



PUBLIC SAFETY & WELFARE COMMITTEE MEETING AGENDA

WEDNESDAY, NOVEMBER 13, 2024 AT 5:00 PM

ROOM 0041, LOWER LEVEL, MUNICIPAL BUILDING, 106 JONES STREET, WATERTOWN, WI

Virtual Meeting Info: <https://us06web.zoom.us/join> Meeting ID: 543 850 6085 Passcode: license One tap mobile +16469313860

<https://us06web.zoom.us/j/5438506085?pwd=2BzI5YIFWz8CJhn4zgXM1kDcE0mHoL.1>

All public participants' phones will be muted during the meeting except during the public comment period.

1. CALL TO ORDER

2. RECIEVE COMMENTS FROM THE PUBLIC

Each individual who would like to address the Committee will be permitted up to three minutes for their comments

3. APPROVAL OF MINUTES

A. Public Safety and Welfare minutes from October 2, 2024

4. BUSINESS

A. Review and take action: Special Event - CP Holiday Train

B. Review and take action: Special Events - Town Square 10/31 list

5. ADJOURN

Persons requiring other reasonable accommodations for any of the above meetings, may contact the office of the City Clerk at mdunneisen@watertownwi.gov, phone 920-262-4006

A quorum of any City of Watertown Council, Committee, Board, Commission, or other body, may be present at this meeting for observing and gathering of information only

PUBLIC SAFETY & WELFARE COMMITTEE

October 2, 2024

5:00 p.m.

1. CALL TO ORDER

Members Present	Also in Attendance	Citizens Present
<ul style="list-style-type: none"> Dana Davis, Chair Brad Blanke Steve Board Eric Schmid 	<ul style="list-style-type: none"> Andrew Beyer Stacy Winkleman Chief David Brower Chief Tanya Reynen 	<ul style="list-style-type: none"> Andy Tessman Ian Pilak (virtual)

2. RECEIVE COMMENTS FROM THE PUBLIC

Each individual who would like to address the Committee will be permitted up to three minutes for their comments

There were no public comments.

3. APPROVAL OF MINUTES

- A. Public Safety minutes from September 4, 2024
 - Public Safety Meeting Notes 9.4.24.pdf (0.02 MB)

- B. Public Safety minutes from September 17, 2024
 - Public Safety Meeting Notes 9.17.24.pdf (0.02 MB)

MOTION: Motion to approve both sets of minutes by Board, second by Schmid and unanimously approved.

4. BUSINESS

- A. Discuss and take possible action: Ordinance 303.13 Third Party Inspection and Reporting System
 - MEMO to PSW Committee for ordinance change.pdf (0.56 MB)
 - Ordinance 303 13 Third Party Inspections.pdf (0.15 MB)
 - Master Services Agreement.pdf (0.26 MB)
 - Master Services Agreement Exhibit A Statement of Work (SOW).pdf (0.49 MB)

Chief Reynen explained how a Third Party Inspection Reporting System could streamline the inspection process, provide better updates and reporting and help the Fire Department tremendously. The 2% dues received from the state each year are contingent upon the Fire Dept. meeting fire inspection requirements. This third-party reporting system will help the Fire Department meet those goals in a more efficient and cost-effective way. The committee reviewed the proposed ordinance.

MOTION: Davis made a motion to approve the proposed ordinance with the (8) removed from 303-13 (c) and (d). Motion seconded by Blanke. Motion passed unanimously.

- B. Review and take action: Do Not Block Driveway sign on the west end of Willow Street by the boat launch.
 - Oct 2 Meeting Upload.pdf (2.23 MB)

MOTION: Blanke moved to approve the “Do Not Block Driveway” sign on the west end of Willow Street by the boat launch. Motion seconded by Board and approved unanimously.

- C. Review and take action: amend Section 500-3(B), Stop Intersections
- [2024.0924_AMB_Signage at Western Ave and First St.pdf](#) (1.18 MB)
 - [Western First Street Marking Signing Plan Sheet.pdf](#) (0.52 MB)
 - [ORD Amend Section 500-3\(B\) Stop Intersections of City of Watertown General Ordinances - DRAFT.pdf](#) (0.03 MB)

MOTION: Board made a motion to amend Section 500-3(B), Stop Intersections. Davis seconded and the motion passed unanimously.

- D. Review and take action: Special Event - Watertown Christmas Parade
- [2024-23 Memo re PSW SPECIAL EVENTS.pdf](#) (0.05 MB)
 - [2024-33 Application.pdf](#) (0.19 MB)
 - [2024-33 Map.pdf](#) (0.04 MB)

MOTION: Motion to approve by Board, seconded by Blanke and approved unanimously.

- E. Review and take action: Special Event - Moose Lodge Trunk or Treat
- [Memo re PSW -Trunk or Treat Moose Lodge.pdf](#) (0.05 MB)
 - [2024-29 Application.pdf](#) (0.21 MB)
 - [2024-29 Map 2.pdf](#) (0.08 MB)

MOTION: Motion to approve by Blanke, seconded by Board and approved unanimously.

- F. Review and take action: Special Event - Run Turkey Run
- [Memo re PSW SPECIAL EVENT-Run Turkey Run.pdf](#) (0.05 MB)
 - [2024-28 Application.pdf](#) (0.38 MB)
 - [2024-28 Map.pdf](#) (0.10 MB)
 - [2024-28 Park Reservation Form.pdf](#) (0.12 MB)

MOTION: Motion to approve by Schmid, seconded by Davis and approved unanimously.

5. ADJOURN

There being no additional business to come before the Committee, a motion was made by Schmid to adjourn and seconded by Blanke. The motion carried unanimously.



Office of the
Clerk
106 Jones Street
PO Box 477
Watertown, WI 53094-0477
(920) 262-4006

November 13, 2024

TO: Members of the Public Safety & Welfare Committee

The following application has been made for a Special Event Permit:

CP Holiday Train from Park and Rec.

There are no estimated extraordinary charges from any city departments as this is city sponsored

Respectfully Submitted,

Megan Dunneisen, City Clerk



SPECIAL EVENT PERMIT APPLICATION

New Event Repeat Event Date Received: _____ Date of Event: _____ Fee Amount: _____

APPLICANT INFORMATION:

Name of person, entity, or organization holding the special event:

Parks, Recreation and Forestry

Address: Street, City, State, Zip

514 S. 1st Street, Watertown, WI 53094

Phone: 920-262-8080

Email: sjuhl@watertownwi.gov

Website:

Non-profit Group

For Profit

Other, please describe:

Nonprofit Tax-Exempt Number

501(c)3, if applicable (include photocopy)

Is this the applicant's 1st special event application for the calendar year? Yes No

Wisconsin Seller Permit Number: Sales Tax, if applicable (include photocopy)

If the named applicant is not required to hold a Wisconsin Seller's Permit pursuant to s. 77.54 (7m), Wis. Stats., check this box

EVENT INFORMATION:

Event Name: CP Holiday Train 2024

Event Date(s): December 8, 2024

Event Location Address include parking locations and streets to be used if applicable:

Brandt Quirk Baseball Lot

A DETAILED map is required upon submittal of application, is it included? Yes No

Is the event located in a City Park? Yes No

If yes, do you have a park reservation? Yes No Park name: Brandt Quirk

Is the event closing of a Street/Alley/Right-of-Way/Parking Lot? Yes No

Will you need City Services for your event? Yes No for Parks Crew

Is the event on private property? Yes No If yes, do you have written permission? Yes No

Is the event a city sponsored parade or celebrating a Federal Holiday? Yes No

If yes, please explain:

Event start/end time: 7:50pm -8:35pm

Event set up/take down times: 5:30pm-9:30pm

Total Attendance: # 500+

Alcohol consumed, sold, or served? Yes No

Vendors? Yes No

Event Description (purpose, activity, who can participate, etc. Attach additional sheet if necessary.)

Annual CP Holiday Train will be stopping at Brandt Quirk. Food Pantry collection will be done at entrance to park by Boy Scouts. Parks employees will be selling hot chocolate and light up toys, same as past years. We are looking at getting a bus company to assist with transportation from WHS.

Will your event be selling food? Yes No If yes, please explain: (Type of food and sold by who)

Pre-package cookies and brownies. Packets of Hot Cocoa.

MAIN EVENT ORGANIZER – PRIMARY CONTACT IF DIFFERENT FROM APPLICANT:

Contact Name: First, Middle, Last

Address: Street, City, State, Zip

Phone:

Email:

OFFICE USE ONLY:

APPROVED ON:

PERMIT #

Indemnification and Hold Harmless
(Read carefully before signing!)

Section 4, Item A.

Indemnification: By signing below, I acknowledge that for good and valuable consideration, I (applicant), on behalf of myself and the organization, if applicable, agree to indemnify, defend and hold harmless the City of Watertown and its officers, officials, employees and agents from and against any and all liability, loss, damage, expenses and costs, including attorney fees, arising out of the activities performed as described herein, caused in whole or in part by any negligent act of omission of the applicant/organization, anyone directly or indirectly employed by any of them or anyone whose acts may be liable, except where caused by the sole negligence or willful misconduct of the City.

