

SPECIAL EVENT PERMIT CITY OF ANN ARBOR

COMMUNITY SERVICES 100 North Fifth Avenue Ann Arbor, MI 48104 Phone: (734) 994-2712 Fax: (734) 994-8460

Septemberfest at Kempf House

September 7, 2008

Event Contact: Allison Reaves, President 2600 Geddes Ave, Ann Arbor, MI 48104 Home 734-222-4161 Cell 214-236-4470 areaves@aol.com

APPROVED

Approved by: J Barber

This permit is approved subject to the comments and conditions below for the date(s), time(s), purpose(s) and location(s) described in the attached Application. Street closings (if any) are approved per the attached Council Resolution.

Fire Review:	Gates must be unlocked during eve	ent.
D.#		Approved by: K. Chamberlain 05/28/08
<u>Police Review:</u> placed around f	Approved as described in permit. acility with volunteers monitoring.	Ingress/egress to be continually monitored and fencing
		Approved by: Sgt B Hill
Parks & Rec Cu	stomer Service: Approved.	
On Halling		Approved by: J. Black
Solid Waste:	Ok.	
Transportation		Approved by: T. McMurtrie 05/28/08
Transportation:	Approved.	
0 145		Approved by: J. Brink 05/03/08
Special Events C	oordinator Review: Approved subje	ect to above comments.

6-6-08



PLEASE RETURN TO:
Community Services Permit Desk
City of Ann Arbor – 6th Floor, City Hall
100 N Fifth Avenue, PO Box 8647
Ann Arbor, MI 48107-8647
Phone: (734) 994-2674
Fax: (734) 994-8460



Date Received:
(Please apply at least 60 days prior to event)
nsurance Expires On:

<u>NOTE</u>: If the event is in a business area, the appropriate Merchant Association must be notified. Some Special Events will require City Council approval.

APPLICATION FOR PERMIT FOR NON-COMPETITIVE/SPECIAL EVENT

(Permit Required for More Than 25 Participants Using City Streets

	OR More Than 50 Participants Using City Parks or Sidewalks)
1.	Name and Type of Event: SEDTEM DERFEST AT KEMPT HOUSE KEMPF HOUSE CENTER FOR LOCAL HISTORY
2.	Date and Time of Event: 5Ept 7, 7608 4:60 pm Setup Time 2 pm
	Event Start Time 4:00 pm Event End Time 7:00 pm Cleanup Time I hour
3.	Date and Time of Street Closings (if applicable)
4.	Name of Applicant/Position with Organization: Allison REAVES PRESIDENT
	Address of Applicant: 2600 GEDDER AUE AZ State MI Zip 48104
	Phone No(s): 734 227 4161 Home 214 236 4470 0011
	Fax No Email: AREAUESQ AOL, COM
5.	Contact Person (if other than applicant):SAME
	Address of Contact: State Zip
	Phone No(s):
	Fax No Email:
6.	Name of any sponsors other than applicant: Kempt House CENTENTOR MUSEUM
	3125. DIVISION AZ 48104
7.	Event Web Page: www. Kempthousemuseum.org
8.	Estimated Number of Participants: 80 Is there a limit on the number of participants? Yes No
9.	Deadline for Entry: 550+ 7 2008
10.	Do you plan to use City sidewalks? Yes No If yes, attach a description and map showing desired route to be taken.
11.	Do you plan to use City streets? Yes No If yes, attach a description and map showing desired route to be taken.
12.	Identify plans for protecting participants from vehicle traffic: FENCED GORCEN
3.	Name and date of previous events staged by applicants in Ann Arbor streets, parks or sidewalks:
4.	Number of marshals available to assist Police with traffic related to the event:
5.	Do you need electrical service? Yes No V

16.	Do you need water service? Yes \(\) No \(\)
17.	Will you be selling food? Yes \[No \[Food 15 \inchia karded 1/1 4/6k & 1/2 \]
18.	Will you be selling food? Yes \(\) No \(\) Food is included in ticket price \(\) Will you be selling or serving alcoholic beverages? Yes \(\) No \(\) BEER is included in price
19.	Will you require a temporary liquor license for your event? Yes No
20.	Will this event be generating significant additional refuse? Yes D No D If yes, attach plans for handling refuse.
21.	Will any part of the event (including staging) take place in a City park? Yes No I If yes, name of park: **Empt House Museum (areder)
22.	The following <u>MUST</u> be attached to this Application:
	A detailed map showing the event location, streets to be closed, and intersections where traffic must be stopped.
	The proposed announcement and application form for the event.
	An insurance certificate (if required) indicating coverage complying with the Administrator's regulations. (See attached Special Event Insurance Requirements)
arise out	licant hereby applies for a Non-Competitive/Special Event permit for the event described above and on the attachment(s). The t agrees to hold harmless, indemnify and defend the City of Ann Arbor, its officers and employees from any liability that may of the event. The applicant agrees to comply with all City ordinances and regulations in connection with the event and to pay for its direct costs in connection with the staging of the event.
Applican	t Signature: Muson Deaves Date: At April 08

