its employees, agents, representatives and elected city officials, for any and all claims, demands, suits, losses, costs, expenses (including attorney fees), or any other type of damages, that result from the Special Event. Applicant is responsible for any and all losses or claims that are in any way connected to their Special Event.
- The applicant agrees to be billed for any City services at the conclusion of their event. Events cancelled with less than 36 hours' notice may be responsible for the cost of planned services.

I also certify by my signature below that I am a duly qualified representative of my organization and authorized to sign this agreement.

Authorized Applicant Signature: Emi Uelmen Date: 8/27/2024

Event Infrastructure

Check ALL items that apply to your event. All relevant items must be checked for appropriate approvals.

*Some items require additional forms; see the last page of the application for details.

ADMINISTRATIVE APPROVAL

- 100 or more persons are expected in a single day
- Entry fee or admission is charged
- Donations are accepted
- Merchandise or other items will be sold
- Fireworks, fires or other hazardous activities will be provided
- Overnight Camping
- Drones will be used at the event (Ordinance 9.76.110-B.2.)*
- Requesting the use of a boat with a motor on Half Moon Lake during the event
- Putting up tents/inflatables that require stakes to be driven into the ground
- Putting up tents larger than 250 square feet*
- Eau Claire River Lights sponsorship consideration*
- Food/concessions will be served OR sold*
- Selling or distributing 2+ kegs/half barrels of fermented malt beverage or wine*

CITY COUNCIL

- 1,000 or more persons are expected at the event
- Selling or distributing 6+ kegs/half barrels of fermented malt beverage or wine*
- Alcohol will be served past sunset or 8:00 pm in the evening, whichever is later
- Alcohol will be served on the streets, sidewalks, alleys or boulevards
- The event will close city streets, alley, sidewalk or boulevard
- The event will require the alteration of park operational hours (Every day, 4am-11pm)

Event Schedule Worksheet

Include set-up times, event times, race times, food service times, alcoholic beverage service times, firework times, amplified music times, clean-up times, etc. Attach additional sheet, if necessary.

Activity	Location	Date	Start Time	End Time
Set Up	Phoenix Park Pavillion	10/25/2024	4:00 p.m.	5:00 p.m.
Packt Pick Up	Phoenix Park Pavillion	10/25/2024	5:00 p.m.	6:00 p.m.
5K Race	Chippewa River State Trail	10/25/2024	6:30 p.m.	7:30 p.m.
Clean Up		10/25/2024	7:30 p.m.	8:00 p.m.

Event/Services Requested

If you need services or items from the City of Eau Claire for your special event, fill out the form below. Contact Community Services for fee information. This is NOT a comprehensive list of services that may be required for your event. (Item totals may be adjusted for safety reasons by City staff)

Service/Item	# of Items Requested
Police Department Services	
Fire Department Services	
<i>Ambulance Services (please specify EC Fire Dept or outside service)</i>	
Event Panels / Fencing (please specify)	
No Parking Signs (must be posted 24 hours before event start, posts not included)	
Barricades (it takes 4 barricades to close down 1 block of city street)	
Traffic Cones	
Extra Garbage/Recycling Bins <i>(please specify)</i>	
Other:	

Emergency Action Plan

ITEMS TO CONSIDER: Designated “lost child” area, evacuation procedure, securing valuables, crowd control, emergency response procedures and contact information, weather conditions, etc.

Describe your first aid and emergency action plans for the event. Will you have first aid kit(s) available, and/or more advanced medical care, including AED and/or medical personnel available for participants and spectators? How will you advise participants and spectators of locations for first aid if needed?

We will have first aid kits available with basic first aid supplies, EMS will be contacted as needed for more advanced medical care

How will you monitor weather during the event? Who will monitor the weather? How will you notify participants and spectators of emergency situations?

National Weather Service: Participants will be informed by PA announcements, Custom text messages through registration and volunteer portal and via social media.

How will you provide access to ambulance and fire trucks for the event in case of medical emergencies?

Ambulance and police will have easy access to race course via public streets. Volunteers will be informed who to contact in event of an emergency.

Emergency Action Plan (continued)

During an emergency, what communication tools will be available at the event and along race routes? If the event extends outside Eau Claire city limits or on UWEC property, what plans do you have in place?

Cell phones, Announcements on PA system, Trained volunteers

Waste Collection/Recycling

Describe the waste disposal and recycling needs/plan for your event.

We plan to use trash receptacles at Phoenix Park, will provide additional receptacles for trash collection near finish line food hand out

What, if any, concessions or food products will be sold OR distributed during the event?

Snacks will be provided for runners as they cross the finish line

What type of products (cups, plates, etc.) will you use during your event?

Recyclable Compostable (biodegradable) Other:

User and Traffic Impact Plan

If the event will impact neighbors and other park users, contact Neighborhood and Business Associations, Chippewa Valley Museum, or Paul Bunyan Camp. How will you notify the affected users of alternate routes and parking options? Include letters of support from associations/businesses affected

Signage will be placed along race course to notify other trail users of event in progress, We will also utilize our social media pages & partner with Visit Eau Claire to inform community members

Describe the traffic and parking control plans for your event. How will you control traffic and parking to keep traffic and pedestrian lanes open?

Participants will be encouraged to use paid parking ramps to limit prolonged on street parking

Yes	No	Will the event offer off-site parking agreements with other parties or shuttle bus services?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	If yes, include information on those agreements.

Yes	No	Will you contract with a private company or organization to provide such services?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	If yes, what company will you use:

Street Closure Worksheet

If you are requesting street closures, complete this worksheet. Attach additional sheet, if necessary.
Please note: Volunteers CANNOT stop traffic; they can only control the pedestrians with your event.

Street Closure (Example: S. Barstow St from Gray St to Lake St)	Time Closing	Time Reopening

Firearms Information

Wisconsin residents have the right to carry a concealed weapon upon issuance of a state permit. City of Eau Claire code section 9.32.040 prohibits firearms on certain City property. Answer the following questions to assist City staff in determining the requirements for your special event.

- Is your event being held at one or more of the following City of Eau Claire buildings, facilities, or locations? (These facilities are permanently posted “Firearms Prohibited”) Check the correct facility:
 - Carson Park Football Stadium, Baseball Stadium, Hobbs Softball Field, or Gelein Softball Field
 - Chippewa Valley Museum OR Paul Bunyan Museum
 - Hobbs Ice Arena
 - Fairfax Pool
 - Neighborhood Shelter – Boyd, Lakeshore, McDonough, North Riverfronts, Pinehurst, Sundet
 - None of the above OR you are using another public space for your event, answer questions below.

- Are you charging admission/taking donations to your event AND having a controlled access area (fencing)?
 - Yes No
 - a. If yes to #2, are you posting your special event “Firearms Prohibited”? Yes No

- Will your event have a Temporary Class B picnic license to serve wine or beer?
 - Yes No
 - a. If yes to #3, will you be posting the enclosed area (i.e., beer garden) where beer or wine is served as “Firearms Prohibited”? Yes No

- If no to #2a OR #3a then you must include a written explanation that details your plan to ensure the health, safety and welfare of those attending the event.

- If no to #3a, “Guns and Alcohol Don’t Mix” signs are required at each public entrance to the licensed area.

OFFICE USE ONLY

- | | |
|--|---|
| <input type="checkbox"/> No City Requirements | <input type="checkbox"/> Safety Plan required |
| <input type="checkbox"/> Posting “Firearms Prohibited” | <input type="checkbox"/> “Guns and Alcohol Don’t Mix” sign required |

Non-Profit Temporary Food Service Application

Event: Eau Claire Marathon HallEauween 5K

Event Date(s): October 25th Year: 2024 Time: 6:30 p.m.

Location of this Event (Address): 330 Riverfront Terrace, Eau Claire, WI 54703

Reminder that if you are not part of a Licensed Special Event then you must be on Private Property.

Name of Applicant/Organization: Eau Claire Marathon

On Site Operator Name/Contact: Emi Uelmen

Mailing Address: 320 Putnam Street, Eau Claire, WI 54703

E-mail: emi.uelmen@eauclairemarathon.com Phone#: 952-329-9866

Is this organization a religious, fraternal, youth, patriotic, service, or civic group (non-profit)?

Yes _____ or No X

If the answer to the previous question is yes, then has this group served food to the public during the past 12 months?

Yes _____, how many days? _____

No _____

Menu: Please list the foods that will be served and equipment used:

Water, Banana, NutriGrain Bar

Where will foods be prepared? **No home prepared foods allowed!**

All items will be pre-packaged by manufacturer

Type of structure that will be used for food service (i.e., inside building, pop wagon, tent, a mobile unit).

Tables along finish line chute with volunteers handing out pre-packaged food

Department Use:

Temporary restaurant license required? Yes _____ or No _____

Discussed requirements with the Health Department: _____

Date: _____

R.S.

Signature




THE EC MARATHON

HOLL-EAU-WON 5K

START

FINISH

KEY

-  MILE MARKER
-  WATER/GATORADE
-  FIRST AID





CITY OF EAU CLAIRE
2024 SPECIAL EVENT APPLICATION

Community Services
 910 Forest Street
 Eau Claire, WI 54703
 715-839-8883

Summary of Event

New Event Repeat Event Repeat Event with changes (Explain changes in the description below)

EVENT NAME

Event Name: Chippewa Valley Skelebrations

Event Date(s): 10/19/24

Name of Sponsoring Organization: Chippewa Valley Museums

Non-Profit Group For Profit Other, please describe:

EVENT DETAILS

Event description, including changes (attach additional sheet, if necessary):
 See attached

Estimated **Daily** Attendance: 250

Estimated **Total** Attendance: 250

Donations, charges or entry fees: \$5 kids, \$10 per adult, \$30 family (3-6pm), \$20 per adult (7-9pm)

Location(s) of Event: 1204 E Half Moon Dr. Eau Claire WI

Time Set Up Begins: 10:00am

Time Event Begins: 3:00pm

Time Event Ends: 9:00pm

Time Clean-up Ends: 10:00pm

CONTACT DETAILS

Organizer Name: Dustyn Dubuque

Address: 1204 E Half Moon Dr. Eau Claire, WI

Work Phone: 715-598-2663

Cell Phone: 7155051735

Email: d.dubuque@cvmuseum.com

Please note if new organizer:

Hold Harmless and Payment Agreements

The applicant agrees to hold harmless, indemnify and defend, at no cost to the City, the City of Eau Claire, its employees, agents, representatives and elected city officials, for any and all claims, demands, suits, losses, costs, expenses (including attorney fees), or any other type of damages, that result from the Special Event. Applicant is responsible for any and all losses or claims that are in any way connected to their Special Event.

The applicant agrees to be billed for any City services at the conclusion of their event. Events cancelled with less than 36 hours' notice may be responsible for the cost of planned services.

I also certify by my signature below that I am a duly qualified representative of my organization and authorized to sign this agreement.

Authorized Applicant Signature: _____

Date: 8/26/24

Event Infrastructure

Check ALL items that apply to your event. All relevant items must be checked for appropriate approvals.
 *Some items require additional forms; see the last page of the application for details.

ADMINISTRATIVE APPROVAL

- 100 or more persons are expected in a single day
- Entry fee or admission is charged
- Donations are accepted
- Merchandise or other items will be sold
- Fireworks, fires or other hazardous activities will be provided
- Overnight Camping
- Drones will be used at the event (Ordinance 9.76.110-B.2.)*
- Requesting the use of a boat with a motor on Half Moon Lake during the event
- Putting up tents/inflatables that require stakes to be driven into the ground
- Putting up tents larger than 250 square feet*
- Eau Claire River Lights sponsorship consideration*
- Food/concessions will be served OR sold*
- Selling or distributing 2+ kegs/half barrels of fermented malt beverage or wine*

CITY COUNCIL

- 1,000 or more persons are expected at the event
- Selling or distributing 6+ kegs/half barrels of fermented malt beverage or wine*
- Alcohol will be served past sunset or 8:00 pm in the evening, whichever is later
- Alcohol will be served on the streets, sidewalks, alleys or boulevards
- The event will close city streets, alley, sidewalk or boulevard
- The event will require the alteration of park operational hours (Every day, 4am-11pm)

Event Schedule Worksheet

Include set-up times, event times, race times, food service times, alcoholic beverage service times, firework times, amplified music times, clean-up times, etc. Attach additional sheet, if necessary.

Activity	Location	Date	Start Time	End Time
Set Up	Chippewa Valley Museum	10/19/24	10:00	3:00pm
Clean Up	" "	" "	9:00pm	10:00pm

Event/Services Requested

If you need services or items from the City of Eau Claire for your special event, fill out the form below. Contact Community Services for fee information. This is NOT a comprehensive list of services that may be required for your event. (Item totals may be adjusted for safety reasons by City staff)

Service/Item	# of Items Requested
Police Department Services	
Fire Department Services	
Ambulance Services (please specify EC Fire Dept or outside service)	
Event Panels / Fencing (please specify)	
No Parking Signs (must be posted 24 hours before event start, posts not included)	
Barricades (it takes 4 barricades to close down 1 block of city street)	
Traffic Cones	
Extra Garbage/Recycling Bins (please specify)	
Other:	

Emergency Action Plan

ITEMS TO CONSIDER: Designated "lost child" area, evacuation procedure, securing valuables, crowd control, emergency response procedures and contact information, weather conditions, etc.

Describe your first aid and emergency action plans for the event. Will you have first aid kit(s) available, and/or more advanced medical care, including AED and/or medical personnel available for participants and spectators? How will you advise participants and spectators of locations for first aid if needed?

Chippewa Valley Museums is equipped with multiple first aid kits, action plans and medical care for attendees to all events. Items are labeled throughout the facility.

How will you monitor weather during the event? Who will monitor the weather? How will you notify participants and spectators of emergency situations?

Monitoring the weather will be done by event organizers via local news stations. Event organizers will move all exterior aspects of event inside the museum if need be.

How will you provide access to ambulance and fire trucks for the event in case of medical emergencies?

