

License # \_\_\_\_\_ ITEM 8J  
Wallet # \_\_\_\_\_  
Sticker # \_\_\_\_\_  
Receipt # \_\_\_\_\_  
Issued \_\_\_\_\_  
Expires \_\_\_\_\_

CITY OF MUSCATINE

TITLE 3, CHAPTER 14

APPLICATION FOR USE OF ANY STREET, SIDEWALK, ROADWAY, ALLEY,  
PARK, PUBLIC WAY, PROPERTY OR FACILITY

1. Name of applicant and sponsoring organization, if any:

Paul Nett  
Address: 112 1/2 East Second Street  
Telephone number: 563-607-2235  
E-mail address: nett.paul54@yahoo.com

2. Type of event that is planned:

cancer drive  
Relay for Life

3. Proposed location:

1820 Angle  
Peter's Tap

4. Date(s)/Time(s): 5-18-2012

5. Expected length of use: 12:00 P.M. 2:00 P.M.

6. Expected size of group: 100

7. Names of any person or persons in charge of the proposed use at the specified location:

Paul Nett

Address(es): 112 1/2 East 2nd Street  
Telephone Number(s): 563-607-2235  
E-mail address(es): nett.paul54@yahoo.com

8. Names and addresses of any persons to be featured as entertainers or speakers:

NA

9. List mechanical or electronic equipment to be used:

NA

10. Number and type of any motor vehicles or other forms of transportation to be used, including bicycles, boats, carriages and golf carts:

NA

11. Number and types of animals to be used:

NA

12. A description of any sound amplification to be used:

NA

13. Proposed monitoring of the group and/or activity including the number of people who will direct traffic, set up, clean up and maintain order, if necessary:

Paul Neff

14. All plans for the provision of security:

NA

15. Beer or wine consumption? Yes X No       

16. Describe any items to be sold or distributed:

Beer & food Grilled food

17. Is water connection requested? Yes        No X

18. Is electricity requested? Yes        No X

19. Have you provided a layout site plan for your proposed activity or event? Yes ~~X~~ No X

If yes, please attach.

If no, please explain:

Angie Street, ~~between~~  
where Pete's Tap is located  
Blocking in front of Pete's 3-9-

20. Do you understand that you will be financially responsible for all site restoration needed to restore the site to pre-event status? Yes X No       

The applicant agrees to indemnify, defend and save harmless the City of Muscatine, together with its agents, officers and employees, from any and all claims, lawsuits, damages, losses and expenses, of whatever nature, which may result from or arise from the activity or event covered by the permit, including but not limited to the use of public ways, irrespective of whether said claims are frivolous or meritorious.

Paul M  
Authorized Representative

5-9-2012  
Date

**TO BE COMPLETED BY CITY DEPARTMENTS:**

I have reviewed the attached application with the following recommendations:

Recommend  
Approval

Comments:

☒  
YES

☐  
NO

*[Signature]* 5-14-12  
Parks & Recreation Date

☒  
YES

☐  
NO

*[Signature]* 5/14/12  
Building & Zoning Date

SUBJECT TO HEALTH INSPECTIONS  
& APPROVALS.

☒  
YES

☐  
NO

*[Signature]* 5/14/12  
Public Works Date

☒  
YES

☐  
NO

*[Signature]* 5/15/12  
Police Chief Date

☒  
YES

☐  
NO

*[Signature]* 5-14-12  
Fire Chief Date

**FINAL APPROVAL:**

☐  
YES

☐  
NO

\_\_\_\_\_  
City Administrator Date

## ACKNOWLEDGEMENT OF EVENT STREET CLOSING

I hereby acknowledge that I have been notified of the closing of Angle St  
50 ~~100~~ ft in front of Pete's Tap street(s)  
for the Relay for Life Fund Raising event on the following dates/times  
May 18<sup>th</sup> 2012.

**Signature**

Name/Business	Signature	Address
Walter Beckman	Walter Beckman	31 Clinton St
Brenda Beckman	Brenda Beckman	319 Clinton St
Donna Erickson	Donna Erickson	1906 Angle
Vicki Tomlin	Vicki Tomlin	314 Clinton
Mike Meyer	Mike Meyer	311 Clinton

Brenda Beckman Brenda Beckman 319 Clinton St

Vicki Tomlin      ~~Vicki~~ Tomlin      314 Chilton

Wheeler - 311 Clinton