

Our intention is to have in-person meetings going forward. For the time being, we will hold the City Committee Meetings, Plan Commission, Council and most others at the Community Room at 933 Michigan Avenue. This in-person location will meet the legal requirement for our open meetings.

We will have a virtual option available, but the technology for the hybrid style meeting may not be reliable all of the time.

**CITY OF STEVENS POINT
PUBLIC POLICY AND GENERAL GOVERNMENT**

April 8, 2024 - 6:05 PM

(or immediately following previously scheduled meeting)

**Community Room
933 Michigan Avenue, Stevens Point, WI**

OR

Zoom Teleconferencing

Meeting ID: 873 6075 2562 | Passcode: 812278

By Computer:

<https://us02web.zoom.us/j/87360752562?pwd=YmJQeIVsNjM5ZGpkZ1pwOXpnOUJsZz09>

By Phone: +1-312-626-6799 (US Chicago)

(A quorum of the City Council may attend this meeting)

AGENDA

Discussion and Possible Action on:

1. Roll Call.
2. License List:
 - A. Class “B” Beer License: The Big Garlic LLC at 1157 Main Street, Stevens Point for license period beginning April 16, 2024.
 - B. “Class B” Beer & Liquor License: Cee Services LLC at 1324 Second Street, Stevens Point for license period beginning April 16, 2024.
 - C. Extension of Licensed Premise: Kim’s Barrel Inn, Inc., 1001 Second Street, Stevens Point request for extension of premise to include back parking lot and garage to serve food and beverages.
 - D. Temporary Class “B” Beer License: St. Peter’s Parish, 800 Fourth Avenue, Stevens Point for St. Peter’s Parish Picnic on June 8-9, 2024 at 708 First Street, Stevens Point, WI 54481.
 - E. Temporary Class “B” Beer/”Class B” Wine License: Vam Muaj Club, 150 Lavigne Avenue, Port Edwards, WI 54469 for Hmong Week Central WI on May 18, 2024 at 1100 Crosby Avenue, Stevens Point, WI 54481.

3. Request to Hold Event/Street Closing:
 - A. Stevens Point Block Party on May 18, 2024.
 - B. Hmong Week Central Wisconsin on May 18, 2024.
 - C. Ki Mobility Company Picnic on August 16, 2025.
4. Adjournment.

Meeting Rider

Any person who has special needs while attending this meeting or needing agenda materials for this meeting should contact the City Clerk as soon as possible to ensure a reasonable accommodation can be made. The City Clerk can be reached by telephone at (715) 346-1569, TDD # 346-1556 or by mail at 1515 Strongs Ave., Stevens Point, WI 54481.

Copies of ordinances, resolutions, reports and minutes of the committee meetings are on file at the office of the City Clerk for inspection during normal business hours from 7:30 a.m. to 4:00p.m.

RECEIVED
MAR 28 2024
CITY CLERKS
OFFICE

Kim L. Krayecki owner of KIM'S BARREL Inn is requesting an extension of Premise to include back parking lot and garage. To serve food and beverages. Also will be hosting a one day event milkbottle tournament Saturday May 11th in same premise as requested. I have consulted the inspection Dept and was told I would not require any Permits. I will inquire with the Fire Department and the Department of Health if they have issues I would need to address.

thank you!