All access as normal in the park and facilities.

Emergency Action Plan (continued)

During an emergency, what communication tools will be available at the event and along race routes? If the event extends outside Eau Claire city limits or on UWEC property, what plans do you have in place?

n/a

Waste Collection/Recycling

Describe the waste disposal and recycling needs/plan for your event.

n/a

What, if any, concessions or food products will be sold OR distributed during the event?

Our Ice Cream Parlor will be open and selling the usual goods which include ice cream, soda and pre packaged snacks. If approved, we will sell beer & wine out of the parlor.

What type of products (cups, plates, etc.) will you use during your event?

Recyclable Compostable (biodegradable) Other:

User and Traffic Impact Plan

If the event will impact neighbors and other park users, contact Neighborhood and Business Associations, Chippewa Valley Museum, or Paul Bunyan Camp. How will you notify the affected users of alternate routes and parking options? Include letters of support from associations/businesses affected

Describe the traffic and parking control plans for your event. How will you control traffic and parking to keep traffic and pedestrian lanes open?

Plenty of parking at the museums

Yes	No	Will the event offer off-site parking agreements with other parties or shuttle bus services?
<input type="checkbox"/>	<input type="checkbox"/>	If yes, include information on those agreements.

Yes	No	Will you contract with a private company or organization to provide such services?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	If yes, what company will you use:

Street Closure Worksheet

If you are requesting street closures, complete this worksheet. Attach additional sheet, if necessary.
Please note: Volunteers CANNOT stop traffic; they can only control the pedestrians with your event.

Street Closure (Example: S. Barstow St from Gray St to Lake St)	Time Closing	Time Reopening

Firearms Information

Wisconsin residents have the right to carry a concealed weapon upon issuance of a state permit. City of Eau Claire code section 9.32.040 prohibits firearms on certain City property. Answer the following questions to assist City staff in determining the requirements for your special event.

- Is your event being held at one or more of the following City of Eau Claire buildings, facilities, or locations? (These facilities are permanently posted "Firearms Prohibited") Check the correct facility:
 - Carson Park Football Stadium, Baseball Stadium, Hobbs Softball Field, or Gelein Softball Field
 - Chippewa Valley Museum OR Paul Bunyan Museum
 - Hobbs Ice Arena
 - Fairfax Pool
 - Neighborhood Shelter – Boyd, Lakeshore, McDonough, North Riverfronts, Pinehurst, Sundet
 - None of the above OR you are using another public space for your event, answer questions below.

- Are you charging admission/taking donations to your event AND having a controlled access area (fencing)?
 - Yes No
 - a. If yes to #2, are you posting your special event "Firearms Prohibited"? Yes No

- Will your event have a Temporary Class B picnic license to serve wine or beer?
 - Yes No
 - a. If yes to #3, will you be posting the enclosed area (i.e., beer garden) where beer or wine is served as "Firearms Prohibited"? Yes No

- If no to #2a OR #3a then you must include a written explanation that details your plan to ensure the health, safety and welfare of those attending the event.

- If no to #3a, "Guns and Alcohol Don't Mix" signs are required at each public entrance to the licensed area.

OFFICE USE ONLY

- | | |
|---|---|
| <input type="checkbox"/> No City Requirements | <input type="checkbox"/> Safety Plan required |
| <input checked="" type="checkbox"/> Posting "Firearms Prohibited" | <input type="checkbox"/> "Guns and Alcohol Don't Mix" sign required |

CVM Skelebration in Carson Park

In partnership with the Chippewa Valley Theater Guild

Boo Bash

3:00-6:00 pm

This new Halloween-themed event features ticketed live theater performances, a flashlight scavenger hunt, craft-making stations, outdoor mini bonfires and s'mores (weather-permitting), and specialty treats in the ice cream parlor.

Visitors will be sent on a fun-filled adventure along a luminary-lit trail to enjoy Tall Tales stories portrayed by costumed actors performing at three separate stages (the Cook Shanty Bunk House, Anderson Log House, and Sunnyview School).

Before or after these timed adventures, attendees are invited to explore the museum campus to play in our newly remodeled Tall Tales room, view vintage spooky and silly movie clips in the Dale Syth room, or check-out a City Bonfire and s'more kit to roast their own marshmallows.

Attendees may also wander to our main building where even more excitement awaits! The Rural Heritage gallery (home to our Farm Life exhibit) will be plunged into darkness for an unforgettable scavenger hunt experience. Scavenger hunters will be supplied clue cards, flashlights, and the assistance of guides to offer hints as they complete their answer sheets for small prizes.

The museum's auditorium will be filled with delightful craft-making and games stations. Families can create silhouette and shadow projects, play guessing games, make slime, and more. Museum volunteers will be on hand to help supervise these activities.

Don't forget to stop in our I Scream Parlor while you're here for some specialty treats. Order a one-eyed monster sundae, a Witch's Hat cone, or a Tombstone dirt dish novelty. These and other tasty menu items will be available for a limited time only.

Chills After Dark

7:00-9:00 pm

Similar attractions and activities as the "Boo-Bash" but geared towards adults. A Haunted Hallway will be added inside one of the logging museum buildings. More "adult" themed horror films will be shown, activities will be adjusted and curiosities from the collection will be on display for this event only. Beer and wine will be available for purchase.

License(s) Requested	Fees	
	<input checked="" type="checkbox"/> Temporary "Class B" Wine <input checked="" type="checkbox"/> Temporary Class "B" Beer	License Fees
	Background Check	\$
	Total Fees	\$ 10.00

Part A: Organization Information

1. Organization Name
Chippewa Valley Museum

2. Organization Permanent Address
1204 E Hill Moon Dr

3. City
Eau Claire

4. State
WI

5. Zip Code
54703

6. Mailing Address (if different from permanent address)

7. FEIN
39-0092129

8. Date of Organization/Incorporation
1952

9. State of Organization/Incorporation
WI

10. Phone
715-834-7871

11. Email
d.deboye@cvmuseum.com

12. Organization type (check one)

Bona Fide Club Church Fair Association/Agricultural Society Veteran's Organization
 Lodge/Society Chamber of Commerce or similar Civic or Trade Organization under ch. 181, Wis. Stats.

13. Is this organization required to hold a Wisconsin Seller's permit? Yes No

14. Wisconsin Seller's Permit Number (if applicable)

Part B: Individual Information

List the name, title, and phone number for all officers, directors, and agent of the organization. **Include an Individual Questionnaire (Form AB-100) for each person listed below.** Attach additional sheets if necessary.

Corporations must also include Alcohol Beverage Appointment of Agent (Form AB-101).

Last Name	First Name	Title	Phone
Romander	Carrie	Executive Director	715-834-7871
Pederson	Melissa	President	715-895-6123
Meyer	Rachel	Vice President	715-587-6407
Back-Hansen	Samuel	Treasurer	715-896-4864

Continued →

Part C: Event Information

1. Name of Event (if applicable)

Chippewa Valley Celebration

2. Dates of Operation

10/18/2011

3. Hours of Operation

3:00pm - 9:00pm

4. Premises Address

1704 East Hill Moon Dr.

5. City

Eau Claire

6. State

WI

7. Zip Code

54703

8. County

Eau Claire

9. Governing Municipality

 City Town Village

of:

10. Aldermanic District

11. Organizer of Event (if not the named applicant)

Chippewa Valley Museums

12. Email and/or Phone Number for Organizer of Event

715-505-1735

13. Organizer Website

CVMUSEUM.COM

14. Event Website

15. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages and records are sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.

Alcohol will be served inside Chippewa Valley Museum main building.
~~None~~ No alcohol outside of building. Signs will be up.

Part D: Attestation

Who must sign this application?

- one officer or director of the nonprofit organization

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant organization and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate according to the law, including but not limited to, purchasing alcohol beverages from Wisconsin-permitted wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Last Name

Ronnander

First Name

Carrie

M.I.

M

Title

Exec. Director

Email

C.ronnander@CVMUSEUM.COM

Phone

715-834-7871

Signature

Carrie Ronnander

Date

Part E: For Clerk Use Only

Date Application Was Filed With Clerk

License Number

Date License Granted

Date License Issued

Signature of Clerk/Deputy Clerk

All individuals involved in the alcohol beverage business must complete this form, including:

- sole proprietor
- all partners of a partnership
- all officers, directors, and agent of a corporation or nonprofit organization
- members and agent of a limited liability company

Your alcohol beverage application or renewal is not complete until all required Individual Questionnaires are submitted.

Part A: Business Information

1. Legal Business Name (individual name if sole proprietor)
~~Chippewa Valley Museum~~ Eau Claire Association of Museums

2. Business Trade Name or DBA
Chippewa Valley Museum

3. Entity Type (check one)
 Sole Proprietor
 Partnership
 Limited Liability Company
 Corporation
 Nonprofit Organization

Part B: Individual Information

1. Last Name: Ronander 2. First Name: Carrie 3. M.I.: M

4. Relationship to Business (Title): Executive Director 5. Email: C.ronander@~~cv~~cvmuseum.wi 6. Phone: 715-834-7871

7. Home Address: 1021 East Grand Ave

8. City: Eau Claire 9. State: WI 10. Zip Code: 54701 11. Date of Birth: 11-14-1970

12. Drivers License/State ID Number: R553-1137-0914-01 13. Drivers License/State ID State of Issuance: WI

Part C: Address History

1. Do you currently reside in Wisconsin? Yes No

If yes to 1 above, how long have you continuously lived in Wisconsin prior to the date of application?

Years	Months
23	9

2. List in chronological order all of your addresses within the last 5 years. Attach additional sheets if necessary.

Previous Address	City	State	Zip Code
1021 East Grand Ave.	Eau Claire	WI	54701
Previous Address 2	City	State	Zip Code
Previous Address 3	City	State	Zip Code
Previous Address 4	City	State	Zip Code
Previous Address 5	City	State	Zip Code

3. List all states and counties you have lived in as an adult. Attach additional sheets if necessary.

State	County	State	County	State	County	State	County
WI	Milwaukee	WI	Eau Claire				
MN	Ramsey						

Continued →

Part D: Criminal History

1. Have you ever been convicted of any offenses (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or of any county or municipal ordinances? Yes No
 If yes to question 1, please list details of each conviction below. Attach additional sheets as needed.

Law/Ordinance Violated	Location	Conviction Date
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Law/Ordinance Violated	Location	Conviction Date
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Law/Ordinance Violated	Location	Conviction Date
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No

2. Are charges for any offenses currently pending against you (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or any county or municipal ordinances? Yes No
 If yes to question 2, describe nature and status of pending charges using the space below. Attach additional sheets as needed.

Part E: Attestation

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I certify that I am not prohibited from participating in this business due to any involvement in another tier of the alcohol beverage industry as a restricted investor. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Signature

Carrie Burt

Date

07-09-2004

All individuals involved in the alcohol beverage business must complete this form, including:

- sole proprietor
- all partners of a partnership
- all officers, directors, and agent of a corporation or nonprofit organization
- members and agent of a limited liability company

Your alcohol beverage application or renewal is not complete until all required Individual Questionnaires are submitted.

Part A: Business Information

1. Legal Business Name (individual name if sole proprietor)

Eau Claire Association of Museums

2. Business Trade Name or DBA

Chippewa Valley Museum

3. Entity Type (check one)

- Sole Proprietor
 Partnership
 Limited Liability Company
 Corporation
 Nonprofit Organization

Part B: Individual Information

1. Last Name

Peterson

2. First Name

Melissa

3. M.I.

L

4. Relationship to Business (Title)

Board officer

5. Email

mpeterson@frandsenbank.com

6. Phone

715-895-6133

7. Home Address

9106 Olson Dr

8. City

Eau Claire

9. State

WI

10. Zip Code

54703

11. Date of Birth

06/30/1975

12. Drivers License/State ID Number

P3625527573006

13. Drivers License/State ID State of Issuance

WI

Part C: Address History

1. Do you currently reside in Wisconsin?

Yes No

If yes to 1 above, how long have you continuously lived in Wisconsin prior to the date of application?

Years	Months
4	7

2. List in chronological order all of your addresses within the last 5 years. Attach additional sheets if necessary.

Previous Address	City	State	Zip Code
<u>27315 Sandra K Rd</u>	<u>Detroit Lakes</u>	<u>MN</u>	<u>56501</u>
Previous Address 2	City	State	Zip Code
Previous Address 3	City	State	Zip Code
Previous Address 4	City	State	Zip Code
Previous Address 5	City	State	Zip Code

3. List all states and counties you have lived in as an adult. Attach additional sheets if necessary.

State	County	State	County	State	County	State	County
<u>MN</u>	<u>Wilkin</u>	<u>MN</u>	<u>Becker</u>	<u>WI</u>	<u>Eau Claire</u>		
<u>MN</u>	<u>Otter Tail</u>	<u>AZ</u>	<u>Maricopa</u>				

Continued →

Part D: Criminal History

1. Have you ever been convicted of any offenses (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or of any county or municipal ordinances? Yes No

If yes to question 1, please list details of each conviction below. Attach additional sheets as needed.

Law/Ordinance Violated	Location	Conviction Date
Penalty Imposed		
Law/Ordinance Violated	Location	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Penalty Imposed		Conviction Date
Law/Ordinance Violated	Location	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Penalty Imposed		Conviction Date
Law/Ordinance Violated	Location	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Penalty Imposed		Conviction Date

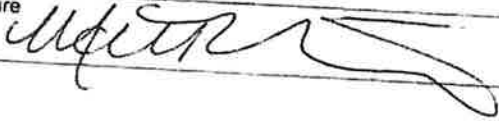
2. Are charges for any offenses currently pending against you (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or any county or municipal ordinances? Yes No

If yes to question 2, describe nature and status of pending charges using the space below. Attach additional sheets as needed.

