

CITY OF MUSCATINE

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

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

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

Alzheimer's Association - Michelle Kelman, Senior Development Specialist

Address: 1730 28th Street, West Des Moines, IA 50266

Telephone Number: 319.237.4900

E-mail Address: mkelman@alz.org

2. Type of event that is planned:

Walk to End Alzheimer's fundraising event providing local services and programs, research and awareness.

3. Proposed location:

Pearl City Station and surrounding walking area

4. Date(s)/Time(s): August 15, 2020 6 am - 12 pm (set up August 14 if available)

5. Expected length of use: 5-6 hours

6. Expected size of group: 300

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

Michelle Kelman and local volunteers

Address(es): 1730 28th Street, West Des Moines, IA 50266

Telephone Number(s): 319.237.4900

E-mail Address(es): mkelman@alz.org

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

Unknown at this time.

9. List mechanical or electronic equipment to be used:

Sound system, riser/small stage, vendor materials / supplies, extension cords etc.

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

Unknown at this time.

11. Number and types of animals to be used:

N/A for the event and ceremony.

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

Sound system / PA system; music, ceremony etc.

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:

The Walk event volunteers will set up, tear down and monitor the walk route, event location and participants.

14. All plans for the provision of security:

Walk event security will be determined as event is finalized. Volunteers and security will be at the registration area. Volunteers will assist all aspects of the event.

15. Beer or wine consumption? Yes _____ No ☒ _____

16. Describe any items to be sold or distributed:

Donations / fundraising event - no sales.

17. Is water connection requested: Yes _____ No ☒ _____

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:

The Walk event is currently in the planning stage and recruiting event planning volunteers who plan and execute the event. This will include, event layout, walk route and logistical components of the event.

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.

Michelle Kelman

Authorized Representative

10.04.19

Date

TO BE COMPLETED BY CITY DEPARTMENTS:

I have reviewed the attached application with the following recommendations:

Recommend
Approval


☒ YES ☐ NO

 2-10-20
Parks & Recreation Date

Comments:

Approval subject to
attendance at present
meeting.


☒ YES ☐ NO

 1-30-20
Community Development Date

☒ YES ☐ NO

 2/4/20
Public Works Date

☒ YES ☐ NO

 2/5/2000
Police Chief Date

☒ YES ☐ NO

 1-30-20
Fire Chief Date

FINAL APPROVAL:

☐ YES ☐ NO

City Administrator Date