Certification: By signing below, I certify that I am at least 18 years of age and that I have reviewed and understand the City's Insurance Requirements and Ordinance for Special Events. My signature further confirms: (i) I understand the filing of this application does not ensure the issuance of a Special Event Permit; (ii) The special event application fee is non-refundable (iii) I will be responsible for ensuring the event and event participants comply with all applicable City ordinances, traffic rules, park rules, state health laws, fire codes, alcohol licensing regulations, and any other applicable laws, rules and regulation; (iv) Fees for park facilities, food vendor permits, fireworks permit, any other applicable City of Watertown permits or licenses, other municipal services and equipment, etc., are in addition to the Special Event Permit application fee; (v) I am authorized to apply for this Special Event Permit on behalf of the organization holding the event (if applicable). (vi) The information contained in this application is true and correct to the best of my knowledge. I understand that intentionally providing false or misleading information in this application will be the basis for denial/revocation of the permit and may lead to civil or criminal penalties.

If there are any changes to the Special Event after submittal of the application, I agree to notify the City of Watertown of these changes for review.

Name of Applicant: Stephanie Juhl Signature: *Stephanie Juhl* Date: 10/16/24

SPECIAL EVENT APPLICATION FEE & EXTRAORDINARY SERVICES

Application fee is due when the application is submitted and is nonrefundable if the event is cancelled. If the event is rescheduled for a date within 6-months, the application fee would apply to the rescheduled date; if the event is rescheduled for a date later than 6-months of the original event date the application fee is nonrefundable.

*\$50.00 - first application for the year of the applicant if submitted 45 days or more prior to event date.
\$35.00 - each subsequent application of the applicant if submitted 45 days or more prior to event date.
(The fee is doubled if submitted less than 45 days prior to event date)*

Extraordinary Services - measurable financial costs which are above and beyond the normal levels of public health and safety services on a nonevent day. See the special event fee schedule for more information. Extraordinary services do not include the provision of police protection against hostile individuals targeting the event's message or intentions.

The applicant is liable for and must pay to the city clerk the actual cost of all extraordinary services provided by the city and is required to pay 50% of the estimated extraordinary services prior to the special event with the remaining amount billed at the conclusion of the event. Sales tax will be added if applicable. By signing the applicant acknowledges that they have been made aware of this information.

Signature of Applicant: _____ Date: _____

Submit Special Event Application and fee (cash or check) in person or by mail to:

City Clerk 106 Jones Street
PO Box 477
Watertown, WI 53094
Questions: 920-262-4010 or email cityclerk@watertownwi.gov

Personal Data Sheet

Section 4, Item A.

All Event Organizers must complete all the information and must indicate if they have been convicted of any of the following within the last ten (10) years: a felony, a misdemeanor, a statutory violation punishable by forfeiture or a county or municipal ordinance violation. If none, write "none". This information is strictly confidential and is shared only with the Watertown Police Department for investigation checks. FALSIFICATION AND/OR MISREPRESENTATION IS GROUNDS FOR DENIAL OF APPLICATION.

MAIN EVENT ORGANIZER Please PRINT		
Name: First, Full Middle, Last (List any previous names)		1 st submittal of year? Yes <input type="checkbox"/> No <input type="checkbox"/>
Home Address: Street, City, State, Zip		Driver's License #: (List State if not WI)
Phone Number:	Email:	Date of Birth: (mm/dd/yyyy)
Violations:		
I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.		
Event Organizer Signature _____		Date _____
Police Chief _____		Approved Denied
ADDITIONAL EVENT ORGANIZER Please PRINT		
Name: First, Full Middle, Last (List any previous names)		1 st submittal of year? Yes <input type="checkbox"/> No <input type="checkbox"/>
Home Address: Street, City, State, Zip		Driver's License #: (List State if not WI)
Phone Number:	Email:	Date of Birth: (mm/dd/yyyy)
Violations:		
I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.		
Event Organizer Signature _____		Date _____
Police Chief _____		Approved Denied
ADDITIONAL EVENT ORGANIZER Please PRINT		
Name: First, Full Middle, Last (List any previous names)		1 st submittal of year? Yes <input type="checkbox"/> No <input type="checkbox"/>
Home Address: Street, City, State, Zip		Driver's License #: (List State if not WI)
Phone Number:	Email:	Date of Birth: (mm/dd/yyyy)
Violations:		
I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.		
Event Organizer Signature _____		Date _____
Police Chief _____		Approved Denied

ADDITIONAL EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number: **Email:** **Date of Birth:** (mm/dd/yyyy)

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied

ADDITIONAL EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number: **Email:** **Date of Birth:** (mm/dd/yyyy)

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied

ADDITIONAL EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number: **Email:** **Date of Birth:** (mm/dd/yyyy)

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied

POLICY AND GENERAL PERMIT FOR AMPLIFIED SOUND
IN THE PARK SYSTEM

By Ordinance, public amplification is not allowed in City Parks except by permission from the Parks Director. Permission for amplification does not exempt a group from the City of Watertown Ordinance noise restrictions. Please be considerate of park neighbors and other park users.

AMPLIFIED SOUND IN PARKS PERMIT

- 1. Groups wishing to have amplified music or sound devices in any city park or recreation area must first receive permission from the Director of Parks, Recreation and Forestry.
- 2. **No outside amplified sound is allowed before the hour of 8:00 am or after the hours of 10 pm.** Low volume music from non-amplified, personal sound devices which is restricted to the immediate picnic area is exempt from this requirement. Failure to comply with obtaining the Permit or violating conditions of this Permit may result in citations and fines.
- 3. **There is \$30.00 charge for an Amplified Sound Permit.**

EVENT INFORMATION:

Contact Person: Stephanie Juhl Phone # During Event: 920-342-5853
 Type of Event: CP Holiday Train Name of Park: Brandt Quirk
 Date of Event: December 8, 2024 Time of Event: 6-9pm

TIME AMPLIFIED SOUND ALLOWED FROM 6pm **TO** 9pm

TYPE OF AMPLIFIED SOUND:

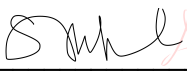
BAND NAME OF PERFORMING GROUP CP Railroad

NUMBER IN GROUP _____ DJ SOUND SYSTEM PA SYSTEM KARAOKE

OTHER _____

It is understood that the person in charge will control the noise level and keep the volume at a level which will not disrupt other activities within the park, or adjacent residential areas, and at a level which will not be loud and offensive. **Failure to comply with this requirement may result in citations and fines.**

The person permitted use of amplified sound agrees to provide full cooperation with Park and Police Department personnel should it be determined that the volume must be lowered or the music terminated.

 Digitally signed by Stephanie Juhl
 Date: 2024.10.07 15:34:00 -05'00' 10/17/24
 Signature of Applicant Date

10/17/24
 Departments Authorizing Signature Date

Copies: 1 - Client 1 - Office 1 - Police Department

EXCERPTS FROM APPLICABLE CITY ORDINANCES:

Section 4, Item A.

11.166 ADVERTISING, ASSEMBLAGES, ENTERTAINMENT. (3) Amplified Music Permit. No public address systems or sound amplification devices shall be used in any public park or public recreation area within the City of Watertown except as permitted by this Section. The Director may issue permits in accordance with this Section. A permit shall not exempt the holder from the provisions of Section 11.120 regulating loud and unnecessary noise.

(b) The Director may limit the hours of operation and location within any given park within the City of any such system or devices so as to insure the benefit of such system or devices to the group seeking its use and to minimize any unreasonable interference with the peace and enjoyment of other uses of the park or recreation area and those residing adjacent to such park. Only the hours of operation and location of such system or equipment may be regulated by this section. The hours of amplified sound shall be between the hours of 8:00 a.m. and 11:00 p.m., with the express provision that **private parties shall be designated closer to 9:00 p.m.** as a termination time, whereas more **community-oriented events sponsored by fraternal or non-profit organizations, religious or veterans organizations that have a wider community-based appeal shall be designated closer to 11:00 p.m.** as a termination time. The Director shall consider the applications in the order they are received on a "first come, first issued" basis.

11.120 LOUD AND UNNECESSARY NOISE. (1) No person shall make or cause to be made any noise disturbance within the City of such volume or nature as to annoy or disturb any other reasonable person of normal sensitivities. This section prohibits, but is not limited to, the following noise disturbances.

PROPERTY MANAGEMENT AGREEMENT BETWEEN THE CITY OF WATERTOWN AND THE CITY OF WATERTOWN REDEVELOPMENT AUTHORITY

This Property Management Agreement (this "Agreement") is made this 20th day of April, 2022 by and between the City of Watertown, a Wisconsin municipal corporation (hereinafter, "City") and, the City of Watertown Redevelopment Authority, a separate public body corporate and politic created pursuant to Wis. Stat. § 66.1333(3) (hereinafter, "RDA") (collectively, "Parties");

The purpose of this Agreement is to memorialize the mutual understanding among and between the constituent executive membership of the City and the RDA relative to the transfer of ownership of parcel number 291-0815-0421-114 more particularly located as described under Exhibit A attached hereto;

RECITALS

WHEREAS, the City and the RDA have worked together to build a town square on the Property; and,

WHEREAS, the RDA, wishes to see its investment in the community thrive and utilized to its full potential; and,

WHEREAS, the RDA has raised Three Hundred Fifty Thousand Dollars (\$350,000.00) to fund programming and operations with the intention of the City hiring an individual with the primary function of managing the Property; and,

WHEREAS, the RDA has arranged for the installation of a history exhibit as further described in Exhibit B attached hereto; and,

WHEREAS, the City believes this investment and opportunity is in the best interest of the City and is in line with the plans for the City development and,

NOW, THEREFORE, the City and RDA hereby acknowledge and accept the following:

**Article 1
RDA'S OBLIGATIONS**

Section 1.1 **Transfer of Parcel.** That the RDA will transfer ownership of the Property to the City of Watertown.

