

APPLICATION FOR A MASS GATHERING PERMIT
Town of Oxford
Marquette County, Wisconsin

A. For each person or persons requesting the permit, please state:

Full Name	Mailing Address	Telephone Number

If more space is needed, please provide full name, mailing address and telephone number on the back of this sheet.

B. For each person acting as a sponsor of the mass gathering, please state:

Full Name	Mailing Address	Telephone Number

If more space is needed, please provide full name, mailing address and telephone number on the back of this sheet.

C. For each person acting as chairperson, or otherwise responsible for the conduct of the mass gathering, please state:

Full Name	Mailing Address	Telephone Number

If more space is needed, please provide full name, mailing address and telephone number on the back of this sheet.

D. Please state the purpose of the mass gathering: _____

Estimated number of attendees: _____

E. Please state the date(s) of the anticipated mass gathering, and the hours the mass gathering will commence and terminate on each day:

Date	Commencement Time	Termination Time

F. Please provide the following information on the toilet facilities to be provided for use during the mass gathering:

Number	Type	Location
	<input type="checkbox"/> Flush <input type="checkbox"/> Portable Chemical	
	<input type="checkbox"/> Flush <input type="checkbox"/> Portable Chemical	
	<input type="checkbox"/> Flush <input type="checkbox"/> Portable Chemical	

G. For each concessionaire or vendor who will do business at the mass gathering, please state:

Full Name	Mailing Address	Telephone Number (if available)

If more space is needed, please provide full name, mailing address and telephone number on the back of this sheet.

H. Will live music be provided at the mass gathering? Yes No
 Will recorded music be provided at the mass gathering: Yes No

I. Will alcoholic beverages be sold at the mass gathering? Yes No

J. Please state the number and the type of refuse collection containers that will be available at the mass gathering: _____

K. On the following lines please explain the availability of adequate lawful parking within the immediate area of the mass gathering (**PLEASE NOTE:** Parking on Town roads adjacent to the area is strictly prohibited): _____

L. Please explain the arrangements made for the presence of security guards at the area of the mass gathering: _____

M. Please attach a site plan to this Application showing the location of fencing and points of ingress to and egress from the mass gathering.

N. Please attach four copies of white background prints showing a map drawn to scale, including the following:

1. The legal description of the site.
2. The location of the site relative to the nearest state highway or interstate highway;
3. The location of the automobile parking spaces and of all other areas to be used for purposes incidental to the outdoor mass gathering;
4. All interior access ways;
5. The location and detail plans of all buildings and structures on the site or to be erected on the site, including any bandstands, stages or other facilities for performers or speakers;
6. The location of any loudspeakers; and
7. The location of all toilet, medical, drinking and other facilities and refuse containers.

O. On the lines below, please provide a statement explaining the applicant's legal interest in the mass gathering site, and submit evidence of that interest by a deed, lease, or other document verifying said interest.

Dated this _____ day of _____, 200_____.

PLEASE NOTE: This Application must be signed on the appropriate page and in the presence of a Notary Public for the State of Wisconsin. Please read the following language carefully and sign on the correct page.

I. INDIVIDUAL APPLICANT(S):

STATE OF WISCONSIN)
) ss.
_____ COUNTY)

I, and each of us (if more than one) hereby state under oath that I have completed the above and foregoing Application, and that the information and attachments provided in said Application are true and correct to the best of my knowledge.

Signature of Applicant #1

Print Name of Applicant #1

Signature of Applicant #2

Print Name of Applicant #2

Signature of Applicant #3

Print Name of Applicant #3

Signature of Applicant #4

Print Name of Applicant #4

Signature of Applicant #5

Print Name of Applicant #5

Signature of Applicant #6

Print Name of Applicant #6

Signature of Applicant #7

Print Name of Applicant #7

Signature of Applicant #8

Print Name of Applicant #8

Personally came before me this _____ day of _____, 200_____, the above named Applicants, known to me to be the persons who executed the above Application and acknowledged the same.

Signature of Notary Public

Print Name of Notary Public

My Commission (is permanent) expires _____

II. CORPORATE APPLICANT:

STATE OF WISCONSIN)
) ss.
_____ COUNTY)

We are the Officers of _____, a Wisconsin Corporation, and each of us hereby state under oath that we have completed the above and foregoing Application, and that the information and attachments provided in said Application are true and correct to the best of my knowledge.

Signature of President

Print Name of President

Signature of Vice-President

Print Name of Vice-President

Signature of Secretary

Print Name Secretary

Signature of Treasurer

Print Name of Treasurer

Signature of Other Officer #1

Print Name & Title of Other Officer #1

Signature of Other Officer #2

Print Name & Title of Other Officer #2

Personally came before me this _____ day of _____, 200____, the above named Officers of said Corporation, known to me to be the persons who executed the above Application and acknowledged the same.

Signature of Notary Public

Print Name of Notary Public

My Commission (is permanent) expires _____