Kim L. Krayecki

Kim L. Krayecki

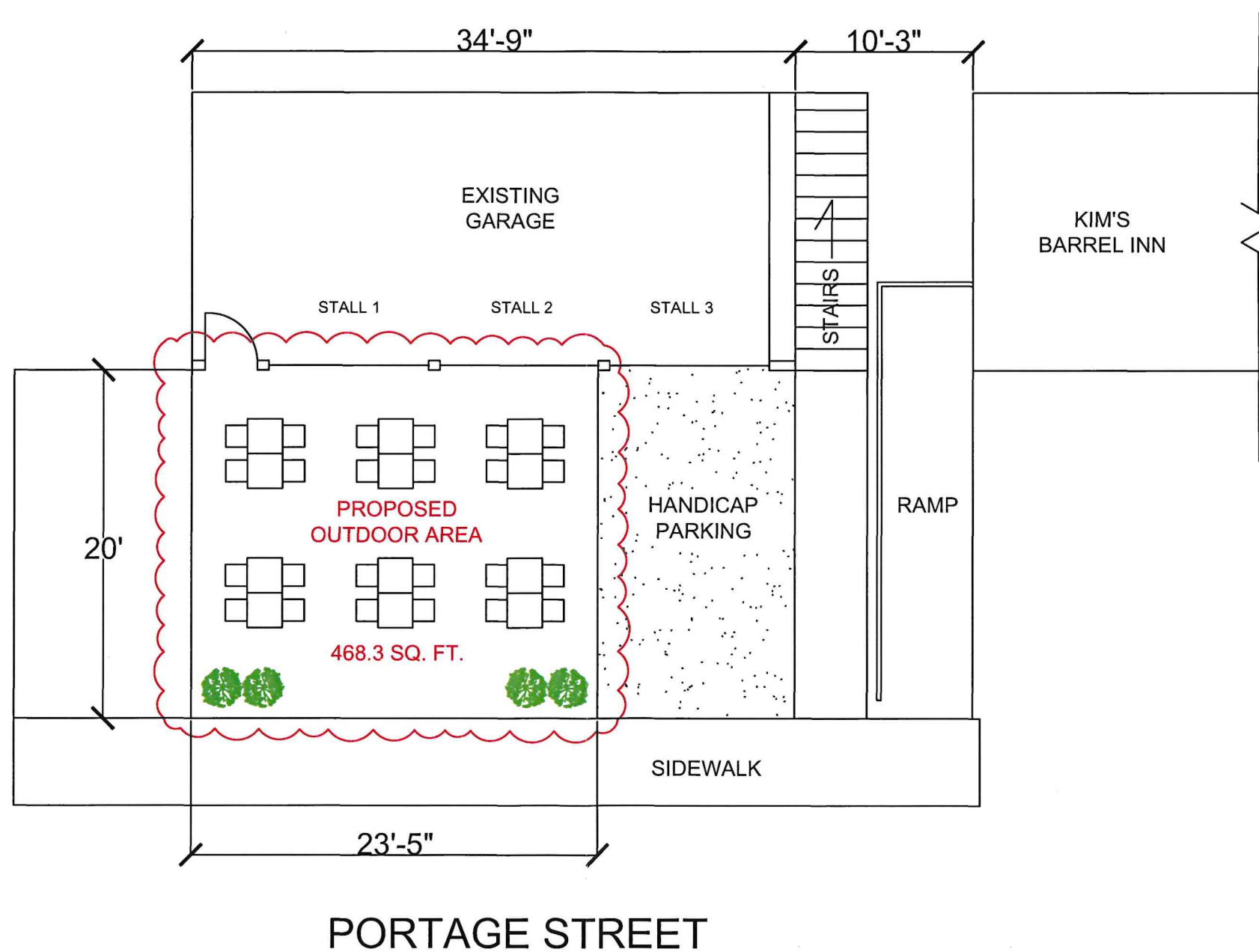
submitted March 28, 2024



KIM'S BARREL INN OUTDOOR AREA
1001 2ND STREET
STEVENS POINT, WI 54481

OUTDOOR AREA PROPOSAL

468.3 sq. ft.



LICENSE LIST
PUBLIC POLICY AND GENERAL GOVERNMENT
Monday, April 8, 2024

Class "B" Beer License:

1. **The Big Garlic LLC** at 1157 Main St, Stevens Point for license period beginning 04/16/2024

"Class B" Beer & Liquor License:

2. **Cee Services LLC** at 1324 Second St, Stevens Point for license period beginning 04/16/2024

Extension of Licensed Premise:

1. **Kim's Barrel Inn, Inc.**, 1001 Second St, Stevens Point request for extension of premise to include back parking lot and garage to serve food and beverages. (See attached)

Temporary Class "B" Beer License:

1. St. Peter's Parish, 800 Fourth Ave, Stevens Point for St. Peter's Parish Picnic on June 8-9, 2024 at 708 First St, Stevens Point, WI 54481

Temporary Class "B" Beer/"Class B" Wine License:

1. Vam Muaj Club, 150 Lavigne Ave, Port Edwards, WI 54469 for Hmong Week Central WI on May 18, 2024 at 1100 Crosby Ave, Stevens Point, WI 54481

SPECIAL EVENT PERMIT APPLICATION

Application Fee: \$35

- ☐ Exempt (Veterans, Schools, Funerals) ☐ Small (Less Than 100 Attendees)
☐ Medium (100-500 Attendees) ☐ Large (500+ Attendees)

OFFICE USE ONLY:

DATE: **3/06/2024**

AMOUNT: **\$35.00**

RECEIPT: **152390166**

Insurance: Medium and Large Events are required by City Ordinance 12.28(6)b to submit a Certificate of Insurance providing minimum combined single bodily injury and property damage of \$1,000,000.