Section 1.2 **Funding Account.** That the RDA will make a one-time transfer of Three Hundred Fifty Thousand Dollars (\$350,000.00) to the City of Watertown to be placed into a restricted account (Future Fund/Town Square Account) for the benefit of the Property or programs that take place on the Property.

**Article 2
CITY'S OBLIGATIONS**

Section 2.1 **Park Management.** The City will hire a full-time staff person to be placed within the Park, Recreation and Forestry Department. The primary responsibility for this full-time staff person shall be to coordinate programming and operations within the Property as well as to

seek sponsorships for such events. 3

Section 2.2 **Scheduled Events.** The City shall permit individuals wishing to host a Series of Events on the Property to apply for reserved days by one application submitted on or before October 31 of each year for all days the event is to be held the following year. The City shall approve the series before January 1 of the following year. Any applications received for events after October 31 of the year before the event may apply for a special event permit for a day not previously reserved under Watertown Ordinance § 428-7 or any subsequent special event process adopted by the City.

Section 2.3 **Alcohol Permitted.** The City will permit the sale of alcohol on the parcel during events approved for such purpose and subject to compliance with all other laws concerning the sale and consumption of alcohol.

Section 2.4 **History Exhibit.** The City will permit the installation of a history of Watertown Exhibit as substantially detailed in Exhibit B. However, such Exhibit shall be viewed solely as approved government speech and as such the City does retain its rights to veto or prohibit any portion of the Exhibit which the Council finds inappropriate from being installed.

Section 2.5 **Use of Future Fund/Town Square Account.** The City shall only use the funds placed in the Future Fund/ Town Square Account to cover the following approved expenses:
a. Salary and other administrative costs of the full-time staff member who coordinates programming and operations,
b. Any other administrative or staff costs associated with management and operations of the Property,
c. Programming costs for special events at the Property,
d. Supplies for events at the Property,
e. Maintenance of the Property.

Section 2.6 **Event Revenue and Donations.** The City shall add to the Future Fund any donations it receives designated to be applied to the Future Fund, or revenue from City Sponsored Special Events hosted at the Town Square.

**ARTICLE 3
MISCELLANEOUS**

Section 3.1. **Notices and Demands.** Except as otherwise expressly provided in this Agreement, a notice, demand or other communication under this Agreement by any party to any other shall be sufficiently given or delivered if it is dispatched by registered or certified mail, postage prepaid, return receipt requested, or delivered personally, and

FOR THE CITY:

City of Watertown
Office of the Finance Director/Treasurer
106 Jones Street
Watertown, WI 53094
Attention: Mark Stevens
mstevens@cityofwatertown.org

With a copy to:
City of Watertown
City Attorney's Office
106 Jones Street

Watertown, WI 53094
Attention: Attorney Steven T. Chesebro
schesebro@cityofwatertown.org

FOR THE RDA:

City of Watertown Redevelopment Authority
Attention: Robert J. Marchant, Chairperson

Section 3.2. **No Third-Party Beneficiaries.** This Agreement is made solely for the benefit of the Parties hereto and their permitted assignees, and no other Party shall acquire or have any rights under this Agreement or by virtue of this Agreement.

Section 3.3. **Force Majeure.** As used herein, the term "force Majeure" shall mean any accident, breakage, war, insurrection, civil commotion, riot, act of terror, act of God or the elements, governmental action (except for governmental action by the City with respect to obligations of the City under this Agreement) alteration, strike or lockout, picketing (whether legal or illegal), inability of a Party or its agents or contractors, as applicable, to obtain fuel or supplies, unusual weather conditions, or any other cause or causes beyond the reasonable control of such Party or its agents or contractors, as applicable. No Party to this Agreement shall be in default hereunder for so long as such party or its agents and contractors, if applicable, are prevented from performing any of its obligations hereunder due to a Force Majeure occurrence.

Section 3.4. **Law Governing.** The laws of the State of Wisconsin shall govern this Agreement. In the event of a dispute involving this Agreement, the Parties agree that venue shall be in Jefferson County, Wisconsin, Circuit Court.

Section 3.5. **Execution in Multiple Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed an original and all of which together shall constitute one and the same instrument.

Section 3.6. **Amendment.** This Agreement may be rescinded, modified or amended, in whole or in part, by mutual agreement of the Parties hereto, their successors and/or assigns, in writing signed by all Parties.

Section 3.7. **Severability of Provisions.** If any provision of this Agreement shall be held or deemed to be inoperative or unenforceable as applied in any particular case in any jurisdiction because it conflicts with any other provision or provisions of this Agreement or any constitution or statute or rule of public policy, or for any other reason, then such circumstance shall not have the effect of rendering the provision in question inoperative or unenforceable in any other case or circumstance, or of rendering any other provision or provisions herein invalid, inoperative, or unenforceable to any extent whatever. To the maximum extent possible, this Agreement shall be construed in a manner consistent with the powers of the City, including, but not limited to, their powers under the Tax Increment Law, § 66.1105, Wis. Stats., and the Blight Elimination and Slum Clearance Act, Wis. Stats. § 66.1333, to achieve its intended purpose. Reference is made to Chapter 105, Laws of 1975 § 4, and to Wis. Stat. § 66.1333(17), which provide that the Tax Increment Law and the Blight Elimination and Slum Clearance Act should be construed liberally to effectuate their purposes.

Section 3.8. **Time of Essence.** Time is of the essence as to all dates and time periods set forth in this Agreement.

Section 3.9. **Reservation of Rights.** Nothing in this Agreement shall be construed to be a waiver or modification of the governmental immunities or notice requirements imposed by Wis.

Stat. § 893.80 or any other law.

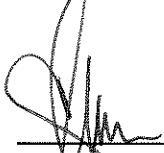
Section 3.10. **Construction.** The Parties acknowledge and represent that this Agreement has been the subject of negotiation by all Parties and that all Parties together shall be construed to be the drafter hereof and this Agreement shall not be construed against any Party individually as drafter.

Section 3.11. **Authority.** The individuals executing this Agreement on behalf of the RDA warrant and represent that they are duly authorized to bind the RDA to this Agreement. RDA warrants and represents that the execution of this Agreement is not prohibited by the RDA's articles of incorporation, by-laws, operating agreement, or other internal operating orders, or by any applicable law, regulation or court order. RDA shall provide proof upon request.

Section 3.12. **Termination.** Notwithstanding any other provision of this agreement, either Party may terminate this Agreement, without cause or penalty, by giving the other party sixty (60) days advance written notice of its intent to terminate this Agreement on or after April 30, 2026.

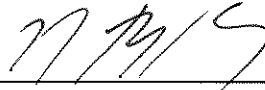
This Agreement between the City of Watertown and the City of Watertown Redevelopment Authority is acknowledged and accepted as of the date first written above:

CITY OF WATERTOWN



Emily McFarland
Mayor

CITY OF WATERTOWN
REDEVELOPMENT AUTHORITY



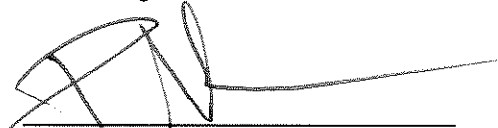
Nate Salas
Chairperson

Countersigned:



Megan Dunneisen
City Clerk

Countersigned:



Ryan Wagner
Vice Chairperson

City sponsored special events 2025

Jan 19: snowman building contest
Jan date TBD: Tractor Beer Crawl
March 15: Lucky Leprechaun
April 12: Scavenger Hunt (snow date 4/26)
May 31: Birthday Event (Sat 6-9)
June 12: Thursday Night Market (5-8)
June 16: Monday Food Trucks Mon
June 21: Concert Series (Sat 6-9)
June 22: Paint Class (rain date 6/29)
July 10: Thursday Night Market (5-8)
July 13: Kids Fest (Sun 11-3)
July 18 & 19: Concert Series (Sat 6-9)
July 21: Food Truck Monday
July 26: Event TBD - Open Mic?
July 27: Paint Class (rain date 8/3)
Aug 18: Food Truck Monday
Aug 23: Watertown Brigade Band/ Bucky Badger Band ?
Aug 24: Paint Class (Rain Date 9/7)
Aug 28: Thursday Night Market (5-8)
Sept 6: Concert Series (Sat 6-9)
Sept 14: Packers Party Tentative
Sept 15: Food Truck Monday
Sept 20: Badger Part Tentative
Sept 21: Paint Class
Sept 25: Thursday Night Market (5-8)
Sept 27: Badger Party Tentative
Sept 28: Packers Party Tentative
Oct 4: Badger Party Tentative
Oct 5: Packers Party Tentative
Oct 6: Food Truck Monday
Oct 12: Fall Craft Class
Oct 16: Thursday Night Market (5-8)
Oct 18: Halloween Party (Fri 6-9) w/ DJ
Oct 19: Packer Party Tentative
Oct 25: Bentzin Boo Bash (Sat 12-3)
Oct TBD: Homecoming meet & greet players
Nov 15: Tree Lighting (sat 5:30)
Dec 6: Jingle Bell on the Rock (Sat 12-7)