Part E: Attestation

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I certify that I am not prohibited from participating in this business due to any involvement in another tier of the alcohol beverage industry as a restricted investor. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Signature



Date

07/10/2024

All individuals involved in the alcohol beverage business must complete this form, including:

- sole proprietor
- all partners of a partnership
- all officers, directors, and agent of a corporation or nonprofit organization
- members and agent of a limited liability company

Your alcohol beverage application or renewal is not complete until all required Individual Questionnaires are submitted.

Part A: Business Information

1. Legal Business Name (individual name if sole proprietor)
Eau Claire Association of Museums

2. Business Trade Name or DBA
Chippewa Valley Museums

3. Entity Type (check one)
 Sole Proprietor
 Partnership
 Limited Liability Company
 Corporation
 Nonprofit Organization

Part B: Individual Information

1. Last Name: Bach-Hanson

2. First Name: Samuel

3. M.I.: D

4. Relationship to Business (Title): Board Treasurer

5. Email: sbachh@weldriley.com

6. Phone: 715 896 4864

7. Home Address: 777 Indian Hills Dr.

8. City: Eau Claire

9. State: WI

10. Zip Code: 54703

11. Date of Birth: 03/09/93

12. Drivers License/State ID Number: B252-07849-3089-09

13. Drivers License/State ID State of Issuance: WISCONSIN

Part C: Address History

1. Do you currently reside in Wisconsin? Yes No

If yes to 1 above, how long have you continuously lived in Wisconsin prior to the date of application?

Years	Months
8	2

2. List in chronological order all of your addresses within the last 5 years. Attach additional sheets if necessary.

Previous Address	City	State	Zip Code
1893 Whistling Straits Dr.	Altoona	WI	54720
504 Alder Street	Black River Falls	WI	54615
Previous Address 3	City	State	Zip Code
Previous Address 4	City	State	Zip Code
Previous Address 5	City	State	Zip Code

3. List all states and counties you have lived in as an adult. Attach additional sheets if necessary.

State	County	State	County	State	County	State	County
WI	Millwaukee	WI	Eau Claire	MN	Winona		
WI	Jackson	WI	Dane	DC	District of Columbia		

Continued →

Part D: Criminal History

1. Have you ever been convicted of any offenses (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or of any county or municipal ordinances? Yes No
If yes to question 1, please list details of each conviction below. Attach additional sheets as needed.

Law/Ordinance Violated	Location	Conviction Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Law/Ordinance Violated	Location	Conviction Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Law/Ordinance Violated	Location	Conviction Date
Penalty Imposed	Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Are charges for any offenses currently pending against you (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or any county or municipal ordinances? Yes No
If yes to question 2, describe nature and status of pending charges using the space below. Attach additional sheets as needed.

Part E: Attestation

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I certify that I am not prohibited from participating in this business due to any involvement in another tier of the alcohol beverage industry as a restricted investor. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Signature 	Date 7/19/24
---	--------------

Form 48-499 Alcohol Beverage Individual Questionnaire

Section 1: Personal Information

Name: Michael Date of Birth: 1/20/1960 Sex: M

Address: 1000 1st St City: San Francisco State: CA Zip: 94104

Section 2: Business Information

Business Name: Michael's Type: Retail

Section 3: License Information

License Number: 1000 Issue Date: 1/20/1960 Expiration Date: 1/20/2010

Section 4: Compliance

Section 5: Signature

Signature: [Signature] Date: 1/20/1960

Section 6: Declaration

I hereby declare that the information provided on this questionnaire is true and correct to the best of my knowledge and belief.

Signature: [Signature] Date: 1/20/1960

Section 7: Additional Information

Section 8: Contact Information

Phone: [Number] Email: [Address]

Section 9: Notes

Section 10: Footer

© 1/20/2010



CITY OF EAU CLAIRE

2024 SPECIAL EVENT APPLICATION

Community Services
910 Forest Street
Eau Claire, WI 54703
715-839-8883

Summary of Event

EVENT NAME	<input type="checkbox"/> New Event <input checked="" type="checkbox"/> Repeat Event <input type="checkbox"/> Repeat Event with changes (Explain changes in the description below)	
	Event Name: 2024 Fall Festival	
	Event Date(s): Saturday, September 14th	
	Name of Sponsoring Organization: Downtown Eau Claire, Inc.	
EVENT DETAILS	<input checked="" type="checkbox"/> Non-Profit Group <input type="checkbox"/> For Profit <input type="checkbox"/> Other, please describe: non-profit tax id: 03-0376253	
	Event description, including changes (attach additional sheet, if necessary): Fall Festival is a street festival held on South Barstow Street. The event includes exhibitors, craft vendors, food vendors, performances, and experience zones, We are planning a performance by the Blugold Marching Band. DECI is planning to partner with South Barstow and Downtown business / organizations to create "experience zones" on each 1/2 block off of Barstow Street.F	
	Estimated Daily Attendance: 3500	Estimated Total Attendance: 3500
	Donations, charges or entry fees: free to attend, vendor fees range from \$0 - \$250	
	Location(s) of Event: South Barstow District - South Barstow Street from Eau Claire Street to Lake Street	
	Time Set Up Begins: 4 pm on 9/13	Time Event Begins: 10 am on 9/14
Time Event Ends: 4 pm on 9/14	Time Clean-up Ends: 6 pm on 9/14	
CONTACT DETAILS	Organizer Name: Downtown Eau Claire, Inc.	
	Address: 203 S Farwell Street, Eau Claire Wi 54701	
	Work Phone: 715-839-8063	Cell Phone: 715-579-2885
	Email: erin.klaus@eauclairewi.gov	
	Please note if new organizer: Erin Klaus	

Hold Harmless and Payment Agreements

- The applicant agrees to hold harmless, indemnify and defend, at no cost to the City, the City of Eau Claire, its employees, agents, representatives and elected city officials, for any and all claims, demands, suits, losses, costs, expenses (including attorney fees), or any other type of damages, that result from the Special Event. Applicant is responsible for any and all losses or claims that are in any way connected to their Special Event.
- The applicant agrees to be billed for any City services at the conclusion of their event. Events cancelled with less than 36 hours' notice may be responsible for the cost of planned services.

I also certify by my signature below that I am a duly qualified representative of my organization and authorized to sign this agreement.

Authorized Applicant Signature: Erin Klaus Date: 5/31/2024

Event Infrastructure

Check ALL items that apply to your event. All relevant items must be checked for appropriate approvals.

*Some items require additional forms; see the last page of the application for details.

ADMINISTRATIVE APPROVAL

- 100 or more persons are expected in a single day
- Entry fee or admission is charged
- Donations are accepted
- Merchandise or other items will be sold
- Fireworks, fires or other hazardous activities will be provided
- Overnight Camping
- Drones will be used at the event (Ordinance 9.76.110-B.2.)*
- Requesting the use of a boat with a motor on Half Moon Lake during the event
- Putting up tents/inflatables that require stakes to be driven into the ground
- Putting up tents larger than 250 square feet*
- Eau Claire River Lights sponsorship consideration*
- Food/concessions will be served OR sold*
- Selling or distributing 2+ kegs/half barrels of fermented malt beverage or wine*

CITY COUNCIL

- 1,000 or more persons are expected at the event
- Selling or distributing 6+ kegs/half barrels of fermented malt beverage or wine*
- Alcohol will be served past sunset or 8:00 pm in the evening, whichever is later
- Alcohol will be served on the streets, sidewalks, alleys or boulevards
- The event will close city streets, alley, sidewalk or boulevard
- The event will require the alteration of park operational hours (Every day, 4am-11pm)

Event Schedule Worksheet

Include set-up times, event times, race times, food service times, alcoholic beverage service times, firework times, amplified music times, clean-up times, etc. Attach additional sheet, if necessary.

Activity	Location	Date	Start Time	End Time
Set Up	Four Corners Lot	9/13/2024	3 pm	8 pm
Set Up (Day of)	South Barstow Street	9/14/2024	5 am	10 am
Vendors Arrive	South Barstow Street	9/14/2024	8 am	9 am
Event Begins	South Barstow Street	9/14/2024	10 am	4 pm
Event Concludes	South Barstow Street	9/14/2024	4 pm	
Clean Up	South Barstow Street	9/14/2024	4 pm	6 pm

Event/Services Requested

If you need services or items from the City of Eau Claire for your special event, fill out the form below. Contact Community Services for fee information. This is NOT a comprehensive list of services that may be required for your event. (Item totals may be adjusted for safety reasons by City staff)

Service/Item	# of Items Requested
Police Department Services	36
Fire Department Services	
<i>Ambulance Services (please specify EC Fire Dept or outside service)</i>	
Event Panels / Fencing (please specify)	
No Parking Signs (must be posted 24 hours before event start, posts not included)	we have them
Barricades (it takes 4 barricades to close down 1 block of city street)	
Traffic Cones	25
Extra Garbage/Recycling Bins <i>(please specify)</i>	10 of each
Other:	

Emergency Action Plan

ITEMS TO CONSIDER: Designated “lost child” area, evacuation procedure, securing valuables, crowd control, emergency response procedures and contact information, weather conditions, etc.

Describe your first aid and emergency action plans for the event. Will you have first aid kit(s) available, and/or more advanced medical care, including AED and/or medical personnel available for participants and spectators? How will you advise participants and spectators of locations for first aid if needed?

A basic first aid kit will be on hand at the registration table for the event. DECI Staff will call emergency services if a more advanced medical emergency arises. Staff and volunteers can make any emergency announcements as needed.

How will you monitor weather during the event? Who will monitor the weather? How will you notify participants and spectators of emergency situations?

Staff will monitor the weather using mobile phones. Emergency situations will be communicated using our PA System.

How will you provide access to ambulance and fire trucks for the event in case of medical emergencies?

Emergency vehicles will be able to access South Barstow Street as needed. Event staff will assist the crowd control as needed.

Emergency Action Plan (continued)

During an emergency, what communication tools will be available at the event and along race routes? If the event extends outside Eau Claire city limits or on UWEC property, what plans do you have in place?

Event staff will communicate by phone and text during the event. PAs will be available at a few locations

Waste Collection/Recycling

Describe the waste disposal and recycling needs/plan for your event.

We will work in coordination with Parks to provide trash receptacles for the event. Event staff and volunteers will monitor and empty receptacles in a central location as needed. We ask that garbage cans be delivered to the Four Corners Lot and lined up along the conference halls, volunteers will distribute and collect cans for the event, garbage can be picked up after the event from the same location.

What, if any, concessions or food products will be sold OR distributed during the event?

Food vendors from the region will be invited to participate in the event. DECI will coordinate with the Health Department to ensure all have a license to operate in the city. A list of vendors will be provided to the Health Department.

What type of products (cups, plates, etc.) will you use during your event?

Recyclable

Compostable (biodegradable)

Other:

disposable food containers

User and Traffic Impact Plan

If the event will impact neighbors and other park users, contact Neighborhood and Business Associations, Chippewa Valley Museum, or Paul Bunyan Camp. How will you notify the affected users of alternate routes and parking options? Include letters of support from associations/businesses affected

The date has been shared with the South Barstow BID and downtown businesses. DECI staff has send out informational emails to businesses as well as will host event information ont their website. Physical flyers will be distributed to businesses. Street closures will also benoted on our website and social media.

Describe the traffic and parking control plans for your event. How will you control traffic and parking to keep traffic and pedestrian lanes open?

South Barstow St. will be closed from Eau Claire Street to Lake St. Side streets will also be closed between Graham Ave and Farwell St. Patrons will be directed to park in the N & S Barstow Parking Ramp, as well as on city streets and municipal lots. DECI is also considering contracting a shuttle service to bring patrons in from surrounding parking lots to hopefully mitigate some parking congestion

Yes No Will the event offer off-site parking agreements with other parties or shuttle bus services?
If yes, include information on those agreements.

Yes No Will you contract with a private company or organization to provide such services?
If yes, what company will you use:

We are considering workingg with Right Way Shuttles to provide a shuttle service from either the University's Water Street lot and/or the County parking lot in the West Grand District.

We have rented the Chippewa River Trolley and will have a shuttle running from Carson Park Downtown.

Street Closure Worksheet

If you are requesting street closures, complete this worksheet. Attach additional sheet, if necessary.
Please note: Volunteers CANNOT stop traffic; they can only control the pedestrians with your event.

Street Closure (Example: S. Barstow St from Gray St to Lake St)	Time Closing	Time Reopening
South Barstow Street (EC to Lake Street)	5 am	6 pm
Gibson, East Grand, Main and Grey (Farwell to Graham)	5 am	6 pm
Four Corners Lot	4 pm (9/13)	6 pm (9/14)

Firearms Information

Wisconsin residents have the right to carry a concealed weapon upon issuance of a state permit. City of Eau Claire code section 9.32.040 prohibits firearms on certain City property. Answer the following questions to assist City staff in determining the requirements for your special event.

- Is your event being held at one or more of the following City of Eau Claire buildings, facilities, or locations? (These facilities are permanently posted "Firearms Prohibited") Check the correct facility:
 - Carson Park Football Stadium, Baseball Stadium, Hobbs Softball Field, or Gelein Softball Field
 - Chippewa Valley Museum OR Paul Bunyan Museum
 - Hobbs Ice Arena
 - Fairfax Pool
 - Neighborhood Shelter – Boyd, Lakeshore, McDonough, North Riverfronts, Pinehurst, Sundet
 - None of the above OR you are using another public space for your event, answer questions below.

- Are you charging admission/taking donations to your event AND having a controlled access area (fencing)?
 - Yes No
 - a. If yes to #2, are you posting your special event "Firearms Prohibited"? Yes No

- Will your event have a Temporary Class B picnic license to serve wine or beer?
 - Yes No
 - a. If yes to #3, will you be posting the enclosed area (i.e., beer garden) where beer or wine is served as "Firearms Prohibited"? Yes No

- If no to #2a OR #3a then you must include a written explanation that details your plan to ensure the health, safety and welfare of those attending the event.

- If no to #3a, "Guns and Alcohol Don't Mix" signs are required at each public entrance to the licensed area.