1. Please Select One: ☐ New Event ☐ Return Event as Previously Presented ☐ Return Event w/ Changes
2. Name of Event: _____
3. Name of Sponsoring Person or Organization: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Is this a 501 (C-3) non-profit organization? Yes No If Yes, Tax Exempt CES#: _____
4. Contact Person: _____
Phone: _____ Email: _____ Fax: _____
Address: _____ City: _____ State: _____ Zip Code: _____
5. Event Type: (Check All That Apply and Describe: Run/Walk, Concert, Festival, Picnic, Etc.)
☐ Athletic Event: _____
☐ Financial Gain Event on City Property: _____
☐ Free Public Event on City Property: _____
☐ Private Event: _____
☐ Other: _____
6. Event Date(s): _____ Event Start Time: _____ Event End Time: _____
7. Set Up Date and Time: _____
8. Event Assembly Location: _____
Event Dispersal Location (if different from Assembly Location): _____
9. Estimated Attendance Of:
Participants/Vendors: _____ Spectators/Attendees: _____ Vehicles: _____ Animals: _____
10. Site Plan/Map of Event Attached [REQUIRED]: Yes No
(Include Locations of Vendors, Tents, Portable Restrooms, Etc.)
11. Street Closures Required? Yes No (If "Yes" Certificate of Insurance providing minimum combined single bodily injury and property damage of \$1,000,000 is required regardless of event size).
12. List of Street Blocks to Close for Event: _____
13. Briefly Describe Your Event (You May Attach Additional Pages, If Needed):

14. Do You Require Any Other Special Assistance from the City?

15. Describe any additional needs from the City or City Facilities (Barricades, Fencing, Garbage Cans, City Facilities, Parks, etc.):

16. Police Presence Needed? Police Auxiliary Officer (Contact Lt. Uitenbroek at buitenbroek@stevenspoint.com)
Please Explain: _____

16. Will You Have Any of the Following? Check the Appropriate Boxes:

		Yes	No			Yes	No
1	Admission/Entry Fee			10	Erection of Tents/Temporary Structures—Area Greater than 400sq. ft. (Additional Permit Required —Contact Fire Dept & Ask for Officer on Duty: 715-344-1833)		
2	Alcoholic Beverages Served (Additional Permit Required —Contact City Clerk: 715-346-1569)			11	Financial Gain Activity		
3	Amplification Equipment			12	Fireworks—Please Explain Below: (Additional Permit Required —Contact Fire Department & Ask for Officer on Duty: 715-344-1833)		
4	Amusement Rides/Inflatables (Certificate of Insurance Required —Contact City Clerk's Office: 715-346-1569)			13	Food Prepared/Served (Additional Permit Required —Contact Portage County Health Dept: 715-345-5350 AND Fire Dept—Email the Fire Marshal at: sinnert@stevenspoint.com)		
5	Boats/Snowmobiles/ATVs			14	Horses/Animals		
6	Concession Sales			15	Musical Bands		
7	Drive Anything Into the Ground (Utility Location Required \$25 —Contact Parks Department: 715-346-1531)			16	Portable Toilets		
8	Electricity Needed			17	Vendor Displays/Sales		
9	Erection of Tents/Temporary Structures—Area Less than 400sq. ft.			18	Usage of the Square (Farmers Market Runs May 1st - October 31st —Contact: stevenspointfarmersmarket@gmail.com)		

Additional Explanation Here:

I understand the filing of this application does not ensure the issuance of this permit. I also understand that all Special Event organizers and participants must comply with all applicable City Ordinances, traffic rules, park rules, state health laws, fire codes, and liquor licensing regulations. Additional fees such as park facilities, tent, and firework permits are in addition to the fees submitted for the Special Event Application.

NON-DISCRIMINATION, HOLD HARMLESS, INDEMNIFICATION AND DEFENSE

THE PERSON OR GROUP NAMED AS THE SPONSORING ORGANIZATION ON THIS APPLICATION WILL BE RESPONSIBLE FOR THE CONDUCT OF THE SPECIAL EVENT AND FOR THE CONDITION OF THE FACILITY. THE SPONSORING ORGANIZATION WILL NOT DENY ANY PERSON ANY BENEFIT OR OTHERWISE SUBJECT ANY PERSON TO DISCRIMINATION BECAUSE OF RACE, COLOR, CREED, NATIONAL ORIGIN, SEXUAL ORIENTATION, DISABILITY, RELIGION, GENDER IDENTITY, OR MEMBERSHIP IN ANY PROTECTED CLASS.

BY SIGNING THIS APPLICATION, THE SPONSORING PERSON OR ORGANIZATION LISTED ABOVE AGREES TO INDEMNIFY, DEFEND, AND HOLD THE CITY AND ITS OFFICERS, OFFICIALS, EMPLOYEES AND AGENTS HARMLESS AGAINST ALL CLAIMS, LIABILITY, LOSS, DAMAGE, OR EXPENSE INCURRED BY THE CITY ON ACCOUNT OF ANY INJURY TO OR DEATH OF ANY PERSON OR ANY DAMAGE TO PROPERTY CAUSED BY OR RESULTING FROM THE ACTIVITIES FOR WHICH THE PERMIT IS GRANTED.