SPECIAL EVENT PERMIT APPLICATION

New Event Repeat Event Date Received: _____ Date of Event: 2025 Fee Amount: _____

APPLICANT INFORMATION:

Name of person, entity, or organization holding the special event:
 City of Watertown Parks, Recreation & Forestry

Address: Street, City, State, Zip
 514 S. 1st Street, Watertown, WI 53094

Phone: 920-262-8080 **Email:** sjuhl@watertownwi.gov **Website:**

Non-profit Group For Profit Other, please describe: City of Watertown **Nonprofit Tax-Exempt Number:** 501(c)3, if applicable (include photocopy)

Is this the applicant's 1st special event application for the calendar year? Yes No

Wisconsin Seller Permit Number: Sales Tax, if applicable (include photocopy)
 If the named applicant is not required to hold a Wisconsin Seller's Permit pursuant to s. 77.54 (7m), Wis. Stats., check this box

EVENT INFORMATION:

Event Name: Non-Series Events **Event Date(s):** 2025

Event Location Address include parking locations and streets to be used if applicable:
 1 W. Main Street - Bentzin Family Town Square

A DETAILED map is required upon submittal of application, is it included? Yes No Bulk Permit

Is the event located in a City Park? Yes No
If yes, do you have a park reservation? Yes No **Park name:** Bentzin Family Town Square

Is the event closing of a Street/Alley/Right-of-Way/Parking Lot? Yes No

Will you need City Services for your event? Yes No for _____

Is the event on private property? Yes No **If yes, do you have written permission?** Yes No

Is the event a city sponsored parade or celebrating a Federal Holiday? Yes No
If yes, please explain:

Event start/end time: Times will vary per event **Event set up/take down times:**

Total Attendance: # 25-300 **Alcohol consumed, sold, or served?** Yes No **Vendors?** Yes No

Event Description (purpose, activity, who can participate, etc. Attach additional sheet if necessary.)
 See List: Badger and Packer Games, Paint and Craft Classes, Lucky Leprechaun, Scavenger Hunt, Tractor Beer Crawl, Open Mic Night, Homecoming, Halloween Bash. Some will include alcohol sales and some will not. Permit will be filled out accordingly at time of event.

Will your event be selling food? Yes No **If yes, please explain:** (Type of food and sold by who)
 Varies per event

MAIN EVENT ORGANIZER – PRIMARY CONTACT IF DIFFERENT FROM APPLICANT:

Contact Name: First, Middle, Last

Address: Street, City, State, Zip **Phone:** **Email:**

OFFICE USE ONLY:

APPROVED ON: **PERMIT #**

Indemnification and Hold Harmless
(Read carefully before signing!)

Section 4, Item B.

Indemnification: By signing below, I acknowledge that for good and valuable consideration, I (applicant), on behalf of myself and the organization, if applicable, agree to indemnify, defend and hold harmless the City of Watertown and its officers, officials, employees and agents from and against any and all liability, loss, damage, expenses and costs, including attorney fees, arising out of the activities performed as described herein, caused in whole or in part by any negligent act of omission of the applicant/organization, anyone directly or indirectly employed by any of them or anyone whose acts may be liable, except where caused by the sole negligence or willful misconduct of the City.

Certification: By signing below, I certify that I am at least 18 years of age and that I have reviewed and understand the City's Insurance Requirements and Ordinance for Special Events. My signature further confirms: (i) I understand the filing of this application does not ensure the issuance of a Special Event Permit; (ii) The special event application fee is non-refundable (iii) I will be responsible for ensuring the event and event participants comply with all applicable City ordinances, traffic rules, park rules, state health laws, fire codes, alcohol licensing regulations, and any other applicable laws, rules and regulation; (iv) Fees for park facilities, food vendor permits, fireworks permit, any other applicable City of Watertown permits or licenses, other municipal services and equipment, etc., are in addition to the Special Event Permit application fee; (v) I am authorized to apply for this Special Event Permit on behalf of the organization holding the event (if applicable). (vi) The information contained in this application is true and correct to the best of my knowledge. I understand that intentionally providing false or misleading information in this application will be the basis for denial/revocation of the permit and may lead to civil or criminal penalties.

If there are any changes to the Special Event after submittal of the application, I agree to notify the City of Watertown of these changes for review.

Name of Applicant: Stephanie Juhl Signature: Stephanie Juhl Date: 10/7/24

SPECIAL EVENT APPLICATION FEE & EXTRAORDINARY SERVICES

Application fee is due when the application is submitted and is nonrefundable if the event is cancelled. If the event is rescheduled for a date within 6-months, the application fee would apply to the rescheduled date; if the event is rescheduled for a date later than 6-months of the original event date the application fee is nonrefundable.

*\$50.00 - first application for the year of the applicant if submitted 45 days or more prior to event date.
\$35.00 - each subsequent application of the applicant if submitted 45 days or more prior to event date.
(The fee is doubled if submitted less than 45 days prior to event date)*

Extraordinary Services - measurable financial costs which are above and beyond the normal levels of public health and safety services on a nonevent day. See the special event fee schedule for more information. Extraordinary services do not include the provision of police protection against hostile individuals targeting the event's message or intentions.

The applicant is liable for and must pay to the city clerk the actual cost of all extraordinary services provided by the city and is required to pay 50% of the estimated extraordinary services prior to the special event with the remaining amount billed at the conclusion of the event. Sales tax will be added if applicable. By signing the applicant acknowledges that they have been made aware of this information.

Signature of Applicant: Stephanie Juhl Date: 10-7-24

Submit Special Event Application and fee (cash or check) in person or by mail to:

City Clerk 106 Jones Street
PO Box 477
Watertown, WI 53094
Questions: 920-262-4010 or email cityclerk@watertownwi.gov

Personal Data Sheet

Section 4, Item B.

*All Event Organizers must complete all the information and must indicate if they have been convicted of any of the following within the last ten (10) years: a felony, a misdemeanor, a statutory violation punishable by forfeiture or a county or municipal ordinance violation. If none, write "none". This information is strictly confidential and is shared only with the Watertown Police Department for investigation checks. **FALSIFICATION AND/OR MISREPRESENTATION IS GROUNDS FOR DENIAL OF APPLICATION.***

MAIN EVENT ORGANIZER Please PRINT		
Name: First, Full Middle, Last (List any previous names)		1 st submittal of year? Yes <input type="checkbox"/> No <input type="checkbox"/>
Home Address: Street, City, State, Zip		Driver's License #: (List State if not WI)
Phone Number:	Email:	Date of Birth: (mm/dd/yyyy)
Violations:		
I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.		
Event Organizer Signature _____		Date _____
Police Chief _____		Approved Denied
ADDITIONAL EVENT ORGANIZER Please PRINT		
Name: First, Full Middle, Last (List any previous names)		1 st submittal of year? Yes <input type="checkbox"/> No <input type="checkbox"/>
Home Address: Street, City, State, Zip		Driver's License #: (List State if not WI)
Phone Number:	Email:	Date of Birth: (mm/dd/yyyy)
Violations:		
I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.		
Event Organizer Signature _____		Date _____
Police Chief _____		Approved Denied
ADDITIONAL EVENT ORGANIZER Please PRINT		
Name: First, Full Middle, Last (List any previous names)		1 st submittal of year? Yes <input type="checkbox"/> No <input type="checkbox"/>
Home Address: Street, City, State, Zip		Driver's License #: (List State if not WI)
Phone Number:	Email:	Date of Birth: (mm/dd/yyyy)
Violations:		
I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.		
Event Organizer Signature _____		Date _____
Police Chief _____		Approved Denied

ADDITIONAL EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number: **Email:** **Date of Birth:** (mm/dd/yyyy)

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied

ADDITIONAL EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number: **Email:** **Date of Birth:** (mm/dd/yyyy)

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied

ADDITIONAL EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number: **Email:** **Date of Birth:** (mm/dd/yyyy)

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied



SPECIAL EVENT PERMIT APPLICATION

New Event Repeat Event Date Received: _____ Date of Event: 2025 Fee Amount: _____

APPLICANT INFORMATION:

Name of person, entity, or organization holding the special event:
 City of Watertown Parks, Recreation & Forestry

Address: Street, City, State, Zip
 514 S. 1st Street, Watertown, WI 53094

Phone: 920-262-8080 **Email:** sjuhl@watertownwi.gov **Website:**

Non-profit Group For Profit Other, please describe: City of Watertown **Nonprofit Tax-Exempt Number:** 501(c)3, if applicable (include photocopy)

Is this the applicant's 1st special event application for the calendar year? Yes No

Wisconsin Seller Permit Number: Sales Tax, if applicable (include photocopy)
 If the named applicant is not required to hold a Wisconsin Seller's Permit pursuant to s. 77.54 (7m), Wis. Stats., check this box

EVENT INFORMATION:

Event Name: Special Holiday & Repeat Events **Event Date(s):** 2025

Event Location Address include parking locations and streets to be used if applicable:
 1 W. Main Street - Bentzin Family Town Square

A DETAILED map is required upon submittal of application, is it included? Yes No Bulk Permit

Is the event located in a City Park? Yes No
If yes, do you have a park reservation? Yes No **Park name:** Bentzin Family Town Square

Is the event closing of a Street/Alley/Right-of-Way/Parking Lot? Yes No

Will you need City Services for your event? Yes No for _____

Is the event on private property? Yes No **If yes, do you have written permission?** Yes No

Is the event a city sponsored parade or celebrating a Federal Holiday? Yes No
If yes, please explain:

Event start/end time: Times will vary per event **Event set up/take down times:**

Total Attendance: # 25-300 **Alcohol consumed, sold, or served?** Yes No **Vendors?** Yes No

Event Description (purpose, activity, who can participate, etc. Attach additional sheet if necessary.)
 See List: Sunday Bands, Kids Fest, Boo Bash, Tree Lighting, Jingle Bell on the Rock. Permit for any alcohol will be filled out accordingly at time of event.