OFFICE USE ONLY

- No City Requirements
- Posting "Firearms Prohibited"
- Safety Plan required
- "Guns and Alcohol Don't Mix" sign required

Temporary Alcohol Beverage License

Municipality City of Eau Claire


License(s) Requested	Fees	
<input type="checkbox"/> Temporary "Class B" Wine <input checked="" type="checkbox"/> Temporary Class "B" Beer	License Fees	\$ 10.00
	Background Check	\$
	Total Fees	\$ 10.00

Part A: Organization Information		
1. Organization Name Downtown Eau Claire, Inc		
2. Organization Permanent Address 203 S Farwell Street		
3. City Eau Claire	4. State WI	5. Zip Code 54701
6. Mailing Address (if different from permanent address)		
7. FEIN 03-0376253	8. Date of Organization/Incorporation 01/01/202	9. State of Organization/Incorporation WI
10. Phone 715-579-2885	11. Email erin.klaus@eauclairewi.gov	
12. Organization type (check one)		
<input type="checkbox"/> Bona Fide Club <input type="checkbox"/> Church <input type="checkbox"/> Fair Association/Agricultural Society <input type="checkbox"/> Veteran's Organization <input type="checkbox"/> Lodge/Society <input checked="" type="checkbox"/> Chamber of Commerce or similar Civic or Trade Organization under ch. 181, Wis. Stats.		
13. Is this organization required to hold a Wisconsin Seller's permit? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
14. Wisconsin Seller's Permit Number (if applicable) 456-1027041009-05		

Part B: Individual Information			
List the name, title, and phone number for all officers, directors, and agent of the organization. Include an Individual Questionnaire (Form AB-100) for each person listed below. Attach additional sheets if necessary.			
Corporations must also include Alcohol Beverage Appointment of Agent (Form AB-101).			
Last Name	First Name	Title	Phone
Dill	Mike	President	612-269-0096
White	Nick	Vice-President	715-577-5593
Session	Ann	Secretary	715-864-9376
Maki	Brian	Presidential Appointee	715-828-4667

Continued →

Part C: Event Information			
1. Name of Event (if applicable) DECI's Fall Festival			
2. Dates of Operation Saturday, September 14th		3. Hours of Operation 10 am - 4 pm	
4. Premises Address South Barstow Street and Main Street - 4 Corner's Lot			
5. City Eau Claire		6. State WI	7. Zip Code 54701
8. County Eau Claire	9. Governing Municipality <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village of: Eau Claire		10. Aldermanic District 1
11. Organizer of Event (if not the named applicant) DECI		12. Email and/or Phone Number for Organizer of Event erin.klaus@eauclairewi.gov	
13. Organizer Website www.downtowneauclaire.org		14. Event Website www.downtowneauclaire.org/fallfest	
15. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages and records are sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary. There will be a beer trailer from Lee Beverage with 3 types of beer sold. It will be located on the north side of the parking lot closest to the Lismore. Fencing will be running the perimeter of the parking lot to identify the beer garden area. Volunteers will be checking ids and providing wristbands to those with valid 21+ ids.			

Part D: Attestation			
Who must sign this application? • one officer or director of the nonprofit organization			
READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant organization and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate according to the law, including but not limited to, purchasing alcohol beverages from Wisconsin-permitted wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.			
Last Name Dill	First Name Mike	M.I. A	
Title President of DECI	Email michael.dill@rcu.org	Phone (612) 269-0996	
Signature 		Date 8/19/2024	

Part E: For Clerk Use Only	
Date Application Was Filed With Clerk	License Number
Date License Granted	Date License Issued
Signature of Clerk/Deputy Clerk	

Alcohol Beverage Individual Questionnaire

All individuals involved in the alcohol beverage business must complete this form, including:

- sole proprietor
- all partners of a partnership
- all officers, directors, and agent of a corporation or nonprofit organization
- members and agent of a limited liability company

Your alcohol beverage application or renewal is not complete until all required Individual Questionnaires are submitted.

Part A: Business Information	
1. Legal Business Name (individual name if sole proprietor) Downtown Eau Claire, Inc	
2. Business Trade Name or DBA DECI	
3. Entity Type (<i>check one</i>) <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Nonprofit Organization	

Part B: Individual Information			
1. Last Name Klaus	2. First Name Erin	3. M.I. L	
4. Relationship to Business (Title) Executive Director	5. Email erin.klaus@eauclairewi.gov	6. Phone 715-579-2885	
7. Home Address 1322 Highland Avenue			
8. City Eau Claire	9. State WI	10. Zip Code 54701	11. Date of Birth 10/07/1982
12. Drivers License/State ID Number K420-2128-2867-09		13. Drivers License/State ID State of Issuance Wisconsin	

Part C: Address History					
1. Do you currently reside in Wisconsin? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
If yes to 1 above, how long have you continuously lived in Wisconsin prior to the date of application?			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">Years 41</td> <td style="width: 50%; text-align: center;">Months 9</td> </tr> </table>	Years 41	Months 9
Years 41	Months 9				
2. List in chronological order all of your addresses within the last 5 years. Attach additional sheets if necessary.					
Previous Address 1 1322 Highland Ave	City Eau Claire	State WI	Zip Code 54701		
Previous Address 2 404 W Grant Ave	City Eau Claire	State WI	Zip Code 54701		
Previous Address 3	City	State	Zip Code		
Previous Address 4	City	State	Zip Code		
Previous Address 5	City	State	Zip Code		
3. List all states and counties you have lived in as an adult. Attach additional sheets if necessary.					
State WI	County Eau Claire	State	County		
State WI	County Milwaukee	State	County		

Continued →

Part D: Criminal History

1. Have you ever been convicted of any offenses (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or of any county or municipal ordinances? Yes No
 If yes to question 1, please list details of each conviction below. Attach additional sheets as needed.

Law/Ordinance Violated	Location	Conviction Date
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Law/Ordinance Violated	Location	Conviction Date
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Law/Ordinance Violated	Location	Conviction Date
Penalty Imposed		Was sentence completed? <input type="checkbox"/> Yes <input type="checkbox"/> No

2. Are charges for any offenses currently pending against you (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or any county or municipal ordinances? Yes No
 If yes to question 2, describe nature and status of pending charges using the space below. Attach additional sheets as needed.

Part E: Attestation

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I certify that I am not prohibited from participating in this business due to any involvement in another tier of the alcohol beverage industry as a restricted investor. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Signature <i>Erin Klaus</i>	Date 8/19/2024
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DECI
DOWNTOWN EAU CLAIRE INC.
PRESENTS



**FOUR CORNERS
BEER GARDEN + MUSIC**

S. BARSTOW ST.

GRAND AVE.





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/01/2024

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.

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).

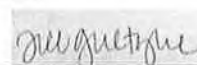
PRODUCER West Bend Mutual Insurance Company 1900 South 18th Avenue West Bend WI 53095	CONTACT NAME: Customer Care PHONE (A/C, No, Ext): (866) 926-4244 E-MAIL ADDRESS: customercare@wbmi.com	FAX (A/C, No): (262) 365-2200
	INSURER(S) AFFORDING COVERAGE	
	INSURER A : West Bend Mutual Insurance Company	NAIC # 15350
INSURED Downtown Eau Claire, Inc PO Box 5148 Eau Claire WI 54702	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES **CERTIFICATE NUMBER:** CL242167849 **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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	Y		0983376	03/15/2024	03/15/2025	EACH OCCURRENCE \$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ Excluded PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Certificate holder is additional insured for general liability per form CG2026.

CERTIFICATE HOLDER City of Eau Claire, Dept of Parks & Recreation 915 Menomonie St Eau Claire WI 54703-5679	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.
	AUTHORIZED REPRESENTATIVE 

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CITY OF EAU CLAIRE 2024 SPECIAL EVENT APPLICATION

Community Services
910 Forest Street
Eau Claire, WI 54703
715-839-8883

Summary of Event

EVENT NAME	<input type="checkbox"/> New Event <input checked="" type="checkbox"/> Repeat Event <input type="checkbox"/> Repeat Event with changes (Explain changes in the description below)	
	Event Name: Comedy in the Park	
	Event Date(s): 8/26/2024 9/9/24	
	Name of Sponsoring Organization: Oh Claire Improv	
<input type="checkbox"/> Non-Profit Group <input checked="" type="checkbox"/> For Profit <input type="checkbox"/> Other, please describe:		

EVENT DETAILS	Event description, including changes (attach additional sheet, if necessary): A clean comedy variety show outdoor at phoenix park including Improv and Stand Up Comedy from local comedians.	
	Estimated Daily Attendance:	Estimated Total Attendance: 80 - 100
	Donations, charges or entry fees: Donations collected after the show	
	Location(s) of Event: Phoenix Park Ampitheater	
	Time Set Up Begins: 6:00pm	Time Event Begins: 6:30pm
	Time Event Ends: 8:30pm	Time Clean-up Ends: 9pm

CONTACT DETAILS	Organizer Name: JP Fry	
	Address: 1143 Primrose Lane	
	Work Phone:	Cell Phone: 9136050967
	Email: jp Fry5@gmail.com	
	Please note if new organizer:	

Hold Harmless and Payment Agreements

The applicant agrees to hold harmless, indemnify and defend, at no cost to the City, the City of Eau Claire, its employees, agents, representatives and elected city officials, for any and all claims, demands, suits, losses, costs, expenses (including attorney fees), or any other type of damages, that result from the Special Event. Applicant is responsible for any and all losses or claims that are in any way connected to their Special Event.

The applicant agrees to be billed for any City services at the conclusion of their event. Events cancelled with less than 36 hours' notice may be responsible for the cost of planned services.

I also certify by my signature below that I am a duly qualified representative of my organization and authorized to sign this agreement.

Authorized Applicant Signature: _____ Date: 7/18/24

Event Infrastructure

Check ALL items that apply to your event. All relevant items must be checked for appropriate approvals.

*Some items require additional forms; see the last page of the application for details.

ADMINISTRATIVE APPROVAL

- 100 or more persons are expected in a single day
- Entry fee or admission is charged
- Donations are accepted
- Merchandise or other items will be sold
- Fireworks, fires or other hazardous activities will be provided
- Overnight Camping
- Drones will be used at the event (Ordinance 9.76.110-B.2.)*
- Requesting the use of a boat with a motor on Half Moon Lake during the event
- Putting up tents/inflatables that require stakes to be driven into the ground
- Putting up tents larger than 250 square feet*
- Eau Claire River Lights sponsorship consideration*
- Food/concessions will be served OR sold*
- Selling or distributing 2+ kegs/half barrels of fermented malt beverage or wine*

CITY COUNCIL

- 1,000 or more persons are expected at the event
- Selling or distributing 6+ kegs/half barrels of fermented malt beverage or wine*
- Alcohol will be served past sunset or 8:00 pm in the evening, whichever is later
- Alcohol will be served on the streets, sidewalks, alleys or boulevards
- The event will close city streets, alley, sidewalk or boulevard
- The event will require the alteration of park operational hours (Every day, 4am-11pm)

Event Schedule Worksheet

Include set-up times, event times, race times, food service times, alcoholic beverage service times, firework times, amplified music times, clean-up times, etc. Attach additional sheet, if necessary.

Activity	Location	Date	Start Time	End Time
Set Up	Pheonix Park Amphitheater	9/9/24	6pm	6:30pm
Comedy SHow	Pheonix Park Amphitheater	9/9/24	6:30pm	8:30pm
Clean Up	Pheonix Park Amphitheater	9/9/24	8:30pm	9pm

Event/Services Requested

If you need services or items from the City of Eau Claire for your special event, fill out the form below. Contact Community Services for fee information. This is NOT a comprehensive list of services that may be required for your event. (Item totals may be adjusted for safety reasons by City staff)

Service/Item	# of Items Requested
Police Department Services	
Fire Department Services	
<i>Ambulance Services (please specify EC Fire Dept or outside service)</i>	
Event Panels / Fencing (please specify)	
No Parking Signs (must be posted 24 hours before event start, posts not included)	
Barricades (it takes 4 barricades to close down 1 block of city street)	
Traffic Cones	
Extra Garbage/Recycling Bins <i>(please specify)</i>	
Other:	

Emergency Action Plan

ITEMS TO CONSIDER: Designated “lost child” area, evacuation procedure, securing valuables, crowd control, emergency response procedures and contact information, weather conditions, etc.

Describe your first aid and emergency action plans for the event. Will you have first aid kit(s) available, and/or more advanced medical care, including AED and/or medical personnel available for participants and spectators? How will you advise participants and spectators of locations for first aid if needed?

First Aid and Emergency help will be directed to the red tent we have near the sidewalk

How will you monitor weather during the event? Who will monitor the weather? How will you notify participants and spectators of emergency situations?

We will be monitoring the weather online and if the weather looks bad we will notify on our website and facebook/ all social media. All emergencies will be handled at the tent.

How will you provide access to ambulance and fire trucks for the event in case of medical emergencies?

We will clear street and inform everyone if there is an emergency on the microphones.

Emergency Action Plan (continued)

During an emergency, what communication tools will be available at the event and along race routes? If the event extends outside Eau Claire city limits or on UWEC property, what plans do you have in place?

We will have a PA system and Microphones to commincate any emergency situation to the crowd.

Waste Collection/Recycling

Describe the waste disposal and recycling needs/plan for your event.

We will be picking up after the event any garbage and recycling and disposing of it accordingly.

What, if any, concessions or food products will be sold OR distributed during the event?

Snacks and bottles coffee

What type of products (cups, plates, etc.) will you use during your event?

Recyclable Compostable (biodegradable) Other:

User and Traffic Impact Plan

If the event will impact neighbors and other park users, contact Neighborhood and Business Associations, Chippewa Valley Museum, or Paul Bunyan Camp. How will you notify the affected users of alternate routes and parking options? Include letters of support from associations/businesses affected

This event will not effect parking

Describe the traffic and parking control plans for your event. How will you control traffic and parking to keep traffic and pedestrian lanes open?