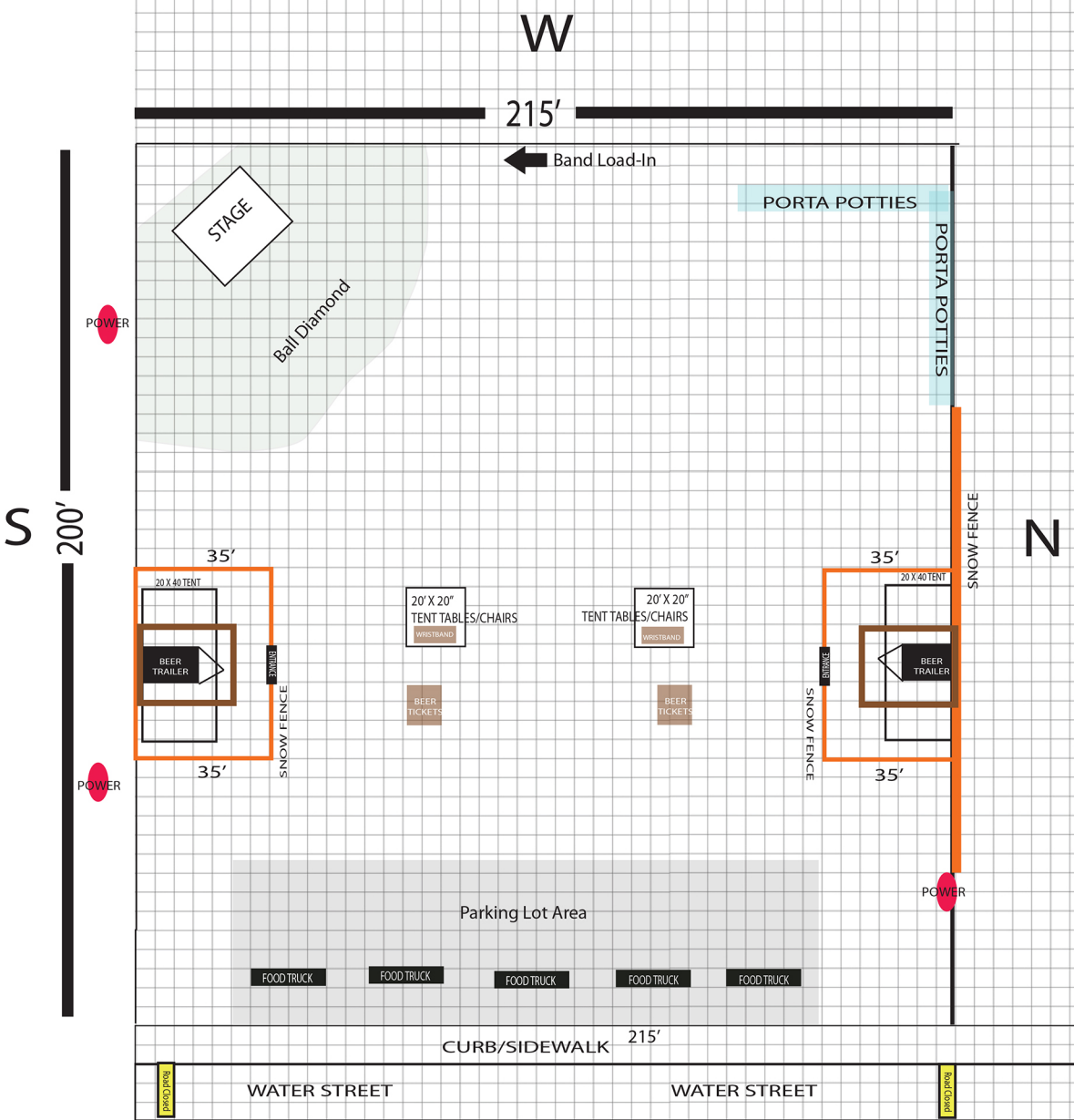
NOTHING CONTAINED WITHIN THIS AGREEMENT IS INTENDED TO BE A WAIVER OR ESTOPPELS OF THE CONTRACTING MUNICIPALITY OR ITS INSURER TO RELY UPON THE LIMITATIONS, DEFENSES, AND IMMUNITIES CONTAINED WITHIN WISCONSIN LAW, INCLUDING THOSE CONTAINED WITHIN WISCONSIN STATUTES §§ 893.80, 895.52, AND 345.05. TO THE EXTENT THAT INDEMNIFICATION IS AVAILABLE AND ENFORCEABLE, THE CITY OF STEVENS POINT OR ITS INSURER(S) SHALL NOT BE LIABLE IN INDEMNITY OR CONTRIBUTION FOR AN AMOUNT GREATER THAN THE LIMITS OF LIABILITY FOR MUNICIPAL CLAIMS ESTABLISHED BY WISCONSIN LAW.