Will your event be selling food? Yes No **If yes, please explain:** (Type of food and sold by who)
 Varies per event

MAIN EVENT ORGANIZER – PRIMARY CONTACT IF DIFFERENT FROM APPLICANT:

Contact Name: First, Middle, Last

Address: Street, City, State, Zip **Phone:** **Email:**

OFFICE USE ONLY:

APPROVED ON: **PERMIT #**

Indemnification and Hold Harmless
(Read carefully before signing!)

Section 4, Item B.

Indemnification: By signing below, I acknowledge that for good and valuable consideration, I (applicant), on behalf of myself and the organization, if applicable, agree to indemnify, defend and hold harmless the City of Watertown and its officers, officials, employees and agents from and against any and all liability, loss, damage, expenses and costs, including attorney fees, arising out of the activities performed as described herein, caused in whole or in part by any negligent act of omission of the applicant/organization, anyone directly or indirectly employed by any of them or anyone whose acts may be liable, except where caused by the sole negligence or willful misconduct of the City.

Certification: By signing below, I certify that I am at least 18 years of age and that I have reviewed and understand the City's Insurance Requirements and Ordinance for Special Events. My signature further confirms: (i) I understand the filing of this application does not ensure the issuance of a Special Event Permit; (ii) The special event application fee is non-refundable (iii) I will be responsible for ensuring the event and event participants comply with all applicable City ordinances, traffic rules, park rules, state health laws, fire codes, alcohol licensing regulations, and any other applicable laws, rules and regulation; (iv) Fees for park facilities, food vendor permits, fireworks permit, any other applicable City of Watertown permits or licenses, other municipal services and equipment, etc., are in addition to the Special Event Permit application fee; (v) I am authorized to apply for this Special Event Permit on behalf of the organization holding the event (if applicable). (vi) The information contained in this application is true and correct to the best of my knowledge. I understand that intentionally providing false or misleading information in this application will be the basis for denial/revocation of the permit and may lead to civil or criminal penalties.

If there are any changes to the Special Event after submittal of the application, I agree to notify the City of Watertown of these changes for review.

Name of Applicant: Stephanie Juhl Signature: Stephanie Juhl Date: 10/7/24

SPECIAL EVENT APPLICATION FEE & EXTRAORDINARY SERVICES

Application fee is due when the application is submitted and is nonrefundable if the event is cancelled. If the event is rescheduled for a date within 6-months, the application fee would apply to the rescheduled date; if the event is rescheduled for a date later than 6-months of the original event date the application fee is nonrefundable.

*\$50.00 - first application for the year of the applicant if submitted 45 days or more prior to event date.
\$35.00 - each subsequent application of the applicant if submitted 45 days or more prior to event date.
(The fee is doubled if submitted less than 45 days prior to event date)*

Extraordinary Services - measurable financial costs which are above and beyond the normal levels of public health and safety services on a nonevent day. See the special event fee schedule for more information. Extraordinary services do not include the provision of police protection against hostile individuals targeting the event's message or intentions.

The applicant is liable for and must pay to the city clerk the actual cost of all extraordinary services provided by the city and is required to pay 50% of the estimated extraordinary services prior to the special event with the remaining amount billed at the conclusion of the event. Sales tax will be added if applicable. By signing the applicant acknowledges that they have been made aware of this information.

Signature of Applicant: Stephanie Juhl Date: 10-7-24

Submit Special Event Application and fee (cash or check) in person or by mail to:

City Clerk 106 Jones Street
PO Box 477
Watertown, WI 53094
Questions: 920-262-4010 or email cityclerk@watertownwi.gov

Personal Data Sheet

Section 4, Item B.

*All Event Organizers must complete all the information and must indicate if they have been convicted of any of the following within the last ten (10) years: a felony, a misdemeanor, a statutory violation punishable by forfeiture or a county or municipal ordinance violation. If none, write "none". This information is strictly confidential and is shared only with the Watertown Police Department for investigation checks. **FALSIFICATION AND/OR MISREPRESENTATION IS GROUNDS FOR DENIAL OF APPLICATION.***

MAIN EVENT ORGANIZER Please PRINT		
Name: First, Full Middle, Last (List any previous names)		1 st submittal of year? Yes <input type="checkbox"/> No <input type="checkbox"/>
Home Address: Street, City, State, Zip		Driver's License #: (List State if not WI)
Phone Number:	Email:	Date of Birth: (mm/dd/yyyy)
Violations:		
I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.		
Event Organizer Signature _____		Date _____
Police Chief _____		Approved Denied
ADDITIONAL EVENT ORGANIZER Please PRINT		
Name: First, Full Middle, Last (List any previous names)		1 st submittal of year? Yes <input type="checkbox"/> No <input type="checkbox"/>
Home Address: Street, City, State, Zip		Driver's License #: (List State if not WI)
Phone Number:	Email:	Date of Birth: (mm/dd/yyyy)
Violations:		
I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.		
Event Organizer Signature _____		Date _____
Police Chief _____		Approved Denied
ADDITIONAL EVENT ORGANIZER Please PRINT		
Name: First, Full Middle, Last (List any previous names)		1 st submittal of year? Yes <input type="checkbox"/> No <input type="checkbox"/>
Home Address: Street, City, State, Zip		Driver's License #: (List State if not WI)
Phone Number:	Email:	Date of Birth: (mm/dd/yyyy)
Violations:		
I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.		
Event Organizer Signature _____		Date _____
Police Chief _____		Approved Denied

ADDITIONAL EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number: **Email:** **Date of Birth:** (mm/dd/yyyy)

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied

ADDITIONAL EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number: **Email:** **Date of Birth:** (mm/dd/yyyy)

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied

ADDITIONAL EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number: **Email:** **Date of Birth:** (mm/dd/yyyy)

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied



SPECIAL EVENT PERMIT APPLICATION

New Event Repeat Event Date Received: _____ Date of Event: 2025 Fee Amount: _____

APPLICANT INFORMATION:

Name of person, entity, or organization holding the special event:
 City of Watertown Parks, Recreation & Forestry

Address: Street, City, State, Zip
 514 S. 1st Street, Watertown, WI 53094

Phone: 920-262-8080 **Email:** sjuhl@watertownwi.gov **Website:**

Non-profit Group For Profit Other, please describe: City of Watertown **Nonprofit Tax-Exempt Number:** 501(c)3, if applicable (include photocopy)

Is this the applicant's 1st special event application for the calendar year? Yes No

Wisconsin Seller Permit Number: Sales Tax, if applicable (include photocopy)
 If the named applicant is not required to hold a Wisconsin Seller's Permit pursuant to s. 77.54 (7m), Wis. Stats., check this box

EVENT INFORMATION:

Event Name: Thursday Night Market Series **Event Date(s):** 2025

Event Location Address include parking locations and streets to be used if applicable:
 1 W. Main Street - Bentzin Family Town Square

A DETAILED map is required upon submittal of application, is it included? Yes No Bulk Permit

Is the event located in a City Park? Yes No
If yes, do you have a park reservation? Yes No **Park name:** Bentzin Family Town Square

Is the event closing of a Street/Alley/Right-of-Way/Parking Lot? Yes No

Will you need City Services for your event? Yes No for _____

Is the event on private property? Yes No **If yes, do you have written permission?** Yes No

Is the event a city sponsored parade or celebrating a Federal Holiday? Yes No
If yes, please explain:

Event start/end time: 5pm-8pm **Event set up/take down times:** Noon-9pm

Total Attendance: # 250 **Alcohol consumed, sold, or served?** Yes No **Vendors?** Yes No

Event Description (purpose, activity, who can participate, etc. Attach additional sheet if necessary.)
 Thursday Night Market Series 2025 - Open to the public. Possible beer, wine, non-alcohol drinks and food served. Small entertainment - Music, possible craft and 30-40 vendors selling gifts and produce.