We will notify people to keep the sidewalks clear and this event should not effect parking

Yes	No	Will the event offer off-site parking agreements with other parties or shuttle bus services?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	If yes, include information on those agreements.

Yes	No	Will you contract with a private company or organization to provide such services?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	If yes, what company will you use:

Street Closure Worksheet

If you are requesting street closures, complete this worksheet. Attach additional sheet, if necessary.
Please note: Volunteers CANNOT stop traffic; they can only control the pedestrians with your event.

Street Closure (Example: S. Barstow St from Gray St to Lake St)	Time Closing	Time Reopening

Firearms Information

Wisconsin residents have the right to carry a concealed weapon upon issuance of a state permit. City of Eau Claire code section 9.32.040 prohibits firearms on certain City property. Answer the following questions to assist City staff in determining the requirements for your special event.

- Is your event being held at one or more of the following City of Eau Claire buildings, facilities, or locations? (These facilities are permanently posted “Firearms Prohibited”) Check the correct facility:
 - Carson Park Football Stadium, Baseball Stadium, Hobbs Softball Field, or Gelein Softball Field
 - Chippewa Valley Museum OR Paul Bunyan Museum
 - Hobbs Ice Arena
 - Fairfax Pool
 - Neighborhood Shelter – Boyd, Lakeshore, McDonough, North Riverfronts, Pinehurst, Sundet
 - None of the above OR you are using another public space for your event, answer questions below.

- Are you charging admission/taking donations to your event AND having a controlled access area (fencing)?
 - Yes No
 - a. If yes to #2, are you posting your special event “Firearms Prohibited”? Yes No

- Will your event have a Temporary Class B picnic license to serve wine or beer?
 - Yes No
 - a. If yes to #3, will you be posting the enclosed area (i.e., beer garden) where beer or wine is served as “Firearms Prohibited”? Yes No

- If no to #2a OR #3a then you must include a written explanation that details your plan to ensure the health, safety and welfare of those attending the event.

- If no to #3a, “Guns and Alcohol Don’t Mix” signs are required at each public entrance to the licensed area.

OFFICE USE ONLY

- | | |
|--|---|
| <input checked="" type="checkbox"/> No City Requirements | <input type="checkbox"/> Safety Plan required |
| <input type="checkbox"/> Posting “Firearms Prohibited” | <input type="checkbox"/> “Guns and Alcohol Don’t Mix” sign required |

Non-Profit Temporary Food Service Application

Event: Comedy In The Park

Event Date(s): 9/9 Year: 2024 Time: 6:30 PM

Location of this Event (Address): Phoenix Park

Reminder that if you are not part of a Licensed Special Event then you must be on Private Property.

Name of Applicant/Organization: Alyssa Rivera/ Oh Claire Improv

On Site Operator Name/Contact: Alyssa Rivera / Oh Claire Improv

Mailing Address: 1143 Primrose Ln, Altoona, WI 54720

E-mail: ohclaireimprov@gmail.com Phone#: 301-641-4422

Is this organization a religious, fraternal, youth, patriotic, service, or civic group (non-profit)?

Yes _____ or No _____

If the answer to the previous question is yes, then has this group served food to the public during the past 12 months?

Yes _____, how many days? _____

No _____

Menu: Please list the foods that will be served and equipment used:

Free samples of spiced coffee from a local maker based out of Forage. Coffee will be served hot from a commercial grade caraffe.

We will also have food trucks with their own licenses.

Where will foods be prepared? **No home prepared foods allowed!**

Forage Kitchen

Type of structure that will be used for food service (i.e., inside building, pop wagon, tent, a mobile unit).

Pop up tent and table

Department Use:

Temporary restaurant license required? Yes _____ or No _____

Discussed requirements with the Health Department: _____

Date: _____

R.S.

Signature



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

07/23/2024

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.

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).

PRODUCER Dallman Insurance Agency, LLC 1101 W Clairemont Ave STE: 1C EAU CLAIRE, WI 54701	CONTACT NAME: Amber Dallman PHONE (A/C, No, Ext): (715)318-2832 E-MAIL ADDRESS: amber@dallmaninsurance.com	FAX (A/C, No):	
	INSURER(S) AFFORDING COVERAGE		NAIC #
INSURED BODEGA CONVENIENCE LLC DBA OH CLAIRE IMPROV 515 WISCONSIN ST EAU CLAIRE, WI 54703	INSURER A: Secura Insurance Company		22543
	INSURER B:		
	INSURER C:		
	INSURER D:		
	INSURER E:		
	INSURER F:		

COVERAGES

CERTIFICATE NUMBER: 00005439-108638

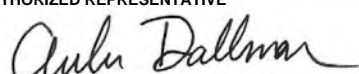
REVISION NUMBER: 1

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		CP3409961	04/24/2024	04/24/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER**CANCELLATION**

City of Eau Claire 203 S Farwell ST EAU CLAIRE, WI 54703	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE  (ARB)

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CITY OF EAU CLAIRE 2024 SPECIAL EVENT APPLICATION

Community Services
910 Forest Street
Eau Claire, WI 54703
715-839-8883

Summary of Event

New Event Repeat Event Repeat Event with changes (Explain changes in the description below)

EVENT NAME

Event Name: Walk for life

Event Date(s): Saturday, September 14, 2024

Name of Sponsoring Organization: Apple Pregnancy Care Center

Non-Profit Group For Profit Other, please describe:

Event description, including changes (attach additional sheet, if necessary):

EVENT DETAILS

Estimated Daily Attendance: 200-250 Estimated Total Attendance: 250

Donations, charges or entry fees: Donations accepted - Fundraiser

Location(s) of Event: Down Park

Time Set Up Begins: 7:30 a.m. Time Event Begins: 9-Registration

Time Event Ends: 1 P.M. Time Clean-up Ends: 1-2 P.M.

CONTACT DETAILS

Organizer Name: Melinda Gardner

Address: 2600 Stein Boulevard, Eau Claire, WI 54701

Work Phone: 715.834.5254 Cell Phone: 715.379.5614

Email: mgardner@applepc.org

Please note if new organizer: -

Hold Harmless and Payment Agreements

The applicant agrees to hold harmless, indemnify and defend, at no cost to the City, the City of Eau Claire, its employees, agents, representatives and elected city officials, for any and all claims, demands, suits, losses, costs, expenses (including attorney fees), or any other type of damages, that result from the Special Event. Applicant is responsible for any and all losses or claims that are in any way connected to their Special Event.

The applicant agrees to be billed for any City services at the conclusion of their event. Events cancelled with less than 36 hours' notice may be responsible for the cost of planned services.

I also certify by my signature below that I am a duly qualified representative of my organization and authorized to sign this agreement.

Authorized Applicant Signature: Melinda G. Gardner Date: Aug 1, 2024

Event Infrastructure

Check ALL items that apply to your event. All relevant items must be checked for appropriate approvals.

*Some items require additional forms; see the last page of the application for details.

ADMINISTRATIVE APPROVAL

- 100 or more persons are expected in a single day
- Entry fee or admission is charged
- Donations are accepted
- Merchandise or other items will be sold
- Fireworks, fires or other hazardous activities will be provided
- Overnight Camping
- Drones will be used at the event (Ordinance 9.76.110-B.2.)*
- Requesting the use of a boat with a motor on Half Moon Lake during the event
- Putting up tents/inflatables that require stakes to be driven into the ground
- Putting up tents larger than 250 square feet*
- Eau Claire River Lights sponsorship consideration*
- Food/concessions will be served OR sold*
- Selling or distributing 2+ kegs/half barrels of fermented malt beverage or wine*
- Intoxicating liquor will be served*

CITY COUNCIL

- 1,000 or more persons are expected at the event
- Selling or distributing 6+ kegs/half barrels of fermented malt beverage or wine*
- Alcohol will be served past sunset or 8:00 pm in the evening, whichever is later
- Alcohol will be served on the streets, sidewalks, alleys or boulevards
- The event will close city streets, alley, sidewalk or boulevard
- The event will require the alteration of park operational hours (Every day, 4am-11pm)

Event Schedule Worksheet

Include set-up times, event times, race times, food service times, alcoholic beverage service times, firework times, amplified music times, clean-up times, etc. Attach additional sheet, if necessary.

Activity	Location	Date	Start Time	End Time
Set Up	Owen Park	9/14/24	7:30 AM	9 AM
Registration Begins	Owen Park	↓	9:00 AM	10 AM
Walk Begins	Owen Park's Trail		10 AM	12 PM
Participants Return	Owen Park			
Lunch	Owen Park		11:30	1 PM
Clean Up	Owen Park		↓	1 PM

Event/Services Requested

If you need services or items from the City of Eau Claire for your special event, fill out the form below. Contact Community Services for fee information. This is NOT a comprehensive list of services that may be required for your event. (Item totals may be adjusted for safety reasons by City staff)

Service/Item	# of Items Requested
Police Department Services	
Fire Department Services	
Event Panels / Fencing <i>(please specify)</i>	
No Parking Signs <i>(must be posted 24 hours before event start, posts not included)</i>	
Barricades <i>(it takes 4 barricades to close down 1 block of city street)</i>	
Traffic Cones	
Spider Box <i>(electrical extension equipment, comes with either 25' or 100' cord)</i>	
Extra Garbage/Recycling Bins <i>(please specify)</i>	
Other:	

Emergency Action Plan

ITEMS TO CONSIDER: Designated "lost child" area, evacuation procedure, securing valuables, crowd control, emergency response procedures and contact information, weather conditions, etc.

Describe your first aid and emergency action plans for the event. Will you have first aid kit(s) available, and/or more advanced medical care, including AED and/or medical personnel available for participants and spectators? How will you advise participants and spectators of locations for first aid if needed?

First Aid kits are available with our volunteers, staff at the event and along the trail. Cell phones are used. We also have Doctors, nurses & a safety team in attendance.

How will you monitor weather during the event? Who will monitor the weather? How will you notify participants and spectators of emergency situations?

Staff will monitor & communicate by cell phone.

How will you provide access to ambulance and fire trucks for the event in case of medical emergencies?

We are in an easily accessible area & would call 911.

Emergency Action Plan (continued)

During an emergency, what communication tools will be available at the event and along race routes? If the event extends outside Eau Claire city limits or on UWEC property, what plans do you have in place?

We have a network of cell phones - each staff person has a list of numbers for communication.

Waste Collection/Recycling

Describe the waste disposal and recycling needs/plan for your event.

We use the park provided trash & recycling containers. In past years, there have been more than enough.

What, if any, concessions or food products will be sold OR distributed during the event?

We are purchasing individual subs + chips. Apples from a local orchard. No cooking.

What type of products (cups, plates, etc.) will you use during your event?

Recyclable Compostable (biodegradable) Other:

User and Traffic Impact Plan

If the event will impact neighbors and other park users, contact Neighborhood and Business Associations, Chippewa Valley Museum, or Paul Bunyan Camp. How will you notify the affected users of alternate routes and parking options? Include letters of support from associations/businesses affected

With few exceptions, participants park on local streets near Owen Park. The traffic & pedestrian lanes remain open.

Describe the traffic and parking control plans for your event. How will you control traffic and parking to keep traffic and pedestrian lanes open?

no impact

Yes No Will the event offer off-site parking agreements with other parties or shuttle bus services?
If yes, include information on those agreements.

Yes No Will you contract with a private company or organization to provide such services?
If yes, what company will you use:

Street Closure Worksheet

If you are requesting street closures, complete this worksheet. Attach additional sheet, if necessary.
Please note: Volunteers CANNOT stop traffic; they can only control the pedestrians with your event.

Street Closure (Example: S. Barstow St from Gray St to Lake St)	Time Closing	Time Reopening

Firearms Information

Wisconsin residents have the right to carry a concealed weapon upon issuance of a state permit. City of Eau Claire code section 9.32.040 prohibits firearms on certain City property. Answer the following questions to assist City staff in determining the requirements for your special event.

- Is your event being held at one or more of the following City of Eau Claire buildings, facilities, or locations? (These facilities are permanently posted "Firearms Prohibited") Check the correct facility:
 - Carson Park Football Stadium, Baseball Stadium, Hobbs Softball Field, or Gelein Softball Field
 - Chippewa Valley Museum OR Paul Bunyan Museum
 - Hobbs Ice Arena
 - Fairfax Pool
 - Neighborhood Shelter – Boyd, Lakeshore, McDonough, North Riverfronts, Pinehurst, Sundet
 - None of the above OR you are using another public space for your event, answer questions below.
- Are you charging admission/taking donations to your event AND having a controlled access area (fencing)?
 - Yes No
 - a. If yes to #2, are you posting your special event "Firearms Prohibited"? Yes No
- Will your event have a Temporary Class B picnic license to serve wine or beer?
 - Yes No
 - a. If yes to #3, will you be posting the enclosed area (i.e., beer garden) where beer or wine is served as "Firearms Prohibited"? Yes No
- If no to #2a OR #3a then you must include a written explanation that details your plan to ensure the health, safety and welfare of those attending the event.
- If no to #3a, "Guns and Alcohol Don't Mix" signs are required at each public entrance to the licensed area.

OFFICE USE ONLY

- | | |
|--|---|
| <input checked="" type="checkbox"/> No City Requirements | <input type="checkbox"/> Safety Plan required |
| <input type="checkbox"/> Posting "Firearms Prohibited" | <input type="checkbox"/> "Guns and Alcohol Don't Mix" sign required |

Lake St



Chippewa River

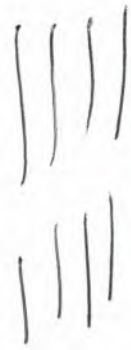
Chippewa River State Trail

1st Ave

Hudson St



Owen Park Bathroom



Bands
Owen Park



Broadway St

1st Ave

Chippewa River State Trail

**Apple Pregnancy Care Center
Walk for Life
Sept 14, 2024**

Route:

Begin at Owen Park on First Avenue. We walk along the
Chippewa River Trail to Menomonie Street.

Cross at the lights to the Roadside Diner.