I hereby certify that the foregoing facts concerning my Special Event are true to the best of my knowledge:

Signature of Applicant: _____ Date: _____

*****Signature of Approval*****

Signature of City Clerk: _____ Date: _____ Page 7 of 16





STEVPOI-02

TARBUCKLE

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/6/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Risk Strategies Madison 1103 Hunter Dr Ste 100 Mount Pleasant, WI 53406	CONTACT NAME: Tammie Arbuckle	
	PHONE (A/C, No, Ext): (608) 203-3872	FAX (A/C, No): (877) 254-8586
	E-MAIL ADDRESS: tarbuckle@risk-strategies.com	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A : Secura Insurance	
INSURED Stevens Point Brewery 2617 Water St Stevens Point, WI 54481	NAIC # 22543	
	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
INSURER F :		

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC OTHER:			CP003406200	5/15/2024	5/21/2024	EACH OCCURRENCE \$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
							MED EXP (Any one person) \$ 0
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 1,000,000
	AUTOMOBILE LIABILITY ☐ ANY AUTO OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY						PRODUCTS - COMP/OP AGG \$ 1,000,000
							Liquor Liab \$ 1,000,000
							COMBINED SINGLE LIMIT (Ea accident) \$
							BODILY INJURY (Per person) \$
							BODILY INJURY (Per accident) \$
	UMBRELLA LIAB ☐ OCCUR EXCESS LIAB ☐ CLAIMS-MADE DED ☐ RETENTION \$						PROPERTY DAMAGE (Per accident) \$
							EACH OCCURRENCE \$
							AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) ☐ Y / N If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE ☐ OTH-ER ☐
							E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Stevens Point Brewery Block Party Event 5/18/2024

CERTIFICATE HOLDER

CANCELLATION

For Evidence Only

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

SPECIAL EVENT PERMIT APPLICATION

Application Fee: \$35

- ☐ Exempt (Veterans, Schools, Funerals) ☐ Small (Less Than 100 Attendees)
☒ Medium (100-500 Attendees) ☐ Large (500+ Attendees)

OFFICE USE ONLY:

DATE: 3/18/24
 AMOUNT: \$35
 RECEIPT: 152970717

Insurance: Medium and Large Events are required by City Ordinance 12.28(6)b to submit a Certificate of Insurance providing minimum combined single bodily injury and property damage of \$1,000,000.

1. Please Select One: ☒ New Event ☐ Return Event as Previously Presented ☐ Return Event w/ Changes
2. Name of Event: Hmong Week Central Wisconsin
3. Name of Sponsoring Person or Organization: CAP Services
 Address: 2900 Hoover Ave City: Stevens Point State: WI Zip Code: 54481
 Is this a 501 (C-3) non-profit organization? ☒ Yes ☐ No If Yes, Tax Exempt CES#: 008-0000242751-08
4. Contact Person: Cindy Yang
 Phone: 715-340-5631 Email: cyang@capmail.org Fax: _____
 Address: 1608 W. River Dr. City: Stevens Point State: WI Zip Code: 54481
5. Event Type: (Check All That Apply and Describe: Run/Walk, Concert, Festival, Picnic, Etc.)
☐ Athletic Event: _____
☐ Financial Gain Event on City Property: _____
☒ Free Public Event on City Property: _____
☐ Private Event: _____
☐ Other: _____
6. Event Date(s): 5/18/24 Event Start Time: 1:00 pm Event End Time: 8:00 pm
7. Set Up Date and Time: 5/18/24 10:00 am
8. Event Assembly Location: _____
 Event Dispersal Location (if different from Assembly Location): _____
9. Alternative Location: ☐ Yes ☒ No if "Yes" please list location: _____
 (usage of an alternative location must be communicated with the City Clerk's Office two business days prior to the event)
10. Estimated Attendance Of:
 Participants/Vendors: 10 Spectators/Attendees: 200-300 Vehicles: 100 Animals: _____
11. Site Plan/Map of Event Attached [REQUIRED]: ☒ Yes ☐ No
 (Include Locations of Vendors, Tents, Portable Restrooms, Etc.)
12. Street Closures Required? ☐ Yes ☒ No (If "Yes" Certificate of Insurance providing minimum combined single bodily injury and property damage of \$1,000,000 is required regardless of event size).
13. List of Street Blocks to Close for Event: _____
14. Briefly Describe Your Event (You May Attach Additional Pages, If Needed):
 Please see attachment.

15. Describe any additional needs from the City or City Facilities (Barricades, Fencing, Garbage Cans, City Facilities, Parks, etc.):
 Will need garbage cans.