Will your event be selling food? Yes No **If yes, please explain:** (Type of food and sold by who)

MAIN EVENT ORGANIZER – PRIMARY CONTACT IF DIFFERENT FROM APPLICANT:

Contact Name: First, Middle, Last

Address: Street, City, State, Zip **Phone:** **Email:**

OFFICE USE ONLY:

APPROVED ON: **PERMIT #**

Indemnification and Hold Harmless
(Read carefully before signing!)

Section 4, Item B.

Indemnification: By signing below, I acknowledge that for good and valuable consideration, I (applicant), on behalf of myself and the organization, if applicable, agree to indemnify, defend and hold harmless the City of Watertown and its officers, officials, employees and agents from and against any and all liability, loss, damage, expenses and costs, including attorney fees, arising out of the activities performed as described herein, caused in whole or in part by any negligent act of omission of the applicant/organization, anyone directly or indirectly employed by any of them or anyone whose acts may be liable, except where caused by the sole negligence or willful misconduct of the City.

Certification: By signing below, I certify that I am at least 18 years of age and that I have reviewed and understand the City's Insurance Requirements and Ordinance for Special Events. My signature further confirms: (i) I understand the filing of this application does not ensure the issuance of a Special Event Permit; (ii) The special event application fee is non-refundable (iii) I will be responsible for ensuring the event and event participants comply with all applicable City ordinances, traffic rules, park rules, state health laws, fire codes, alcohol licensing regulations, and any other applicable laws, rules and regulation; (iv) Fees for park facilities, food vendor permits, fireworks permit, any other applicable City of Watertown permits or licenses, other municipal services and equipment, etc., are in addition to the Special Event Permit application fee; (v) I am authorized to apply for this Special Event Permit on behalf of the organization holding the event (if applicable). (vi) The information contained in this application is true and correct to the best of my knowledge. I understand that intentionally providing false or misleading information in this application will be the basis for denial/revocation of the permit and may lead to civil or criminal penalties.

If there are any changes to the Special Event after submittal of the application, I agree to notify the City of Watertown of these changes for review.

Name of Applicant: Stephanie Juhl Signature: Stephanie Juhl Date: 10/7/24

SPECIAL EVENT APPLICATION FEE & EXTRAORDINARY SERVICES

Application fee is due when the application is submitted and is nonrefundable if the event is cancelled. If the event is rescheduled for a date within 6-months, the application fee would apply to the rescheduled date; if the event is rescheduled for a date later than 6-months of the original event date the application fee is nonrefundable.

*\$50.00 - first application for the year of the applicant if submitted 45 days or more prior to event date.
\$35.00 - each subsequent application of the applicant if submitted 45 days or more prior to event date.
(The fee is doubled if submitted less than 45 days prior to event date)*

Extraordinary Services - measurable financial costs which are above and beyond the normal levels of public health and safety services on a nonevent day. See the special event fee schedule for more information. Extraordinary services do not include the provision of police protection against hostile individuals targeting the event's message or intentions.

The applicant is liable for and must pay to the city clerk the actual cost of all extraordinary services provided by the city and is required to pay 50% of the estimated extraordinary services prior to the special event with the remaining amount billed at the conclusion of the event. Sales tax will be added if applicable. By signing the applicant acknowledges that they have been made aware of this information.

Signature of Applicant: Stephanie Juhl Date: 10-7-24

Submit Special Event Application and fee (cash or check) in person or by mail to:

City Clerk 106 Jones Street
PO Box 477
Watertown, WI 53094
Questions: 920-262-4010 or email cityclerk@watertownwi.gov

Personal Data Sheet

Section 4, Item B.

*All Event Organizers must complete all the information and must indicate if they have been convicted of any of the following within the last ten (10) years: a felony, a misdemeanor, a statutory violation punishable by forfeiture or a county or municipal ordinance violation. If none, write "none". This information is strictly confidential and is shared only with the Watertown Police Department for investigation checks. **FALSIFICATION AND/OR MISREPRESENTATION IS GROUNDS FOR DENIAL OF APPLICATION.***

MAIN EVENT ORGANIZER Please <u>PRINT</u>		
Name: First, Full Middle, Last (List any previous names)		1 st submittal of year? Yes <input type="checkbox"/> No <input type="checkbox"/>
Home Address: Street, City, State, Zip		Driver's License #: (List State if not WI)
Phone Number:	Email:	Date of Birth: (mm/dd/yyyy)
Violations:		
I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.		
Event Organizer Signature _____		Date _____
Police Chief _____		Approved Denied
ADDITIONAL EVENT ORGANIZER Please <u>PRINT</u>		
Name: First, Full Middle, Last (List any previous names)		1 st submittal of year? Yes <input type="checkbox"/> No <input type="checkbox"/>
Home Address: Street, City, State, Zip		Driver's License #: (List State if not WI)
Phone Number:	Email:	Date of Birth: (mm/dd/yyyy)
Violations:		
I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.		
Event Organizer Signature _____		Date _____
Police Chief _____		Approved Denied
ADDITIONAL EVENT ORGANIZER Please <u>PRINT</u>		
Name: First, Full Middle, Last (List any previous names)		1 st submittal of year? Yes <input type="checkbox"/> No <input type="checkbox"/>
Home Address: Street, City, State, Zip		Driver's License #: (List State if not WI)
Phone Number:	Email:	Date of Birth: (mm/dd/yyyy)
Violations:		
I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.		
Event Organizer Signature _____		Date _____
Police Chief _____		Approved Denied

ADDITIONAL EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number: **Email:** **Date of Birth:** (mm/dd/yyyy)

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied

ADDITIONAL EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number: **Email:** **Date of Birth:** (mm/dd/yyyy)

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied

ADDITIONAL EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number: **Email:** **Date of Birth:** (mm/dd/yyyy)

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied



SPECIAL EVENT PERMIT APPLICATION

New Event Repeat Event Date Received: _____ Date of Event: 2025 Fee Amount: _____

APPLICANT INFORMATION:

Name of person, entity, or organization holding the special event:
 City of Watertown Parks, Recreation & Forestry

Address: Street, City, State, Zip
 514 S. 1st Street, Watertown, WI 53094

Phone: 920-262-8080 **Email:** sjuhl@watertownwi.gov **Website:**

Non-profit Group For Profit Other, please describe: City of Watertown **Nonprofit Tax-Exempt Number:** 501(c)3, if applicable (include photocopy)

Is this the applicant's 1st special event application for the calendar year? Yes No

Wisconsin Seller Permit Number: Sales Tax, if applicable (include photocopy)
 If the named applicant is not required to hold a Wisconsin Seller's Permit pursuant to s. 77.54 (7m), Wis. Stats., check this box

EVENT INFORMATION:

Event Name: Sounds of Summer Concert Series **Event Date(s):** 2025

Event Location Address include parking locations and streets to be used if applicable:
 1 W. Main Street - Bentzin Family Town Square

A DETAILED map is required upon submittal of application, is it included? Yes No Bulk Permit

Is the event located in a City Park? Yes No
If yes, do you have a park reservation? Yes No **Park name:** Bentzin Family Town Square

Is the event closing of a Street/Alley/Right-of-Way/Parking Lot? Yes No

Will you need City Services for your event? Yes No for _____

Is the event on private property? Yes No **If yes, do you have written permission?** Yes No

Is the event a city sponsored parade or celebrating a Federal Holiday? Yes No
If yes, please explain:

Event start/end time: 5pm-9pm (concert 6-9) **Event set up/take down times:** 2pm-10pm

Total Attendance: # 300 **Alcohol consumed, sold, or served?** Yes No **Vendors?** Yes No

Event Description (purpose, activity, who can participate, etc. Attach additional sheet if necessary.)
 Sounds of Summer Concert Series 2025 - Open to the public. Beer, wine, non-alcohol drinks and food served

Will your event be selling food? Yes No **If yes, please explain:** (Type of food and sold by who)

MAIN EVENT ORGANIZER – PRIMARY CONTACT IF DIFFERENT FROM APPLICANT:

Contact Name: First, Middle, Last

Address: Street, City, State, Zip **Phone:** **Email:**

OFFICE USE ONLY:

APPROVED ON: **PERMIT #**

Indemnification and Hold Harmless
(Read carefully before signing!)

Section 4, Item B.

Indemnification: By signing below, I acknowledge that for good and valuable consideration, I (applicant), on behalf of myself and the organization, if applicable, agree to indemnify, defend and hold harmless the City of Watertown and its officers, officials, employees and agents from and against any and all liability, loss, damage, expenses and costs, including attorney fees, arising out of the activities performed as described herein, caused in whole or in part by any negligent act of omission of the applicant/organization, anyone directly or indirectly employed by any of them or anyone whose acts may be liable, except where caused by the sole negligence or willful misconduct of the City.

Certification: By signing below, I certify that I am at least 18 years of age and that I have reviewed and understand the City's Insurance Requirements and Ordinance for Special Events. My signature further confirms: (i) I understand the filing of this application does not ensure the issuance of a Special Event Permit; (ii) The special event application fee is non-refundable (iii) I will be responsible for ensuring the event and event participants comply with all applicable City ordinances, traffic rules, park rules, state health laws, fire codes, alcohol licensing regulations, and any other applicable laws, rules and regulation; (iv) Fees for park facilities, food vendor permits, fireworks permit, any other applicable City of Watertown permits or licenses, other municipal services and equipment, etc., are in addition to the Special Event Permit application fee; (v) I am authorized to apply for this Special Event Permit on behalf of the organization holding the event (if applicable). (vi) The information contained in this application is true and correct to the best of my knowledge. I understand that intentionally providing false or misleading information in this application will be the basis for denial/revocation of the permit and may lead to civil or criminal penalties.

