

---

## City of Berlin –Special Event Permit Checklist

---

Name of Event: \_\_\_\_\_

18-333 Event on Street/Highway (5k Run/Walk, Car show, Non profit vendor sales event, Business open house etc.)  
Use of City streets, sidewalks, street parking spaces  
Parade (School Homecoming, Memorial Day, Pumpkins on Petunias tractor, Christmas Parade etc.)  
Event on Municipal Parking Lot (Farmers Market, Fox River Days, Pumpkins on Petunias etc.)  
Use of South Capron St Lot, Market Square Lot

- Date application submitted: \_\_\_\_\_
  
- \_\_\_\_\_ COMPLETE APPLICATION Submitted no less than 45 days prior to event if NEW EVENT (45 days time period may be waived if the Event is Recurring)
  
- \_\_\_\_\_ Description of event, sketch of location, or outlined map if needed
  
- \_\_\_\_\_ CERTIFICATE OF LIABILITY INSURANCE (Unless Exempt) In the Amount of \$1,000,000 BODILY, \$500,000 PROPERTY for EACH OCCURRENCE with THE CITY OF BERLIN NAMED AS AN ADDITIONAL INSURER  
  
Expiration date: \_\_\_\_\_  
  
Or
  
- \_\_\_\_\_ EXEMPTION FROM LIABILITY INSURANCE (Religious, charitable, service, fraternal, veterans, school)  
  
Proof of exemption status required YES or NO
  
- \_\_\_\_\_ SIGNED INDEMNIFICATION AGREEMENT (Required for all permits.)
  
- \_\_\_\_\_ NEIGHBORING RESIDENT CONSENT (Not required for parades or 5k runs/walks. Street use requirement – at least 75% of named streets’ residents, municipal parking lot requirement – at least 75% of residents within 200 feet of named lot.)
  
- \_\_\_\_\_ FEE OF TWENTY DOLLARS (\$20.00) Date of payment: \_\_\_\_\_
  
- \_\_\_\_\_ Reviewed by City Attorney (Fax copy to office of New and Recurring – annual or up to 18 months ) \_\_\_\_\_
  
- \_\_\_\_\_ Reviewed by Chief of Police (New only, for recurring give FYI copy) \_\_\_\_\_
  
- \_\_\_\_\_ Reviewed by Street Superintendent (New only, for recurring give FYI copy) \_\_\_\_\_
  
- \_\_\_\_\_ Date of Council Meeting for new approvals: \_\_\_\_\_

NOTES:

**CITY OF BERLIN PERMIT APPLICATION**  
**Special Events on Streets, Highways, and Municipal Parking Lots**

(Provisions of SEC. 18-331 thru SEC.18-337 Municipal Code Apply)

If you need additional space for any answers, attach additional sheets as necessary

\_\_\_\_\_ 18-333 Event On Street/Highway \_\_\_\_\_ 18-333 Parade \_\_\_\_\_ 18-333 Event on Municipal Parking Lot

Applicant's Name: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Applicant's Telephone Number: \_\_\_\_\_ Applicant's DOB/Organized: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Purpose of Application Request: \_\_\_\_\_

If applicant is an organization, provide the name(s), title(s) or position(s), address(es), and telephone number(s) of authorizing official(s) (for corporations, all officers and directors; for LLC's, all members and managers; for partnerships, all partners; for trusts, all trustees):

Name, Title, and Address	Telephone Number
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

If applicant is an organization (corporation, LLC, partnership, trust, etc), provide the name(s), title(s), or position(s), address(es), and telephone number(s) of person(s) responsible for this request:

Name, Title, and Address	Telephone Number
_____	_____
_____	_____
_____	_____

Details of Event: (For extended details, use the back of this form and include drawings of proposed event or route).

What: \_\_\_\_\_

When: \_\_\_\_\_ Start Time and Duration: \_\_\_\_\_

Where: \_\_\_\_\_ If Parade, Assembly Area: \_\_\_\_\_

Estimated number of units (if parade) or persons attending (if other event): \_\_\_\_\_

Does applicant claim exemption from liability insurance as a government agency, religious, fraternal, veterans, charitable, or service organization per Sec. 18-333(b)(2) and or (4). \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, explain: \_\_\_\_\_  
(Also submit any supporting documentation for this claim of exemption)

Applicant or Applicant's Agent's Name Signature: \_\_\_\_\_

Name of Person Signing (please print): \_\_\_\_\_

Title of Person Signing (if applicant is an organization): \_\_\_\_\_

**For Office Use Only Include with Application:**

\_\_\_\_\_ Fee Paid (or) Exempt from fee (governmental procession) \_\_\_\_\_ Yes \_\_\_\_\_ No

\_\_\_\_\_ Neighboring Consent Form (or) \_\_\_\_\_ Not Applicable \_\_\_\_\_ Indemnification Form

\_\_\_\_\_ Liability Insurance (or) \_\_\_\_\_ Applicant is exempt and approved by City Attorney

Reviewed by: \_\_\_\_\_ City Attorney \_\_\_\_\_ Chief of Police \_\_\_\_\_ Street Superintendent

Common Council approval: \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ NA (Recurring)

Recommendation: Conditions for Approval or Reasons for Denial: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



## City of Berlin

P.O. Box 272 108 North Capron Street  
Berlin, WI 54923  
920-361-5400 Phone 920-361-5454 Fax

### Indemnification, Defense, and Hold Harmless Agreement

The undersigned, as an applicant for a permit from the City of Berlin, hereby agrees to indemnify, defend, and hold harmless the City of Berlin and its employees and agents against all claims, liabilities, loss, damages, or expenses against or incurred by the City of Berlin on account of any injury to or death of any person, or any damage to property, caused by or resulting from the activities for which the permit was granted.

Specifically this Agreement applies to:

\_\_\_\_\_  
(Description of Event)










On: \_\_\_\_\_  
(Date(s) of Event)

By: \_\_\_\_\_  
(Name of Applicant)

On Behalf Of: \_\_\_\_\_  
(Name of Organization and Title if applicable)

*If signing on behalf of an organization, you must have authority from the organization to sign an agreement like this. By signing this agreement, you are warranting to the City of Berlin that you have such authority.*

**MAP KEY**

	<b>Schools</b>		<b>Hospital</b>
	<b>Churches</b>		<b>Aquatic Center</b>
	<b>Library</b>		<b>Boat Landings</b>
	<b>City Hall/ Police Station</b>		<b>Parks</b>
	<b>Campground</b>		

