

## CITY OF MUSCATINE

## TITLE 3, CHAPTER 14

License #	_____
Wallet #	_____
Sticker #	_____
Receipt #	_____
Issued	_____
Expires	_____

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

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

*Diversity Service Center of Iowa*

Address: *119 Sycamore Street Suite 420*

Telephone number: *(563) 264-8883*

E-mail address: *multirosa@hotmail.com*

2. Type of event that is planned:

*International fair- event to showcase diversity and various cultural backgrounds of our community & how we can benefit from it.*

3. Proposed location:

*Pearl City Station & parking lot by building*

4. Date(s)/Time(s): *Sunday, September 7<sup>th</sup>, 2014* *Event time: 11am-5pm*

5. Expected length of use: *8am-8pm*

6. Expected size of group: *250*

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

*Rosa Mendoza*

Address(es): *119 Sycamore St. Suite 420*

Telephone Number(s): *(563) 264-8883*

E-mail address(es): *multirosa@hotmail.com*

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

9. List mechanical or electronic equipment to be used:

Sound System

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

N/A

11. Number and types of animals to be used:

None

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

D.J.

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:

\* Volunteers of the Diversity Service Center of Iowa  
\* Staff of the Diversity Service Center of Iowa

14. All plans for the provision of security:

Volunteers

15. Beer or wine consumption? Yes  No

16. Describe any items to be sold or distributed: Food vendors

Various ethnic food prepared by local vendors

17. Is water connection requested? Yes  No  bathrooms

18. Is electricity requested? Yes  No

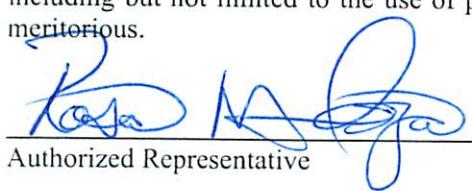
19. Have you provided a layout site plan for your proposed activity or event? Yes  No

If yes, please attach.

If no, please explain:

20. Do you understand that you will be financially responsible for all site restoration needed to restore the site to pre-event status? Yes  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.

  
Authorized Representative

  
Date

**TO BE COMPLETED BY CITY DEPARTMENTS:**

I have reviewed the attached application with the following recommendations:

Recommend  
Approval

YES  NO

*Kathleen Alles* 7-1-14  
Parks & Recreation Date

Comments:

YES  NO

*SD* 6/21/14

YES  NO

*SD* 6/21/14

*All Food Vendors Must Have  
PRIOR APPROVAL BY HEALTH  
OFFICER*

YES  NO

*Lawrence E. Scher* 6/30/14  
Public Works Date

YES  NO

*B. Talluf* 7/1/14  
Police Chief Date

YES  NO

*MS* 7/2/14

YES  NO

*MS* 7/2/14

*Pending review of applicable  
fire codes/pre event meeting*

**FINAL APPROVAL:**

YES  NO

*MS* 7/2/14  
City Administrator Date

YES  NO

# Inventory Guide

Inventory