If there are any changes to the Special Event after submittal of the application, I agree to notify the City of Watertown of these changes for review.

Name of Applicant: Stephanie Juhl Signature: Stephanie Juhl Date: 10/7/24

SPECIAL EVENT APPLICATION FEE & EXTRAORDINARY SERVICES

Application fee is due when the application is submitted and is nonrefundable if the event is cancelled. If the event is rescheduled for a date within 6-months, the application fee would apply to the rescheduled date; if the event is rescheduled for a date later than 6-months of the original event date the application fee is nonrefundable.

*\$50.00 - first application for the year of the applicant if submitted 45 days or more prior to event date.
\$35.00 - each subsequent application of the applicant if submitted 45 days or more prior to event date.
(The fee is doubled if submitted less than 45 days prior to event date)*

Extraordinary Services - measurable financial costs which are above and beyond the normal levels of public health and safety services on a nonevent day. See the special event fee schedule for more information. Extraordinary services do not include the provision of police protection against hostile individuals targeting the event's message or intentions.

The applicant is liable for and must pay to the city clerk the actual cost of all extraordinary services provided by the city and is required to pay 50% of the estimated extraordinary services prior to the special event with the remaining amount billed at the conclusion of the event. Sales tax will be added if applicable. By signing the applicant acknowledges that they have been made aware of this information.

Signature of Applicant: Stephanie Juhl Date: 10-7-24

Submit Special Event Application and fee (cash or check) in person or by mail to:

City Clerk 106 Jones Street
PO Box 477
Watertown, WI 53094
Questions: 920-262-4010 or email cityclerk@watertownwi.gov

Personal Data Sheet

Section 4, Item B.

*All Event Organizers must complete all the information and must indicate if they have been convicted of any of the following within the last ten (10) years: a felony, a misdemeanor, a statutory violation punishable by forfeiture or a county or municipal ordinance violation. If none, write "none". This information is strictly confidential and is shared only with the Watertown Police Department for investigation checks. **FALSIFICATION AND/OR MISREPRESENTATION IS GROUNDS FOR DENIAL OF APPLICATION.***

MAIN EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number:	Email:	Date of Birth: (mm/dd/yyyy)
----------------------	---------------	------------------------------------

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied

ADDITIONAL EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number:	Email:	Date of Birth: (mm/dd/yyyy)
----------------------	---------------	------------------------------------

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied

ADDITIONAL EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number:	Email:	Date of Birth: (mm/dd/yyyy)
----------------------	---------------	------------------------------------

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied

ADDITIONAL EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number: **Email:** **Date of Birth:** (mm/dd/yyyy)

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied

ADDITIONAL EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number: **Email:** **Date of Birth:** (mm/dd/yyyy)

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied

ADDITIONAL EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number: **Email:** **Date of Birth:** (mm/dd/yyyy)

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied



SPECIAL EVENT PERMIT APPLICATION

New Event Repeat Event Date Received: _____ Date of Event: 2025 Fee Amount: _____

APPLICANT INFORMATION:

Name of person, entity, or organization holding the special event:
 City of Watertown Parks, Recreation & Forestry

Address: Street, City, State, Zip
 514 S. 1st Street, Watertown, WI 53094

Phone: 920-262-8080 **Email:** sjuhl@watertownwi.gov **Website:**

Non-profit Group For Profit Other, please describe: City of Watertown **Nonprofit Tax-Exempt Number:** 501(c)3, if applicable (include photocopy)

Is this the applicant's 1st special event application for the calendar year? Yes No

Wisconsin Seller Permit Number: Sales Tax, if applicable (include photocopy)
 If the named applicant is not required to hold a Wisconsin Seller's Permit pursuant to s. 77.54 (7m), Wis. Stats., check this box

EVENT INFORMATION:

Event Name: Food Truck Monday Series **Event Date(s):** 2025

Event Location Address include parking locations and streets to be used if applicable:
 1 W. Main Street - Bentzin Family Town Square

A DETAILED map is required upon submittal of application, is it included? Yes No Bulk Permit

Is the event located in a City Park? Yes No
If yes, do you have a park reservation? Yes No **Park name:** Bentzin Family Town Square

Is the event closing of a Street/Alley/Right-of-Way/Parking Lot? Yes No

Will you need City Services for your event? Yes No for _____

Is the event on private property? Yes No **If yes, do you have written permission?** Yes No

Is the event a city sponsored parade or celebrating a Federal Holiday? Yes No
If yes, please explain:

Event start/end time: 4-7pm possible some 11-2pm **Event set up/take down times:**

Total Attendance: # 75 **Alcohol consumed, sold, or served?** Yes No **Vendors?** Yes No

Event Description (purpose, activity, who can participate, etc. Attach additional sheet if necessary.)
 Thursday Night Market Series 2025 - Open to the public. Possible beer, wine, non-alcohol drinks and food served. Small entertainment - Music, possible craft and 30-40 vendors selling gifts and produce.

Will your event be selling food? Yes No **If yes, please explain:** (Type of food and sold by who)

MAIN EVENT ORGANIZER – PRIMARY CONTACT IF DIFFERENT FROM APPLICANT:

Contact Name: First, Middle, Last

Address: Street, City, State, Zip **Phone:** **Email:**

OFFICE USE ONLY:

APPROVED ON: **PERMIT #**

Indemnification and Hold Harmless
(Read carefully before signing!)

Section 4, Item B.

Indemnification: By signing below, I acknowledge that for good and valuable consideration, I (applicant), on behalf of myself and the organization, if applicable, agree to indemnify, defend and hold harmless the City of Watertown and its officers, officials, employees and agents from and against any and all liability, loss, damage, expenses and costs, including attorney fees, arising out of the activities performed as described herein, caused in whole or in part by any negligent act of omission of the applicant/organization, anyone directly or indirectly employed by any of them or anyone whose acts may be liable, except where caused by the sole negligence or willful misconduct of the City.

Certification: By signing below, I certify that I am at least 18 years of age and that I have reviewed and understand the City's Insurance Requirements and Ordinance for Special Events. My signature further confirms: (i) I understand the filing of this application does not ensure the issuance of a Special Event Permit; (ii) The special event application fee is non-refundable (iii) I will be responsible for ensuring the event and event participants comply with all applicable City ordinances, traffic rules, park rules, state health laws, fire codes, alcohol licensing regulations, and any other applicable laws, rules and regulation; (iv) Fees for park facilities, food vendor permits, fireworks permit, any other applicable City of Watertown permits or licenses, other municipal services and equipment, etc., are in addition to the Special Event Permit application fee; (v) I am authorized to apply for this Special Event Permit on behalf of the organization holding the event (if applicable). (vi) The information contained in this application is true and correct to the best of my knowledge. I understand that intentionally providing false or misleading information in this application will be the basis for denial/revocation of the permit and may lead to civil or criminal penalties.

If there are any changes to the Special Event after submittal of the application, I agree to notify the City of Watertown of these changes for review.

Name of Applicant: Stephanie Juhl Signature: Stephanie Juhl Date: 10/7/24

SPECIAL EVENT APPLICATION FEE & EXTRAORDINARY SERVICES

Application fee is due when the application is submitted and is nonrefundable if the event is cancelled. If the event is rescheduled for a date within 6-months, the application fee would apply to the rescheduled date; if the event is rescheduled for a date later than 6-months of the original event date the application fee is nonrefundable.

*\$50.00 - first application for the year of the applicant if submitted 45 days or more prior to event date.
\$35.00 - each subsequent application of the applicant if submitted 45 days or more prior to event date.
(The fee is doubled if submitted less than 45 days prior to event date)*

Extraordinary Services - measurable financial costs which are above and beyond the normal levels of public health and safety services on a nonevent day. See the special event fee schedule for more information. Extraordinary services do not include the provision of police protection against hostile individuals targeting the event's message or intentions.

The applicant is liable for and must pay to the city clerk the actual cost of all extraordinary services provided by the city and is required to pay 50% of the estimated extraordinary services prior to the special event with the remaining amount billed at the conclusion of the event. Sales tax will be added if applicable. By signing the applicant acknowledges that they have been made aware of this information.

Signature of Applicant: Stephanie Juhl Date: 10-7-24

Submit Special Event Application and fee (cash or check) in person or by mail to:

City Clerk 106 Jones Street
PO Box 477
Watertown, WI 53094
Questions: 920-262-4010 or email cityclerk@watertownwi.gov

Personal Data Sheet

Section 4, Item B.

