

	☐ Special Event Fee: \$50	\$75	\$100
	Total Amount Paid:		_
ì	Receipt No	_	

Village of Hobart Application for a Special Event

NOTICE: This application must be on file in the Office of the Village Clerk a minimum of 60 days prior to the date of the event.

Phone (920) 869-3802 Fax (920) 869-2048

1.	Name/Description of Event:				
2.	Date of Event:or, if multiple days, what is Start Date/	/End Date:/			
	Time event will start to form:AM/PM Actual Start time:	_AM/PM Finish Time:AM/PM			
3.	Name and complete address of Organization/Individual organizing the event:				
	Name of Organization, if applicable	-			
	Name (first, middle, and last) of Individual organizing the event	Business phone # ()			
	Street Address				
	City, State, ZIP				
4.	Email Address:	-			
5.	LOCATION OF THE EVENT (Please attach a detailed map or diagram of your event)				
	Name of Business or Owner	Telephone # ()			
	Name (first, middle, and last) of Individual organizing the event	Business phone # ()			
	Street Address				
	City, State, ZIP				
	Will the event be held in a Hobart Park or utilize any park facilities? ☐ Yes ☐ No If Yes, Which park?				
	Have you reserved the park for this purpose? \square Yes \square No If no, please contact the Village Office at (920) 869-3802 to do so immediately.				
	Does the event require streets to be closed? ☐ Yes ☐ No If yes, please indicate which street(s):				

	Will the event be held indoors? ☐ Yes ☐ No If yes, what building?					
	Building Name					
	Street Address					
6.	TELL US ABOUT YOUR EVENT:					
	Will food be prepared and/or served at the event? \square Yes \square No If yes, please contact Brown County Health Department. <i>Approval of this permit requires an approval from the Brown County Health Department.</i>					
	Will you have a band or amplified music? □ Yes □ No If yes, a variance permit may be needed. (The Village of Hobart will be able to provide you additional information on noise and noise ordinances with the Village.)					
	What is the estimated attendance at your event? Number of participantsNumber of Vendors*					
	Number of Vehicles Maximum number of tickets to be sold, if any?					
	Do you require any special parking restrictions? ☐ Yes ☐ No ☐ If yes, please indicates what type, when and where:*Please attach to this application a complete list of sponsors and vendors with contact information for each.					
	Will a tent or any other temporary structures be used during the event? □Yes □No If yes, will the tent be larger than 200 square feet? □Yes □No					
	Will any fireworks or pyrotechnic devices be used during the event? □Yes □No (Please obtain the proper Fireworks Permit from the Village of Hobart office)					
	What toilet facilities will be made available to your participants? □ Indoor at:					
	☐ Outdoor, # of units to be provided:					
	Location(s) of portable restrooms:					
	Will alcoholic beverages be served/sold? □ Yes □ No If yes, please contact the Village Clerk for the regulations and application for a "Special Class B" license.					
	Will your event request the use of a hydrant meter? □ Yes □ No					
7.	SAFETY/SECURITY FOR YOUR EVENT:					
	Do you have the correct level of insurance for your special event? ☐ Yes ☐ No (Review Special Events Ordinance)					
	Who is the designated contact person of your event?					
	Name (first, middle, and last)					
	Street Address					
	City, State, ZIP					

Contact person	telephone number: ()	(Before the eve	nt) () (Day of the event) THIS NUMBER MUST BE PROVIDED				
Other special as	sistance requested:						
I understand the filing of this application does not ensure the issuance of this permit. I also understand that all Special Events sponsors must comply with all applicable village ordinances, traffic rules, park rules, state and county health laws, fire codes and liquor licensing regulations. I further understand that an incomplete application shall be cause for denial of the special event permit.							
The applicant an employees and a activities perfor anyone directly	agents from and against an med as described herein, c	es to indemnify, defend and hold y and all liability, loss, damage, a aused in whole or in part by any any of them or anyone whose ac	harmless the Village of Hobart and it's officer, officials, expenses, costs, including attorney fees arising out of the negligent act or omission of the applicant/organization, its any of them may be liable, except where cause by the sole				
		- a:					
Date		Signature o	f Applicant				
Village of Hoba 2990 S. Pine. The Hobart, WI 541 For Office Use	ree Rd. 55	Name of Event:					
Fire	☐ Approved ☐ Denied	l Reason:	By:				
Inspection	☐ Approved ☐ Denied	l Reason:	By:				
Police	☐ Approved ☐ Denied	l Reason:	_By:				
Public Works	☐ Approved ☐ Denied	l Reason:	By:				

8.