

531 N. Nash Street
P.O. Box 99
Hortonville, WI 54944-0099



Phone: 920-779-6011
Fax: 920-779-6552
www.hortonvillewi.org

VILLAGE OF HORTONVILLE

SPECIAL EVENT PERMIT

Name of Event: _____ Date of Event: _____

Contact person name: _____ Phone: _____

Address: _____

City _____ State _____ Zip _____

Organization or Sponsor _____

Application Fee - \$50.00

Permit Fee \$250.00 upon permit approval, prior to issuance

NOTE: The undersigned individual will be responsible for the conduct of the group and for the condition of the public area. The permit is subject to all municipal codes in addition to all rules governing street right-of-ways. The applicant agrees that during use of the public area, the sponsoring organization will not exclude any person from participation in, deny anyone the benefits of, or otherwise subject anyone to discrimination because of race, color, national origin, or handicap. The applicant agrees to indemnify and save the Village harmless from and against all liabilities, claims, demands, judgments, losses, and all suits of law or in equity, costs, and expenses, including reasonable attorney fees, for injury or death of any person, or damage to any property arising from the holding of such special event.

Applicant Signature

Date

HORTONVILLE SPECIAL EVENT APPLICATION

Applicants please respond to the following questions, so that we can best determine your organizational needs:

- Alcohol sales or consumption:
- Street banner to be erected (separate permit/fee required):
- Hours of operation; include set up/tear down time needed:
- Number of people involved (e.g. participants, entertainment, and vendors):
- Has liability insurance been obtained and proof provided?
- Village resources required/requested:
- Traffic control, road closures, & parking exceptions requested (identify on map):
- Village park event - Site plan to identify boundaries of each of the various uses on the property (games, rides, stages, beverage tents, products, on-site parking, etc.):

HORTONVILLE SPECIAL EVENT APPLICATION

For office use only:

Police Chief

Date

Of Police hours (Approximate): _____

Police resources (Approximate \$): _____

Total cost: _____

Comments: _____

Approved: Yes No

DPW Director

Date

Of DPW hours (Approximate): _____

DPW resources (Approximate \$): _____

Total cost: _____

Comments: _____

Approved: Yes No

Village Administrator

Date

Grand Total cost to Village (labor, resources, etc...): _____

Comments: _____

Approved: Yes No