Return the same way
To Owen Park.



2024 TENT & GREENHOUSE PERMIT APPLICATION

Required 10 Days Prior to Inspection Date

APPLICATION FEE – \$62

NOTE: Any structure that is erected for longer than 180 days is considered permanent therefore not authorized by this permit

Permit Applicant Contact Information:

Name: Apple Pregnancy Care Center - Melinda Gardner Greg Weaver Phone: 715-579-2379

Address: 2100 Stein Boulevard, Eau Claire, WI 54701

Tent/Greenhouse Information:

Group/Organization using the Tent: Apple Pregnancy Care Center

Location of Tent: Owen Park, Eau Claire

Number of Tents/Greenhouses: 1 (A single permit is required for each site but not each tent/greenhouse)

Purpose or Use of Tent/Greenhouse: Registration for walk Expected maximum occupancy: 5-10

Company Erecting Tent/Greenhouse: A-1 Express Rental

*****INSPECTION OF THE TENT/GREENHOUSE IS REQUIRED PRIOR TO OCCUPANCY*****

Date Tent will be Set-Up: Fri, Sept 13 Date Tent will be Taken Down: Sat, Sept 14

Approximate Date & Time of Inspection: Friday afternoon - 9/13

*****PLEASE CALL AHEAD TO SCHEDULE AN INSPECTION 715-839-4825*****

Applicant agrees to abide by the Eau Claire Fire Department Fire Prevention Code Requirements as they relate to this permit.

Signature: Melinda G. Gardner Date: Aug 1, 24

PLEASE ATTACH A SITE PLAN/MAP INDICATING THE LOCATION OF THE TENT(S) IN RELATION TO BUILDINGS, PARKING AND ACCESS ROADS

If using electricity please call 715-839-4947 to apply for an electrical permit

Mail completed form with payment to:

Eau Claire Fire and Rescue, 216 South Dewey Street, Eau Claire, WI 54701

Check Payable to: City of Eau Claire Treasurer

If erected on City Property a Special Events application must also be completed
That application can be found online at: www.eauclairewi.gov/recreation/special-events
OR in person at 910 Forest Street, Eau Claire, WI 54703

OFFICE USE ONLY

Permit Number: _____ Received By: _____

Payment: \$62 Cash _____ Check _____ Ck Number _____ Treasury Use #2524



Non-Profit Temporary Food Service Application

Event: Walk for life

Event Date(s): Sat., Sept 14 Year: 2024 Time: 10 AM

Location of this Event (Address): Owen Park

Reminder that if you are not part of a Licensed Special Event then you must be on Private Property.

Name of Applicant/Organization: Apple Pregnancy Care Center

On Site Operator Name/Contact: Melinda Gardner

Mailing Address: 2600 Stein Blvd., Eau Claire WI 54701

E-mail: mgardner@applepcu.org Phone#: 715.834.5254

Is this organization a religious, fraternal, youth, patriotic, service, or civic group (non-profit)?

Yes or No

If the answer to the previous question is yes, then has this group served food to the public during the past 12 months?

Yes , how many days? 1

No

Menu: Please list the foods that will be served and equipment used:

We are providing individually wrapped sub sandwiches purchased from Subway - and bags of chips. Apples from an orchard.

Where will foods be prepared? **No home prepared foods allowed!**

Subway

Type of structure that will be used for food service (i.e., inside building, pop wagon, tent, a mobile unit).

Tent

Department Use:

Temporary restaurant license required? Yes or No

Discussed requirements with the Health Department: _____

Date: _____

Signature R.S.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/30/2024

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.

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).

PRODUCER Marsh Insurance Services, Inc 11 E Newton St - PO Box 270 Rice Lake, WI 54868	CONTACT NAME: Nancy Sandmann PHONE (A/C, No, Ext): (715)234-8148 E-MAIL ADDRESS: Nancy.Sandmann@insurewithmarsh.com	FAX (A/C, No): (715)234-9336
	INSURER(S) AFFORDING COVERAGE	
INSURED Apple Pregnancy Care Center, Inc. 2600 Stein Blvd Eau Claire, WI 54701-4499	INSURER A: West Bend Mutual Insurance Company NAIC # 15350	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** 00006963-240730150531 **REVISION NUMBER:** 1

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		1435841	6/30/2024	6/30/2025	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
							MED EXP (Any one person)	\$ 10,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 3,000,000
							PRODUCTS - COMP/OP AGG	\$ 3,000,000
								\$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE	\$
							AGGREGATE	\$
								\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	1435843	6/30/2024	6/30/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER	
							E.L. EACH ACCIDENT	\$ 100,000
							E.L. DISEASE - EA EMPLOYEE	\$ 100,000
							E.L. DISEASE - POLICY LIMIT	\$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 City of Eau Claire is listed as additional insured on the general liability policy.

CERTIFICATE HOLDER**CANCELLATION**

City of Eau Claire
 203 W Farwell St
 Eau Claire, WI 54703

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

(NLS)

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CITY OF EAU CLAIRE 2024 SPECIAL EVENT APPLICATION

Community Services
910 Forest Street
Eau Claire, WI 54703
715-839-8883

Summary of Event

EVENT NAME

New Event Repeat Event Repeat Event with changes (Explain changes in the description below)

Event Name: Dark History Tour

Event Date(s): Wednesday, Sept. 25 - Sunday, Nov. 3, 2024

Name of Sponsoring Organization: Chippewa River Trolley

Non-Profit Group For Profit Other, please describe:

EVENT DETAILS

Event description, including changes (attach additional sheet, if necessary):

The Dark History Tour lasts approximately 75 minutes. One aspect of the tour will be a brief viewing of the Lakeview Cemetery Chapel. While the content is creepy and dark in nature, it is ultimately a history and legend tour, not a jump-scare attraction. Factual stories of deeply unfortunate historic events - murders, assaults, and more - are shared with respect to the circumstances, the victims, and their families. Listener discretion is advised. This tour requires passengers be at least 18 years old and to sign a waiver.

Estimated **Daily** Attendance: 44, two tours each date

Estimated **Total** Attendance: 1716

Donations, charges or entry fees: \$28

Location(s) of Event: Around the city of Eau Claire

Time Set Up Begins: 5:30pm

Time Event Begins: 6:00pm

Time Event Ends: 8:45pm

Time Clean-up Ends: 8:50pm

CONTACT DETAILS

Organizer Name: Nick Meyer

Address: 205 N Dewey St, Eau Claire, WI 54703

Work Phone: 715-552-0457

Cell Phone:

Email: nick@volumeone.org

Please note if new organizer:

Hold Harmless and Payment Agreements

- The applicant agrees to hold harmless, indemnify and defend, at no cost to the City, the City of Eau Claire, its employees, agents, representatives and elected city officials, for any and all claims, demands, suits, losses, costs, expenses (including attorney fees), or any other type of damages, that result from the Special Event. Applicant is responsible for any and all losses or claims that are in any way connected to their Special Event.
- The applicant agrees to be billed for any City services at the conclusion of their event. Events cancelled with less than 36 hours' notice may be responsible for the cost of planned services.

I also certify by my signature below that I am a duly qualified representative of my organization and authorized to sign this agreement.

Authorized Applicant Signature: _____

Date: 08/12/2024

Event Infrastructure

Check ALL items that apply to your event. All relevant items must be checked for appropriate approvals.

*Some items require additional forms; see the last page of the application for details.

ADMINISTRATIVE APPROVAL

- 100 or more persons are expected in a single day
- Entry fee or admission is charged
- Donations are accepted
- Merchandise or other items will be sold
- Fireworks, fires or other hazardous activities will be provided
- Overnight Camping
- Drones will be used at the event (Ordinance 9.76.110-B.2.)*
- Requesting the use of a boat with a motor on Half Moon Lake during the event
- Putting up tents/inflatables that require stakes to be driven into the ground
- Putting up tents larger than 250 square feet*
- Eau Claire River Lights sponsorship consideration*
- Food/concessions will be served OR sold*
- Selling or distributing 2+ kegs/half barrels of fermented malt beverage or wine*

CITY COUNCIL

- 1,000 or more persons are expected at the event
- Selling or distributing 6+ kegs/half barrels of fermented malt beverage or wine*
- Alcohol will be served past sunset or 8:00 pm in the evening, whichever is later
- Alcohol will be served on the streets, sidewalks, alleys or boulevards
- The event will close city streets, alley, sidewalk or boulevard
- The event will require the alteration of park operational hours (Every day, 4am-11pm)

Event Schedule Worksheet

Include set-up times, event times, race times, food service times, alcoholic beverage service times, firework times, amplified music times, clean-up times, etc. Attach additional sheet, if necessary.

Activity	Location	Date	Start Time	End Time
Set Up	The Local Store	ALL DATES	5:30pm	5:50pm
Tour Starts			6:00pm	
	Lakeview Cemetary Chapel	ALL DATES	<small>Approx. 40 minutes into the tour</small>	5-10 minutes total
Clean Up	The Local Store	ALL DATES	8:45pm	8:50pm

Event/Services Requested

If you need services or items from the City of Eau Claire for your special event, fill out the form below. Contact Community Services for fee information. This is NOT a comprehensive list of services that may be required for your event. (Item totals may be adjusted for safety reasons by City staff)

Service/Item	# of Items Requested
Police Department Services	
Fire Department Services	
<i>Ambulance Services (please specify EC Fire Dept or outside service)</i>	
Event Panels / Fencing (please specify)	
No Parking Signs (must be posted 24 hours before event start, posts not included)	
Barricades (it takes 4 barricades to close down 1 block of city street)	
Traffic Cones	
Extra Garbage/Recycling Bins <i>(please specify)</i>	
Other:	

Emergency Action Plan

ITEMS TO CONSIDER: Designated “lost child” area, evacuation procedure, securing valuables, crowd control, emergency response procedures and contact information, weather conditions, etc.

Describe your first aid and emergency action plans for the event. Will you have first aid kit(s) available, and/or more advanced medical care, including AED and/or medical personnel available for participants and spectators? How will you advise participants and spectators of locations for first aid if needed?

There is a first aid kit, fire extinguisher, and emergency cones on the trolley. We will have the use of cell phones to contact emergency services, if necessary.

How will you monitor weather during the event? Who will monitor the weather? How will you notify participants and spectators of emergency situations?

If the weather is looking severe or if a storm is forecasted during the tour, depending on the likelihood the trolley will not be present for rides. The trolley driver will be attentive to weather during the event and if a storm is developing.

How will you provide access to ambulance and fire trucks for the event in case of medical emergencies?

We will not block off any roads or sidewalks to impede emergency services.

Emergency Action Plan (continued)

During an emergency, what communication tools will be available at the event and along race routes? If the event extends outside Eau Claire city limits or on UWEC property, what plans do you have in place?

The trolley driver will have a cell phone and a PA system to communicate with riders during an emergency.

Waste Collection/Recycling

Describe the waste disposal and recycling needs/plan for your event.

n/a

What, if any, concessions or food products will be sold OR distributed during the event?

n/a

What type of products (cups, plates, etc.) will you use during your event?

Recyclable Compostable (biodegradable) Other:

User and Traffic Impact Plan

If the event will impact neighbors and other park users, contact Neighborhood and Business Associations, Chippewa Valley Museum, or Paul Bunyan Camp. How will you notify the affected users of alternate routes and parking options? Include letters of support from associations/businesses affected

This event should not impact any neighborhoods, businesses or parks since the trolley will only be driving on the roadways and will only be temporarily parking.

Describe the traffic and parking control plans for your event. How will you control traffic and parking to keep traffic and pedestrian lanes open?

There will be no need to provide alternative parking or traffic plans. All roads and sidewalks will still be open and accessible.

Yes No Will the event offer off-site parking agreements with other parties or shuttle bus services?
 If yes, include information on those agreements.

Yes No Will you contract with a private company or organization to provide such services?
 If yes, what company will you use:

Street Closure Worksheet

If you are requesting street closures, complete this worksheet. Attach additional sheet, if necessary.
Please note: Volunteers CANNOT stop traffic; they can only control the pedestrians with your event.

Street Closure (Example: S. Barstow St from Gray St to Lake St)	Time Closing	Time Reopening

Firearms Information

Wisconsin residents have the right to carry a concealed weapon upon issuance of a state permit. City of Eau Claire code section 9.32.040 prohibits firearms on certain City property. Answer the following questions to assist City staff in determining the requirements for your special event.

1. Is your event being held at one or more of the following City of Eau Claire buildings, facilities, or locations? (These facilities are permanently posted "Firearms Prohibited") Check the correct facility:
 - Carson Park Football Stadium, Baseball Stadium, Hobbs Softball Field, or Gelein Softball Field
 - Chippewa Valley Museum OR Paul Bunyan Museum
 - Hobbs Ice Arena
 - Fairfax Pool
 - Neighborhood Shelter – Boyd, Lakeshore, McDonough, North Riverfronts, Pinehurst, Sundet
 - None of the above OR you are using another public space for your event, answer questions below.

2. Are you charging admission/taking donations to your event AND having a controlled access area (fencing)?
 - Yes No
 - a. If yes to #2, are you posting your special event "Firearms Prohibited"? Yes No

3. Will your event have a Temporary Class B picnic license to serve wine or beer?
 - Yes No
 - a. If yes to #3, will you be posting the enclosed area (i.e., beer garden) where beer or wine is served as "Firearms Prohibited"? Yes No

4. If no to #2a OR #3a then you must include a written explanation that details your plan to ensure the health, safety and welfare of those attending the event.

5. If no to #3a, "Guns and Alcohol Don't Mix" signs are required at each public entrance to the licensed area.

OFFICE USE ONLY

<input checked="" type="checkbox"/> No City Requirements <input type="checkbox"/> Posting "Firearms Prohibited"	<input type="checkbox"/> Safety Plan required <input type="checkbox"/> "Guns and Alcohol Don't Mix" sign required
--	--



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

5/1/2024

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.

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).