16. Police Presence Needed? ☐ Police ☐ Auxiliary Officer (Contact Lt. Uitenbroek at buitenbroek@stevenspoint.com)
 Please Explain: _____

16. Will You Have Any of the Following? Check the Appropriate Boxes:

		Yes	No			Yes	No
1	Admission/Entry Fee	☐	☒	10	Erection of Tents/Temporary Structures—Area Greater than 400sq. ft. (Additional Permit Required—Contact Fire Dept & Ask for Officer on Duty: 715-344-1833)	☐	☐
2	Alcoholic Beverages Served (Additional Permit Required—Contact City Clerk: 715-346-1569)	☒	☐	11	Financial Gain Activity	☐	☒
3	Amplification Equipment	☒	☐	12	Fireworks—Please Explain Below: (Additional Permit Required—Contact Fire Department & Ask for Officer on Duty: 715-344-1833)	☐	☒
4	Amusement Rides/Inflatables (Certificate of Insurance Required—Contact City Clerk's Office: 715-346-1569)	☐	☒	13	Food Prepared/Served (Additional Permit Required—Contact Portage County Health Dept: 715-345-5350 AND Fire Dept—Email the Fire Marshal at: sinnert@stevenspoint.com)	☒	☐
5	Boats/Snowmobiles/ATVs	☐	☒	14	Horses/Animals	☐	☒
6	Concession Sales	☒	☐	15	Musical Bands	☒	☐
7	Drive Anything Into the Ground (Utility Location Required \$25—Contact Parks Department: 715-346-1531)	☐	☒	16	Portable Toilets	☐	☒
8	Electricity Needed	☒	☐	17	Vendor Displays/Sales	☒	☐
9	Erection of Tents/Temporary Structures—Area Less than 400sq. ft.	☒	☐	18	Usage of the Square (Farmers Market Runs May 1st - October 31st—Contact: stevenspointfarmersmarket@gmail.com)	☐	☒

Additional Explanation Here:

I understand the filing of this application does not ensure the issuance of this permit. I also understand that all Special Event organizers and participants must comply with all applicable City Ordinances, traffic rules, park rules, state health laws, fire codes, and liquor licensing regulations. Additional fees such as park facilities, tent, and firework permits are in addition to the fees submitted for the Special Event Application.

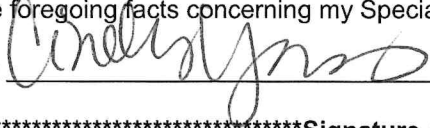
NON-DISCRIMINATION, HOLD HARMLESS, INDEMNIFICATION AND DEFENSE

THE PERSON OR GROUP NAMED AS THE SPONSORING ORGANIZATION ON THIS APPLICATION WILL BE RESPONSIBLE FOR THE CONDUCT OF THE SPECIAL EVENT AND FOR THE CONDITION OF THE FACILITY. THE SPONSORING ORGANIZATION WILL NOT DENY ANY PERSON ANY BENEFIT OR OTHERWISE SUBJECT ANY PERSON TO DISCRIMINATION BECAUSE OF RACE, COLOR, CREED, NATIONAL ORIGIN, SEXUAL ORIENTATION, DISABILITY, RELIGION, GENDER IDENTITY, OR MEMBERSHIP IN ANY PROTECTED CLASS.

BY SIGNING THIS APPLICATION, THE SPONSORING PERSON OR ORGANIZATION LISTED ABOVE AGREES TO INDEMNIFY, DEFEND, AND HOLD THE CITY AND ITS OFFICERS, OFFICIALS, EMPLOYEES AND AGENTS HARMLESS AGAINST ALL CLAIMS, LIABILITY, LOSS, DAMAGE, OR EXPENSE INCURRED BY THE CITY ON ACCOUNT OF ANY INJURY TO OR DEATH OF ANY PERSON OR ANY DAMAGE TO PROPERTY CAUSED BY OR RESULTING FROM THE ACTIVITIES FOR WHICH THE PERMIT IS GRANTED.

NOTHING CONTAINED WITHIN THIS AGREEMENT IS INTENDED TO BE A WAIVER OR ESTOPPELS OF THE CONTRACTING MUNICIPALITY OR ITS INSURER TO RELY UPON THE LIMITATIONS, DEFENSES, AND IMMUNITIES CONTAINED WITHIN WISCONSIN LAW, INCLUDING THOSE CONTAINED WITHIN WISCONSIN STATUTES §§ 893.80, 895.52, AND 345.05. TO THE EXTENT THAT INDEMNIFICATION IS AVAILABLE AND ENFORCEABLE, THE CITY OF STEVENS POINT OR ITS INSURER(S) SHALL NOT BE LIABLE IN INDEMNITY OR CONTRIBUTION FOR AN AMOUNT GREATER THAN THE LIMITS OF LIABILITY FOR MUNICIPAL CLAIMS ESTABLISHED BY WISCONSIN LAW.

