

**VILLAGE OF WEBSTER  
APPLICATION FOR SPECIAL EVENT PERMIT**

**THIS APPLICATION MUST BE ON FILE IN THE OFFICE OF THE VILLAGE CLERK FOR AT LEAST FIFTEEN (15) DAYS PRIOR TO THE DATE OF THE EVENT.**

Basic Fee: \$15 (Per Event) \_\_\_\_\_ Yearly Fee: \$50 (Bar Owners) \_\_\_\_\_

License # \_\_\_\_\_ Approved \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_

Type(s) of Event(s): \*If you are a yearly applicant you need to document ALL EVENT DATE(s) and TIMES.

\_\_\_\_\_  
\_\_\_\_\_

Date of Event: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (If Bar Owner, please make copies and attach to this permit for additional events. One-time fee will apply.)

Address of Event: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Address (For past 2 years): \_\_\_\_\_

\_\_\_\_\_

Contact Person (during event): \_\_\_\_\_

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

Start Time: \_\_\_\_\_ Finish Time: \_\_\_\_\_

Does the event require streets to be closed? YES NO  
If so, indicate what street(s) \_\_\_\_\_

Does the event require special parking restrictions? YES NO  
If so, indicate street(s) from where to where \_\_\_\_\_

Estimated number of participants \_\_\_\_\_ Vehicles \_\_\_\_\_

Does your organization sponsor other special events? YES NO

If yes, please list event(s) \_\_\_\_\_

If you answer YES to any of the following questions, a copy of this application will be forwarded to the proper Village departments. YOU OR YOUR ORGANIZATION WILL BE RESPONSIBLE FOR SECURING ALL LICENSES AND/OR PERMITS REQUIRED. Your special event license will NOT be approved until all such conditions have been met and fees paid.

Will food be prepared and/or served at the event? YES NO

Will you be having a band or amplified music? YES NO

Will tents or other temporary structures be erected? YES NO

Will tent or temporary structure be larger than 200 feet? YES NO

Will Event be held indoors? YES NO

Will Event be held in a park or utilize any park facilities? YES NO

If yes, explain: \_\_\_\_\_

Describe toilet facilities available to participants' \_\_\_\_\_

Will any of the following services be required?

\_\_\_\_\_ Barricading

\_\_\_\_\_ Cleanup

\_\_\_\_\_ Dumpsters

\_\_\_\_\_ Street Sweeping

Will any fireworks or pyrotechnic devices be used during the event? YES NO

If yes, you will need to obtain a fireworks permit from the Fire Chief and submit a certificate of insurance.

Will alcoholic beverages be served? YES NO

Provide a plan, if any, for policing the area.

Other special assistance requested: \_\_\_\_\_

"I hereby certify that the foregoing facts are true to the best of my knowledge."

\_\_\_\_\_  
Signature/Date

**REASONABLE ACCOMODATIONS FOR PERSONS WITH DISABILITIES WILL BE MADE UPON REQUEST AND IF FEASIBLE**

Fees are Non-Refundable. Submit completed application along with appropriate fees within 15 days of event (approval at Regular Board Meeting before Event) to:

Village of Webster Clerk  
7505 Main Street West  
Webster, WI 54893