PRODUCER Spectrum Insurance Group - Eau Claire 4233 Southtowne Dr Eau Claire WI 54701	CONTACT NAME: Katie Clancy	
	PHONE (A/C. No. Ext): 715-858-9865	FAX (A/C. No):
E-MAIL ADDRESS: katie.clancy@spectruminsgroup.com		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Secura		22543
INSURED Volume One Events LLC 205 N Dewey St Eau Claire WI 54703	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** 1530611682 **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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		CP3390407	6/1/2024	6/1/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 City of Eau Claire is an additional insured on the General Liability policy.

CERTIFICATE HOLDER City of Eau Claire 910 Forest Street Eau Claire WI 54701	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.
	AUTHORIZED REPRESENTATIVE 

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CITY OF EAU CLAIRE
2024 SPECIAL EVENT APPLICATION

Community Services
 910 Forest Street
 Eau Claire, WI 54703
 715-839-8883

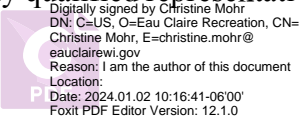
Summary of Event

EVENT NAME	<input type="checkbox"/> New Event <input checked="" type="checkbox"/> Repeat Event <input type="checkbox"/> Repeat Event with changes (Explain changes in the description below)	
	Event Name: Clearwater Winter Parade 2024	
	Event Date(s): Friday, December 6th, 2024	
	Name of Sponsoring Organization: City of Eau Claire Parks, Recreation, and Forestry	
EVENT DETAILS	<input checked="" type="checkbox"/> Non-Profit Group <input type="checkbox"/> For Profit <input type="checkbox"/> Other, please describe:	
	Event description, including changes (attach additional sheet, if necessary): Annual Winter Lights Parade	
	Estimated Daily Attendance: 10,000	Estimated Total Attendance: 10,000
	Donations, charges or entry fees: \$15-\$50 Entry Fee, Free to public to attend	
	Location(s) of Event: See Map of Parade Route	
	Time Set Up Begins: 3:00pm	Time Event Begins: 6:30pm
Time Event Ends: 7:45pm	Time Clean-up Ends: 8:45pm	
CONTACT DETAILS	Organizer Name: Christine Mohr	
	Address: 915 Menomonie Street	
	Work Phone: 715-839-5034	Cell Phone: 715-577-6505
	Email: chrstine.mohr@eauclairewi.gov	
	Please note if new organizer:	

Hold Harmless and Payment Agreements

- The applicant agrees to hold harmless, indemnify and defend, at no cost to the City, the City of Eau Claire, its employees, agents, representatives and elected city officials, for any and all claims, demands, suits, losses, costs, expenses (including attorney fees), or any other type of damages, that result from the Special Event. Applicant is responsible for any and all losses or claims that are in any way connected to their Special Event.
- The applicant agrees to be billed for any City services at the conclusion of their event. Events cancelled with less than 36 hours' notice may be responsible for the cost of planned services.

I also certify by my signature below that I am a duly qualified representative of my organization and authorized to sign this agreement.

Authorized Applicant Signature: Christine Mohr  Date: 1/02/2024

Event Infrastructure

Check ALL items that apply to your event. All relevant items must be checked for appropriate approvals.

*Some items require additional forms; see the last page of the application for details.

ADMINISTRATIVE APPROVAL

- 100 or more persons are expected in a single day
- Entry fee or admission is charged
- Donations are accepted
- Merchandise or other items will be sold
- Fireworks, fires or other hazardous activities will be provided
- Overnight Camping
- Drones will be used at the event (Ordinance 9.76.110-B.2.)*
- Requesting the use of a boat with a motor on Half Moon Lake during the event
- Putting up tents/inflatables that require stakes to be driven into the ground
- Putting up tents larger than 250 square feet*
- Eau Claire River Lights sponsorship consideration*
- Food/concessions will be served OR sold*
- Selling or distributing 2+ kegs/half barrels of fermented malt beverage or wine*
- Intoxicating liquor will be served*

CITY COUNCIL

- 1,000 or more persons are expected at the event
- Selling or distributing 6+ kegs/half barrels of fermented malt beverage or wine*
- Alcohol will be served past sunset or 8:00 pm in the evening, whichever is later
- Alcohol will be served on the streets, sidewalks, alleys or boulevards
- The event will close city streets, alley, sidewalk or boulevard
- The event will require the alteration of park operational hours (Every day, 4am-11pm)

Event Schedule Worksheet

Include set-up times, event times, race times, food service times, alcoholic beverage service times, firework times, amplified music times, clean-up times, etc. Attach additional sheet, if necessary.

Activity	Location	Date	Start Time	End Time
Set Up	Fireworks Set-up:Grand Ave Bridge	12/6/2024	9:00am	8:00pm
	Parade Line-Up:Oxford Lots	12/6/2024	5:15pm	6:15pm
	Fireworks Start:Grand Ave Bridge	12/6/2024	6:30pm	6:40pm
	Parade Start: Oxford Lots	12/6/2024	6:40pm	7:45pm
Clean Up	Grand Ave/1st Ave/ Parking Lots	12/6/2024	7:45pm	9:00pm

Event/Services Requested

If you need services or items from the City of Eau Claire for your special event, fill out the form below. Contact Community Services for fee information. This is NOT a comprehensive list of services that may be required for your event. (Item totals may be adjusted for safety reasons by City staff)

Service/Item	# of Items Requested
Police Department Services	Yes
Fire Department Services	
Event Panels / Fencing <i>(please specify)</i>	Yes will work with Parks Department
No Parking Signs <i>(must be posted 24 hours before event start, posts not included)</i>	400
Barricades <i>(it takes 4 barricades to close down 1 block of city street)</i>	
Traffic Cones	Yes
Spider Box <i>(electrical extension equipment, comes with either 25' or 100' cord)</i>	
Extra Garbage/Recycling Bins <i>(please specify)</i>	
Other:	

Emergency Action Plan

ITEMS TO CONSIDER: Designated “lost child” area, evacuation procedure, securing valuables, crowd control, emergency response procedures and contact information, weather conditions, etc.

Describe your first aid and emergency action plans for the event. Will you have first aid kit(s) available, and/or more advanced medical care, including AED and/or medical personnel available for participants and spectators? How will you advise participants and spectators of locations for first aid if needed?

See attached

How will you monitor weather during the event? Who will monitor the weather? How will you notify participants and spectators of emergency situations?

See attached

How will you provide access to ambulance and fire trucks for the event in case of medical emergencies?

See attached

Emergency Action Plan (continued)

During an emergency, what communication tools will be available at the event and along race routes? If the event extends outside Eau Claire city limits or on UWEC property, what plans do you have in place?

Cell phone and radio communications will be used between on-site Police Sergeant, Event Director, Parks Supervisor, and Street Supervisor.

Waste Collection/Recycling

Describe the waste disposal and recycling needs/plan for your event.

12 garbage containers will be needed

What, if any, concessions or food products will be sold OR distributed during the event?

What type of products (cups, plates, etc.) will you use during your event?

Recyclable Compostable (biodegradable) Other:

User and Traffic Impact Plan

If the event will impact neighbors and other park users, contact Neighborhood and Business Associations, Chippewa Valley Museum, or Paul Bunyan Camp. How will you notify the affected users of alternate routes and parking options? Include letters of support from associations/businesses affected

See Attached

Describe the traffic and parking control plans for your event. How will you control traffic and parking to keep traffic and pedestrian lanes open?

Event staff will work directly with ECPD and Street Division to discuss traffic logistics.

Yes	No	Will the event offer off-site parking agreements with other parties or shuttle bus services?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	If yes, include information on those agreements.

Yes	No	Will you contract with a private company or organization to provide such services?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	If yes, what company will you use:

Street Closure Worksheet

If you are requesting street closures, complete this worksheet. Attach additional sheet, if necessary.
Please note: Volunteers CANNOT stop traffic; they can only control the pedestrians with your event.

Street Closure (Example: S. Barstow St from Gray St to Lake St)	Time Closing	Time Reopening
See attached		

Firearms Information

Wisconsin residents have the right to carry a concealed weapon upon issuance of a state permit. City of Eau Claire code section 9.32.040 prohibits firearms on certain City property. Answer the following questions to assist City staff in determining the requirements for your special event.

- Is your event being held at one or more of the following City of Eau Claire buildings, facilities, or locations? (These facilities are permanently posted “Firearms Prohibited”) Check the correct facility:
 - Carson Park Football Stadium, Baseball Stadium, Hobbs Softball Field, or Gelein Softball Field
 - Chippewa Valley Museum OR Paul Bunyan Museum
 - Hobbs Ice Arena
 - Fairfax Pool
 - Neighborhood Shelter – Boyd, Lakeshore, McDonough, North Riverfronts, Pinehurst, Sundet
 - None of the above OR you are using another public space for your event, answer questions below.

- Are you charging admission/taking donations to your event AND having a controlled access area (fencing)?
 - Yes No
 - a. If yes to #2, are you posting your special event “Firearms Prohibited”? Yes No

- Will your event have a Temporary Class B picnic license to serve wine or beer?
 - Yes No
 - a. If yes to #3, will you be posting the enclosed area (i.e., beer garden) where beer or wine is served as “Firearms Prohibited”? Yes No

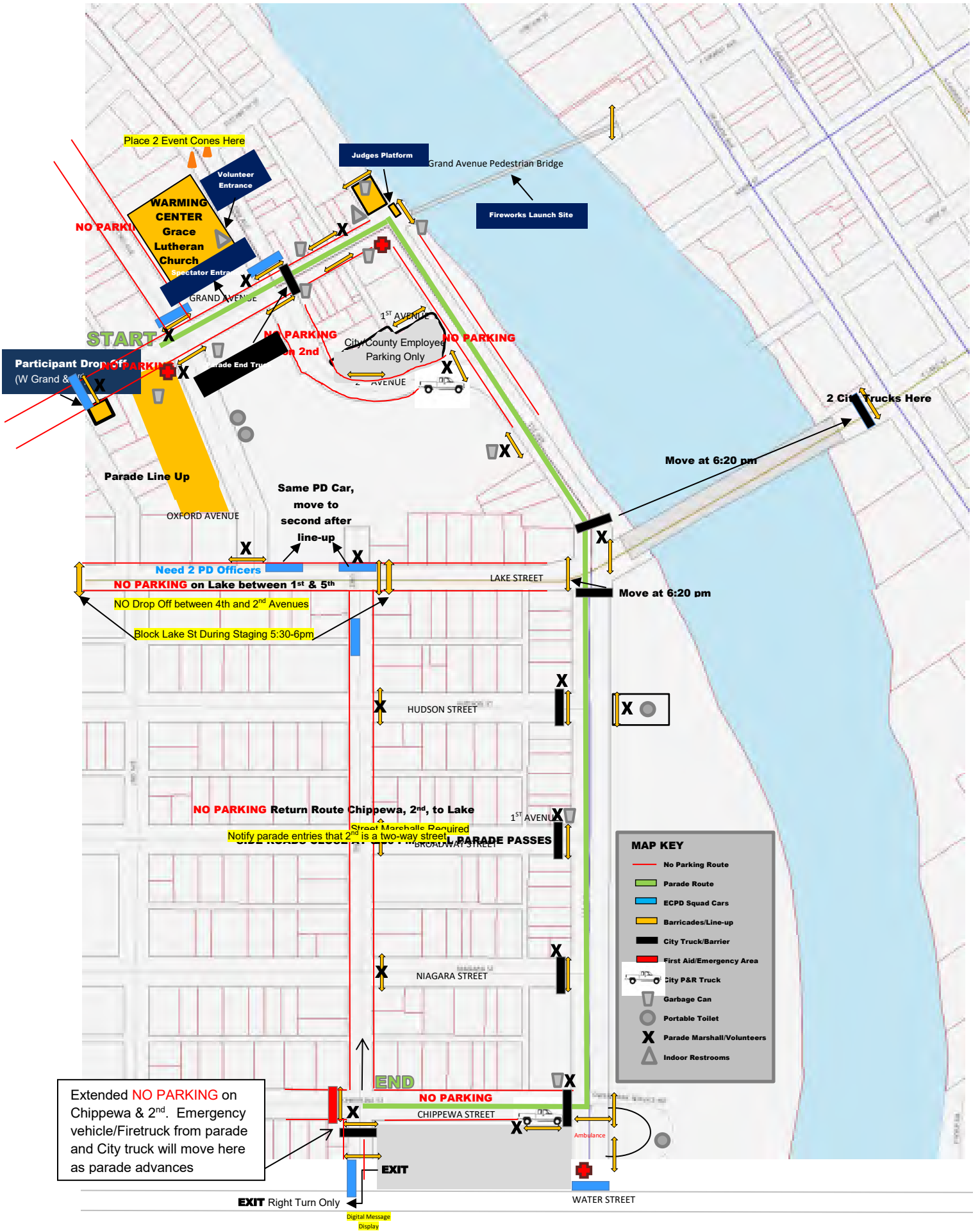
- If no to #2a OR #3a then you must include a written explanation that details your plan to ensure the health, safety and welfare of those attending the event.

- If no to #3a, “Guns and Alcohol Don’t Mix” signs are required at each public entrance to the licensed area.