I hereby certify that the foregoing facts concerning my Special Event are true to the best of my knowledge:

Signature of Applicant:  Date: 3/18/2024

*****Signature of Approval*****

Signature of City Clerk: _____ Date: _____

14. Description of the event: We will be celebrating our 6th year of HMoob Week in Portage, Wood, and Marathon counties. Every year in May we want to honor, celebrate, and show what success looks like with Hmong folks within the community. We aim for May 14th as that was the fall of Long Cheng and when the Hmong folks had to flee for their safety. We have a weeklong of events at different locations and virtually via our Facebook page. This year we would like to end our event with a “Party in the park.” We will be looking at having a live band and artists for entertainment, food, merchant vendors and open it up to folks who would like to play some cornhole. There will be no admission fees as this is a public event.

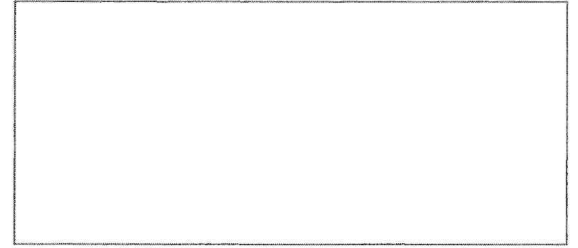
Pfiffner Pioneer Park

Address: 1100 Crosby Ave, Stevens Point, WI 54481

Phone: +1 715-346-1531

Hours

Monday - Sunday 6:00 AM - 11:00 PM



SPECIAL EVENT PERMIT APPLICATION

Application Fee: \$35

- ☐ Exempt (Veterans, Schools, Funerals) ☐ Small (Less Than 100 Attendees)
☐ Medium (100-500 Attendees) ☒ Large (500+ Attendees)

OFFICE USE ONLY:

DATE: 3/22/24
AMOUNT: 830
RECEIPT: 2-014763

Insurance: Medium and Large Events are required by City Ordinance 12.28(6)b to submit a Certificate of Insurance providing minimum combined single bodily injury and property damage of \$1,000,000.

1. Please Select One: ☐ New Event ☒ Return Event as Previously Presented ☐ Return Event w/ Changes
2. Name of Event: Ki Mobility Company Picnic
3. Name of Sponsoring Person or Organization: Ki Mobility
Address: 5201 Woodward Dr City: Stevens Point State: WI Zip Code: 54481
Is this a 501 (C-3) non-profit organization? ☐ Yes ☒ No If Yes, Tax Exempt CES#: _____
4. Contact Person: Renee Stevens
Phone: 715-997-5112 Email: rstevens@kimobility.com Fax: _____
Address: 5201 Woodward Dr City: Stevens Point State: WI Zip Code: 54481
5. Event Type: (Check All That Apply and Describe: Run/Walk, Concert, Festival, Picnic, Etc.)
☐ Athletic Event: _____
☐ Financial Gain Event on City Property: _____
☐ Free Public Event on City Property: _____
☒ Private Event: Company picnic for Ki Mobility associates and their families
☐ Other: _____
6. Event Date(s): Saturday, August 16, 2025 Event Start Time: 3:00 PM Event End Time: 7:00 PM
7. Set Up Date and Time: Friday, August 15, 2025 at 8:00 AM
8. Event Assembly Location: Pfiffner Pioneer Park
Event Dispersal Location (if different from Assembly Location): _____
9. Alternative Location: ☐ Yes ☒ No if "Yes" please list location: _____
(usage of an alternative location must be communicated with the City Clerk's Office two business days prior to the event)
10. Estimated Attendance Of:
Participants/Vendors: 15 Spectators/Attendees: 800 Vehicles: 250 Animals: _____
11. Site Plan/Map of Event Attached [REQUIRED]: ☒ Yes ☐ No
(Include Locations of Vendors, Tents, Portable Restrooms, Etc.)
12. Street Closures Required? ☒ Yes ☐ No (If "Yes" Certificate of Insurance providing minimum combined single bodily injury and property damage of \$1,000,000 is required regardless of event size).
13. List of Street Blocks to Close for Event: The portion of Crosby Ave that is adjacent to Pfiffner Park
14. Briefly Describe Your Event (You May Attach Additional Pages, If Needed):
Our company picnic is a fun family event that Ki puts on to show our appreciation of our associates. Attendees are Ki associates and their families. We pay for a variety of vendors to be present, including but not limited to; inflatables, food trucks, face paint artists, caricature artists, balloon twisters, and characters in costume. Our own Ki Mobility band plays favorite music in the Pfiffner bandshell.
15. Describe any additional needs from the City or City Facilities (Barricades, Fencing, Garbage Cans, City Facilities, Parks, etc.):
Crosby Ave barricaded on 8/16/25 from 12:00 PM to 7:00 PM for pedestrian safety. We need extra garbage cans plus an additional 8 to prevent overflowing garbage.
16. Police Presence Needed? ☒ Police ☐ Auxiliary Officer (Contact Lt. Uitenbroek at buitenbroek@stevenspoint.com)
Please Explain: We would greatly appreciate 1-2 police officers from 3:00 PM to 7:00 PM on 8/16/25.

