



Assembly Permit Application

Applicant Information

Name: _____ Organization (if applicable): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Property Owner Information:

Name: _____ Organization (if applicable): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

General Assembly Site Information:

Primary On-Site Contact: _____ Phone: _____

Assembly Site Address: _____ Town of: _____

Parcel Pin #: _____ Property Size (acres): _____

Property Legal Description: _____

General Assembly Specifics:

Nature/Purpose of Assembly: _____

Estimated total Number of attendees planned for: _____

Date(s)/Time(s) of Assembly

Start Date: _____ Start Time: _____ am/pm End Date: _____ End Time: _____ am/pm

Alternate Date(s)/Time(s) (if applicable)

Start Date: _____ Start Time: _____ am/pm End Date: _____ End Time: _____ am/pm

Will daily preparation/clean up happen outside of the above timeframe? Yes No

If yes, please specify times: _____

Health Department

Are food/concessions provided at the assembly? Yes No

Will the assembly allow for overnight camping? Yes No

Will the assembly have body art (tattooing/piercing)? Yes No

Sheriff's Office and Highway Department

Will alcohol be available at the assembly? Yes No

Security Option (pick one)

Sheriff's Office (must have contract with Sheriff's Office) Providing own security personnel.

Will the assembly need road or lane closures or crossing of a County owned road? Yes No

Signature and Certification

The below signed hereby make application to hold an event classified as a large assembly under the Marathon County Large Assemblies Ordinance for the area identified above. The below signed agrees that the event shall be administered in accordance with the Marathon County Large Assemblies Ordinance and all other federal, state, and local ordinances and regulations of the State of Wisconsin. I declare that the information I am supplying is true and accurate to the best of my knowledge, and I acknowledge that this information will be relied upon for the issuance of this permit. By signing this application, I am granting permission to staff of Marathon County, who's responsibility to enforce this permit and its applicable ordinance, to enter the location of this event at any reasonable time for the purpose of inspection to assure compliance with the large assembly laws relative to the issuance of this permit. By signing this application, I agree to hold harmless Marathon County, its staff, officials, and officers from any and all liability in connection with this event.

Property Owner Signature (required): _____ **Date:** _____

Event Planner/Agent Signature (required): _____ **Date:** _____

For office use only:

Received Date (stamp)

Fee Amount Received: \$ _____ Date: _____

Reviewed by: Conservation, Planning and Zoning Date: _____

Emergency Management Date: _____ Health Dept Date: _____

Highway Dept Date: _____ Parks, Recreation, and Forestry Date: _____

Sheriff's Office Date: _____

Approved by all Departments: YES NO

Permit Issued By: _____ Date: _____

Permit Denied By: _____ Date: _____

Application Attachment Checklist

The items below are required to be submitted for a completed application.

Applicant Check if submitted	Staff Initials (Staff use only)	
		Completed Assemblies Application form.
		Assemblies Permit Fee (see fee schedule)
		A list of names and addresses of all property owners within ½ mile of the parcel upon which the assembly is to be held. <i>(Conservation, Planning, and Zoning (CPZ) can assist with this).</i>
		A statement as to the maximum number of persons which the applicant can reasonably accommodate at any time. This shall not exceed: <ol style="list-style-type: none"> a. The maximum number which can reasonably assemble at the location of the assembly, in consideration of the nature of the assembly; or b. The maximum number of persons allowed to sleep within the boundaries of the location of the assembly according to the applicable state law, Wisconsin Administrative Code, and zoning ordinances of the municipality, if the assembly is to continue overnight.
		<p>Food and Beverage Concessions: (if applicable)</p> <ul style="list-style-type: none"> • Information for all concessionaires: <ul style="list-style-type: none"> ○ Names ○ Contact information (phone or email, mailing address) ○ Copy of License or permit(s) from DATCP and/or Local Health Department. • Confirmation at least 1 licensed bartender is available for each separate beverage station that is serving alcohol. • Potable Water Plan <ul style="list-style-type: none"> ○ The source, quality, quantity, and means of dispensing of ○ Complies with NR 809 Wisconsin Administrative Code
		<p>A statement describing the need for any extraordinary services (if applicable).</p> <p><i>Extraordinary services are, services or equipment provided by the County, its departments, employees, or contractors, above and beyond its normal capabilities and requirements of providing public safety that cause a measurable burden upon County personnel and material, when the provision of such services or equipment becomes reasonable and necessary, in the County's determination, due to the specific needs or requirements of an assembly or special event.</i></p>

		<p>Emergency Action Plan:</p> <ul style="list-style-type: none"> • Emergency routing <ul style="list-style-type: none"> ○ Map <ul style="list-style-type: none"> ▪ Identify all access roads. ▪ Indicate road condition. ▪ Emergency vehicle ingress and egress routes ○ Written Statement (if applicable) <ul style="list-style-type: none"> ▪ Regarding preparations needed to put roads in the condition necessary to handle estimated amount of traffic • Medical services and onsite first aid <ul style="list-style-type: none"> ○ Names and Hours of availability of medical support personnel ○ Provisions for contacting emergency medical services. ○ Must be consistent with any applicable state and local requirements. • Fire and Severe Weather <ul style="list-style-type: none"> ○ Proof of acknowledgement and adherence to town fire protection ordinances. ○ Emergency Response ○ On-site capabilities to respond. ○ On-site fire alarms, extinguishing devices, fire lanes and escapes as required to meet all state and local standards.
		<p>Security Plan:</p> <ul style="list-style-type: none"> • Proof of agreement with the Sheriff’s office to provide services or; • Copies of all certifications for certified security personnel • Names, address, and phone number of primary security officer. • Details on how security personnel will be coordinated at the site. • Number and locations of security personnel throughout the duration of the event (shifts cannot exceed 12 hours, 3 security personnel per every 1000 attendees on-site)) • Details on how number of security personnel will be adjusted based on changes in attendance (if applicable)
		<p>Highway closure plan: (if applicable)</p> <ul style="list-style-type: none"> • Statement of what is needed and the duration of closures/crossings. • Map <ul style="list-style-type: none"> ○ Identifying exact location(s)

		<p>Site plan/Statement Illustrating:</p> <ul style="list-style-type: none"> • Fencing location(s) (if applicable) • Illumination for hours of Darkness (if applicable) • Parking area(s) • Potable Water locations • Restroom locations • Hand Washing Station locations • Solid Waste (garbage/recycling) locations • Food/Concessions location • Alcohol locations • Camping site locations (if applicable) <ul style="list-style-type: none"> ○ Must in compliance with all state and local requirements specifically ATCP 79. • Fire protection (alarms, devices, services, etc.) if not identified in your emergency management plan. • Medical services and on-site first aid areas if not identified in emergency management plan (needs to be in sheltered area)
		<ul style="list-style-type: none"> • Clean up plan for assembly site and surrounding area at the conclusion of the assembly.
		<ul style="list-style-type: none"> • Sound control and amplification plan (if applicable)
		<p>Insurance and Indemnification:</p> <ul style="list-style-type: none"> • An agreement which shall indemnify and hold harmless the County or any of its agents, officers, servants, and employees from any liability or causes of action which might arise by reason of granting this license. Such agreement is included in the application certification portion of the application document that is required to be signed for a completed application. • Certificates of proof of insurance issued by insurance companies licensed to transact business in the State of Wisconsin providing that the applicant and the assembly are covered by a comprehensive general liability policy providing a minimum coverage of \$2,000,000 aggregate coverage; fire legal liability policy in the amount of \$2,000,000; and worker's compensation insurance as required by Wisconsin law.