OFFICE USE ONLY

- | | |
|--|---|
| <input checked="" type="checkbox"/> No City Requirements | <input type="checkbox"/> Safety Plan required |
| <input type="checkbox"/> Posting “Firearms Prohibited” | <input type="checkbox"/> “Guns and Alcohol Don’t Mix” sign required |

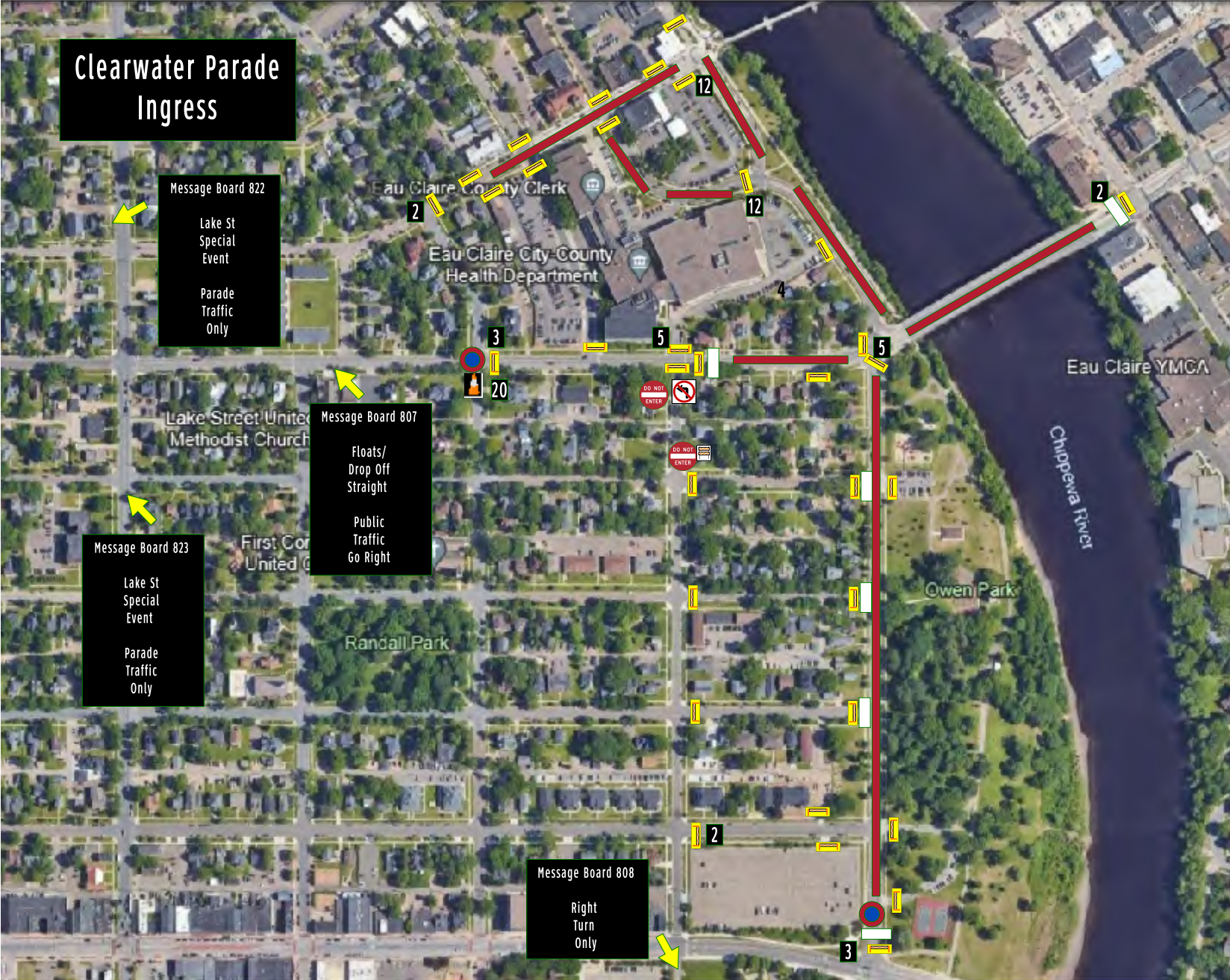
CLOSE ENTIRE PARADE ROUTE AT 5:30PM & LAKE STREET AT 6:20PM





CLEARWATER WINTER PARADE ROUTE MAP

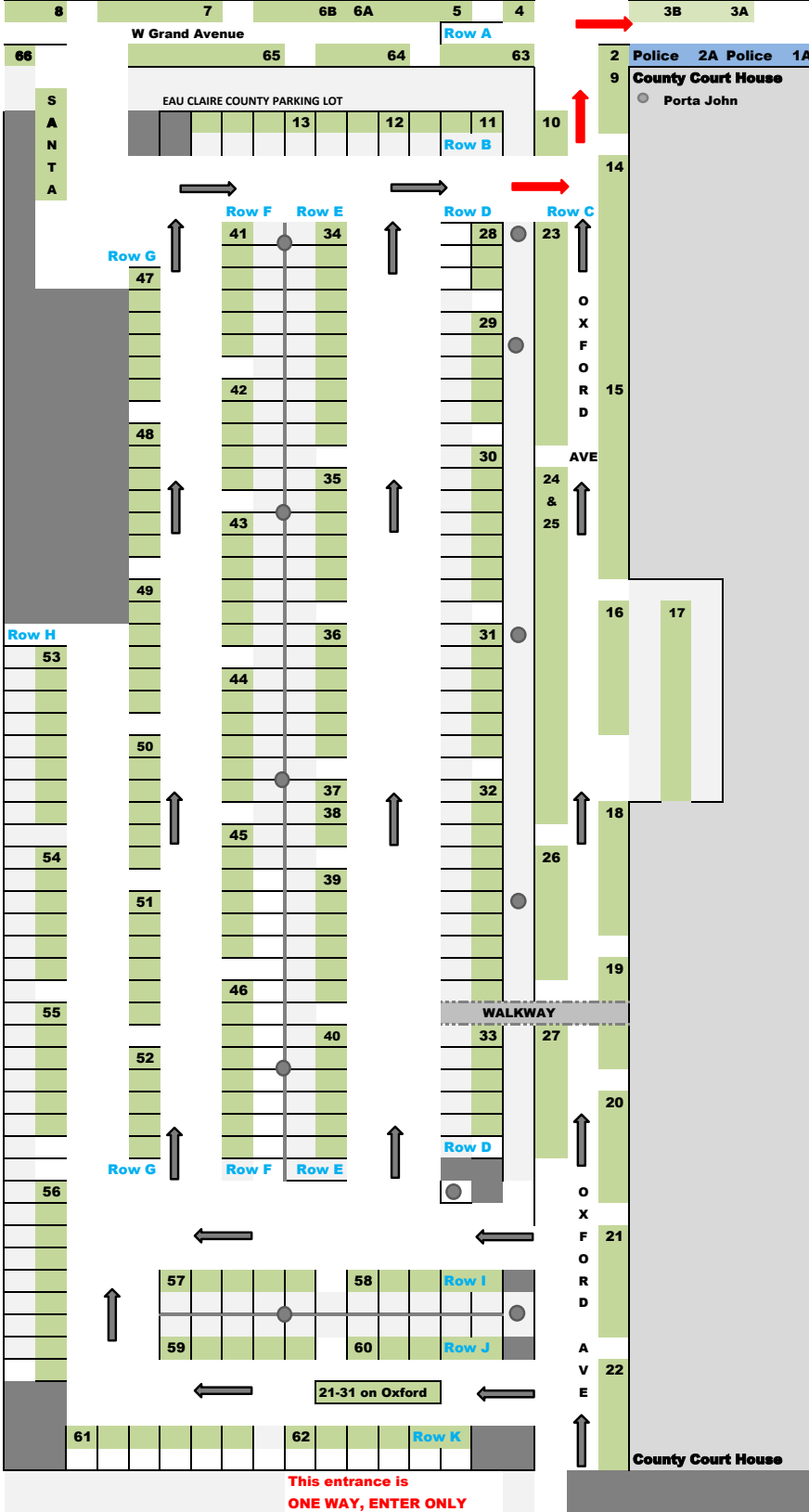




DROP OFF AREA
Located on 3rd Ave

Oxford Ave

Grace Lutheran Church WARMING CENTER
(FREE COFFEE & HOT CHOCOLATE)



Row	#	Organization	Category
A	1A	City of Eau Claire Police	Car
A	2A	City of Eau Claire Police	Car
A	2	City of Eau Claire Police Honor Guard	Walk
A	3A	Eau Claire County Sherriff Department	Car/ATV
A	3B	Eau Claire County Sherriff Department Honor Guard	Walk
A	4	VFW Post 7232	Walk
A	5	City of Eau Claire Fire & Rescue (Ambulance)	Truck
A	6A	City of Eau Claire Fire & Rescue Honor Guard	Float
A	6B	City of Eau Claire Fire & Rescue (Fire Truck)	Car
A	7	Eau Claire Composite Squadron Civil Air Patrol	Van/ Color Guard
A	8	Eau Claire Clovers 4H Club	Walk
A	63	Micon Cinemas	Float
A	64	United States Postal Service	Truck
A	65	Market and Johnson	Float
A	66	City of Eau Claire Forestry	Truck
B	11	The Community Table	Truck
B	12	Eau Claire Express	Truck
B	13	CVTC Criminal Justice Club	Veichle
C	9	Parade Grand Marshal	Bus
C	10	WEAU	Bus
C	14	Kobussen Coach Bus	Bus
C	15	Kobussen School Bus	Bus
C	16	Chippewa River Trolley and Volume One	Trolley
C	17	Chippewa Valley ATVERS	ATV/Truck
C	18	Green Fleet	Truck
C	19	Tactical Escape 101-Eau Claire	Truck
C	20	Two Men and a Truck	Truck
C	21	Huebsch Services	Truck
C	22	Berkshire Hathaway North Properties	Veichle
C	23	Markquart RV	Truck/RV
C	24/25	Chad's Towing	Float
C	26	Courtesy Corporation McDonalds	Float
C	27	Bowe Business Group- Culvers	Float
D	28	Festival Foods	Big Cart
D	29	FASTSIGNS of Eau Claire	Truck
D	30	Steam Rock Saunas	Float
D	31	Girl Scouts	Float
D	32	Rodell Tow and Recovery	Truck
D	33	Fahrner Asphalt Sealers	Truck
E	34	City of Eau Claire Transit	Bus
E	35	City of Eau Claire Utilities	Float
E	36	City of Eau Claire Parks	Float
E	37	City of Eau Claire City Manager office and City Council	Walk
E	38	City of Eau Claire Recreation	Car
E	39	City of Eau Claire Engineering and IT	Float
E	40	City of Eau Claire Attorney's Office	Float
F	41	City of Eau Claire Community Development	Float
F	42	Eau Claire City-County Health Department	Float
F	43	En Avant School of Dance	Float
F	44	Smiles in Motion, Pediatric Dentistry	Float
F	45	Eckroth Music Eau Claire	Truck
F	46	Ski Sprites Water Ski Team	Float
G	47	AMK Cleaning	Float
G	48	Prevail Bank	Float
G	49	One Fest	Float
G	50	Spirit Lutheran	Float
G	51	Chippewa Valley Council-BSA	Float
G	52	Chorale à Nouveau	Float
H	53	Sleep in Heavenly Peace	Float
H	54	Abundant Acres Farm	Animal
H	55	Little Creek Family Campground	Float
H	56	CNW Distribution	Float
I	57	Eau Claire Kubb League	Float
I	58	Eau Claire Energy Cooperative	Float
J	59	Benedict Sales and Service	Float
J	60	Solidaritus Health	Float
K	61	St. Mark Lutheran Church	Float
K	62	Chippewa Valley Parade of Lights	Float
	68	City of Eau Claire Streets (Start @ 2nd & Oxford)	Float

CLEARWATER WINTER EVENT 2024
Special Event Application Supporting Documents

1. WASTE COLLECTION & RECYCLING PLAN

Waste Disposal and Recycling Plan: Use of City receptacles for garbage and recycling. Request for a group to follow parade to pick up trash left from spectators.

Type of container products used at event: Recyclable.

2. EMERGENCY ACTION PLAN

Emergency Action Plan

All facilities have written emergency action plans in place. An incident command will be set up at an off-site location per ECPD.

First aid and emergency areas will be identified and set up at the following locations:

Parade: Main stage corner of W Grand and First Avenue and line-up area located at the County parking lot on Oxford Avenue.

Weather

Weather will be monitored by event organizers and City staff. The event will take place as scheduled even if there is rain, snow, etc... If the weather becomes severe or unmanageable, requiring the event to be cancelled, the media will be notified by the event organizer.

Emergency Vehicle Access

Emergency vehicles, police, fire, and ambulances are a part of the parade event and will be available for emergency situations as needed.

Communication Tools and Resources

City staff will have cell phones and department issued radio communications. Some volunteers may be issued a radio if determined necessary.

3. TRAFFIC CONTROL PLAN

Owen Park traffic, pedestrian, and parking plans will be utilized. The event will have off-site parking agreements with neighboring businesses provided in writing. Letters will be sent to each business at least 4 weeks prior to the event. Additional parking will be authorized by Grace Lutheran Church, Boys and Girls Club, County of Eau Claire, UWEC.

Neighbors, businesses, and residents will be notified in writing of the event and logistics as deemed necessary. Those impacted directly by the parade route will receive written notification by email and/or postal mail.

No private company will be contacted to provide parking or traffic management services

4. FIREARMS/CONCEALED CARRY PLAN

Locations: The parade spectators and participants will be located along the parade route on City sidewalks and streets. These areas are not posted and firearms may be concealed.

Admission/Donations: There will not be admission charged for this event.

Temporary Class B Picnic License: Alcohol will not be served at this event.

5. EVENT SCHEDULE

7:30am	Parade sign and cone reset
9:00am	Fireworks set up on Grand Avenue pedestrian bridge (bridge closed 8:00am-8:00pm)
6:30pm – 6:40pm	Fireworks to kick-off parade
6:40pm-7:30pm	Parade from W. Grand Avenue to First Avenue, ending at Chippewa Street
7:30pm-8:30pm	Parade clean-up

6. PROOF OF INSURANCE

Insurance is provided by the City of Eau Claire.

7. MAPS OF EVENT

Attached
(Parade Route, Parade Line-up (previous year),

8. SPECIAL EVENT APPLICATION FEE

NOT APPLICABLE FOR THIS EVENT

- 9. TENT PERMIT
- 10. HEALTH DEPARTMENT FOOD SALES PERMIT
- 11. ALCOHOL APPLICATION
- 12. PHOENIX PARK AGREEMENT
- 13. PHOENIX PARK ALCOHOL REQUEST