RECEIVED
MAR 22 2024
CITY CLERK'S
OFFICE

16. Will You Have Any of the Following? Check the Appropriate Boxes:

	Yes	No		Yes	No
1 Admission/Entry Fee	☐	☒	10 Erection of Tents/Temporary Structures—Area Greater than 400sq. ft. (Additional Permit Required—Contact Fire Dept & Ask for Officer on Duty: 715-344-1833)	☒	☐
2 Alcoholic Beverages Served (Additional Permit Required—Contact City Clerk: 715-346-1569)	☐	☒	11 Financial Gain Activity	☐	☒
3 Amplification Equipment	☒	☐	12 Fireworks—Please Explain Below: (Additional Permit Required—Contact Fire Department & Ask for Officer on Duty: 715-344-1833)	☐	☒
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5 Boats/Snowmobiles/ATVs	☐	☒	14 Horses/Animals	☐	☒
6 Concession Sales	☐	☒	15 Musical Bands	☒	☐
7 Drive Anything Into the Ground (Utility Location Required \$25—Contact Parks Department: 715-346-1531)	☒	☐	16 Portable Toilets	☐	☒
8 Electricity Needed	☒	☐	17 Vendor Displays/Sales	☐	☒
9 Erection of Tents/Temporary Structures—Area Less than 400sq. ft.	☒	☐	18 Usage of the Square (Farmers Market Runs May 1st - October 31st—Contact: stevenspointfarmersmarket@gmail.com)	☐	☒

Additional Explanation Here:

I understand the filing of this application does not ensure the issuance of this permit. I also understand that all Special Event organizers and participants must comply with all applicable City Ordinances, traffic rules, park rules, state health laws, fire codes, and liquor licensing regulations. Additional fees such as park facilities, tent, and firework permits are in addition to the fees submitted for the Special Event Application.

NON-DISCRIMINATION, HOLD HARMLESS, INDEMNIFICATION AND DEFENSE

THE PERSON OR GROUP NAMED AS THE SPONSORING ORGANIZATION ON THIS APPLICATION WILL BE RESPONSIBLE FOR THE CONDUCT OF THE SPECIAL EVENT AND FOR THE CONDITION OF THE FACILITY. THE SPONSORING ORGANIZATION WILL NOT DENY ANY PERSON ANY BENEFIT OR OTHERWISE SUBJECT ANY PERSON TO DISCRIMINATION BECAUSE OF RACE, COLOR, CREED, NATIONAL ORIGIN, SEXUAL ORIENTATION, DISABILITY, RELIGION, GENDER IDENTITY, OR MEMBERSHIP IN ANY PROTECTED CLASS.

BY SIGNING THIS APPLICATION, THE SPONSORING PERSON OR ORGANIZATION LISTED ABOVE AGREES TO INDEMNIFY, DEFEND, AND HOLD THE CITY AND ITS OFFICERS, OFFICIALS, EMPLOYEES AND AGENTS HARMLESS AGAINST ALL CLAIMS, LIABILITY, LOSS, DAMAGE, OR EXPENSE INCURRED BY THE CITY ON ACCOUNT OF ANY INJURY TO OR DEATH OF ANY PERSON OR ANY DAMAGE TO PROPERTY CAUSED BY OR RESULTING FROM THE ACTIVITIES FOR WHICH THE PERMIT IS GRANTED.

NOTHING CONTAINED WITHIN THIS AGREEMENT IS INTENDED TO BE A WAIVER OR ESTOPPELS OF THE CONTRACTING MUNICIPALITY OR ITS INSURER TO RELY UPON THE LIMITATIONS, DEFENSES, AND IMMUNITIES CONTAINED WITHIN WISCONSIN LAW, INCLUDING THOSE CONTAINED WITHIN WISCONSIN STATUTES §§ 893.80, 895.52, AND 345.05. TO THE EXTENT THAT INDEMNIFICATION IS AVAILABLE AND ENFORCEABLE, THE CITY OF STEVENS POINT OR ITS INSURER(S) SHALL NOT BE LIABLE IN INDEMNITY OR CONTRIBUTION FOR AN AMOUNT GREATER THAN THE LIMITS OF LIABILITY FOR MUNICIPAL CLAIMS ESTABLISHED BY WISCONSIN LAW.

I hereby certify that the foregoing facts concerning my Special Event are true to the best of my knowledge:

Signature of Applicant: Renee Stevens Date: 3/15/2024

*****Signature of Approval*****

Signature of City Clerk: _____ Date: _____