*All Event Organizers must complete all the information and must indicate if they have been convicted of any of the following within the last ten (10) years: a felony, a misdemeanor, a statutory violation punishable by forfeiture or a county or municipal ordinance violation. If none, write "none". This information is strictly confidential and is shared only with the Watertown Police Department for investigation checks. **FALSIFICATION AND/OR MISREPRESENTATION IS GROUNDS FOR DENIAL OF APPLICATION.***

MAIN EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number: **Email:** **Date of Birth:** (mm/dd/yyyy)

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied

ADDITIONAL EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number: **Email:** **Date of Birth:** (mm/dd/yyyy)

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied

ADDITIONAL EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number: **Email:** **Date of Birth:** (mm/dd/yyyy)

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied

ADDITIONAL EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number: **Email:** **Date of Birth:** (mm/dd/yyyy)

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied

ADDITIONAL EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number: **Email:** **Date of Birth:** (mm/dd/yyyy)

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied

ADDITIONAL EVENT ORGANIZER Please PRINT

Name: First, Full Middle, Last (List any previous names) 1st submittal of year?
Yes No

Home Address: Street, City, State, Zip **Driver's License #:** (List State if not WI)

Phone Number: **Email:** **Date of Birth:** (mm/dd/yyyy)

Violations:

I, the undersigned, affirm that I made complete and true answers to each question, and understand my record will become a part of this application. I understand that I am subject to an investigation check by the City of Watertown Police Department. I give permission to make my juvenile records available for this application.

Event Organizer Signature _____ Date _____

Police Chief _____ Approved Denied

Megan Dunneisen

Subject: FW: Bulk SE permits for BFTS (10/31 list)

From: Stephanie Juhl SJuhl@watertownwi.gov
Sent: Thursday, October 17, 2024 12:37 PM
To: Megan Dunneisen MDunneisen@watertownwi.gov; Kristine Butteris KButteris@watertownwi.gov; Becky Wegner BWegner@watertownwi.gov
Cc: Kristine Zuehlke KZuehlke@watertownwi.gov
Subject: RE: Bulk SE permits for BFTS (10/31 list)

Not right now. It is in each of the permits. I will go thru each one later on and add it. PSW just needs the permits and the list provided I thought at this time.

Thank you! 😊

Steph Juhl
Programming Event Coordinator
City of Watertown

Cell (920) 342-5853
Office (920) 262-8080 x4395



From: Megan Dunneisen <MDunneisen@watertownwi.gov>
Sent: Thursday, October 17, 2024 12:03 PM
To: Stephanie Juhl <SJuhl@watertownwi.gov>; Kristine Butteris <KButteris@watertownwi.gov>; Becky Wegner <BWegner@watertownwi.gov>
Cc: Kristine Zuehlke <KZuehlke@watertownwi.gov>
Subject: RE: Bulk SE permits for BFTS (10/31 list)

None of the other information is complete?

From: Stephanie Juhl <SJuhl@watertownwi.gov>
Sent: Thursday, October 17, 2024 11:51 AM
To: Megan Dunneisen <MDunneisen@watertownwi.gov>; Kristine Butteris <KButteris@watertownwi.gov>; Becky Wegner <BWegner@watertownwi.gov>
Cc: Kristine Zuehlke <KZuehlke@watertownwi.gov>
Subject: RE: Bulk SE permits for BFTS (10/31 list)

I have the events listed in there now. Details for each event will be updated later. The details are on each of the permits I submitted as well. I did not attach permits to the events in the spreadsheet, just listed the events and the dates.

Thank you! 😊

Steph Juhl

Programming Event Coordinator
City of Watertown

Cell (920) 342-5853
Office (920) 262-8080 x4395



From: Megan Dunneisen <MDunneisen@watertownwi.gov>
Sent: Thursday, October 17, 2024 11:22 AM
To: Kristine Butteris <KButteris@watertownwi.gov>; Stephanie Juhl <SJuhl@watertownwi.gov>; Becky Wegner <BWegner@watertownwi.gov>
Cc: Kristine Zuehlke <KZuehlke@watertownwi.gov>
Subject: RE: Bulk SE permits for BFTS (10/31 list)

I don't recall us putting the events into the spreadsheet last year. If they could be added to the spreadsheet I created that would be helpful since your department will have more information than we do. This will help us make sure we have all the required information.

Thank you,

Megan

From: Kristine Butteris <KButteris@watertownwi.gov>
Sent: Thursday, October 17, 2024 8:22 AM
To: Megan Dunneisen <MDunneisen@watertownwi.gov>; Stephanie Juhl <SJuhl@watertownwi.gov>; Becky Wegner <BWegner@watertownwi.gov>
Cc: Kristine Zuehlke <KZuehlke@watertownwi.gov>
Subject: Re: Bulk SE permits for BFTS (10/31 list)

Good morning and Happy Friday Eve!

It would work best if we move forward with BFTS events as we did with the 2024 10/31 list? We sent the list to the City Clerk's office where you entered our events into your city spreadsheet off of the information we provided. This then allowed all other departments to approve our events as they would do for all other events.

Would you like us to add the list to the PSW agenda or will you be doing that?

Thank you for all your help with this,

Kristine

From: Megan Dunneisen <MDunneisen@watertownwi.gov>
Sent: Wednesday, October 16, 2024 4:56 PM
To: Stephanie Juhl <SJuhl@watertownwi.gov>; Becky Wegner <BWegner@watertownwi.gov>
Cc: Kristine Butteris <KButteris@watertownwi.gov>; Kristine Zuehlke <KZuehlke@watertownwi.gov>
Subject: RE: Bulk SE permits for BFTS (10/31 list)

I created a spreadsheet in the special events permits – 2025- Town Square called 2025 10-31 list. Could you add event information there as well to help us make sure we have everything we need.

Section 4, Item B.

Thank you,

Megan

From: Stephanie Juhl <SJuhl@watertownwi.gov>
Sent: Wednesday, October 16, 2024 3:37 PM
To: Megan Dunneisen <MDunneisen@watertownwi.gov>; Becky Wegner <BWegner@watertownwi.gov>
Cc: Kristine Butteris <KButteris@watertownwi.gov>; Kristine Zuehlke <KZuehlke@watertownwi.gov>
Subject: Bulk SE permits for BFTS (10/31 list)
Importance: High

Attached are the permits for each grouping of events for 2025. Dana had asked that we group in this fashion. Please advise if you need anything else to accompany this.

Will you be forwarding to PSW?

Thank you! 😊

Steph Juhl

Programming Event Coordinator
City of Watertown

Cell (920) 342-5853
Office (920) 262-8080 x4395



From: Stephanie Juhl
Sent: Monday, October 7, 2024 3:21 PM
To: Kristine Butteris <KButteris@watertownwi.gov>
Subject: 10/31 List Approval
Importance: High

Kristine,
Please look over the packet for the 10/31 list and see if everything lines up correctly.

Thank you! 😊

Steph Juhl

Programming Event Coordinator
City of Watertown

Cell (920) 342-5853
Office (920) 262-8080 x4395

From: Stephanie Juhl <SJuhl@watertownwi.gov>
Sent: Thursday, October 17, 2024 1:47 PM
To: Megan Dunneisen <MDunneisen@watertownwi.gov>; Becky Wegner <BWegner@watertownwi.gov>
Cc: Kristine Butteris <KButteris@watertownwi.gov>; Kristine Zuehlke <KZuehlke@watertownwi.gov>
Subject: RE: Bulk SE permits for BFTS (10/31 list)

Yes, that is correct.

Thank you! 😊

Steph Juhl

Programming Event Coordinator
City of Watertown

Cell (920) 342-5853
Office (920) 262-8080 x4395

From: Megan Dunneisen <MDunneisen@watertownwi.gov>
Sent: Thursday, October 17, 2024 1:44 PM
To: Stephanie Juhl <SJuhl@watertownwi.gov>; Becky Wegner <BWegner@watertownwi.gov>
Cc: Kristine Butteris <KButteris@watertownwi.gov>; Kristine Zuehlke <KZuehlke@watertownwi.gov>
Subject: RE: Bulk SE permits for BFTS (10/31 list)

Are all of these events city sponsored? Sorry if I already asked that questions.

From: Stephanie Juhl <SJuhl@watertownwi.gov>
Sent: Wednesday, October 16, 2024 3:37 PM
To: Megan Dunneisen <MDunneisen@watertownwi.gov>; Becky Wegner <BWegner@watertownwi.gov>
Cc: Kristine Butteris <KButteris@watertownwi.gov>; Kristine Zuehlke <KZuehlke@watertownwi.gov>
Subject: Bulk SE permits for BFTS (10/31 list)
Importance: High

Attached are the permits for each grouping of events for 2025. Dana had asked that we group in this fashion. Please advise if you need anything else to accompany this.

Will you be forwarding to PSW?

Thank you! 😊

Steph Juhl

Programming Event Coordinator

City of Watertown

Section 4, Item B.

Cell (920) 342-5853
Office (920) 262-8080 x4395



From: Stephanie Juhl
Sent: Monday, October 7, 2024 3:21 PM
To: Kristine Butteris <KButteris@watertownwi.gov>
Subject: 10/31 List Approval
Importance: High

Kristine,
Please look over the packet for the 10/31 list and see if everything lines up correctly.

Thank you! 😊

Steph Juhl
Programming Event Coordinator
City of Watertown

Cell (920) 342-5853
Office (920) 262-8080 x4395

