

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:

MUSCATINE RUNNING CLUB / AELL WAGNER

Address: P.O. Box 45

Telephone number: 563-299-3309 Cell

E-mail address: WAGNERD@MACHLINK.COM

2. Type of event that is planned:

36TH ANNUAL WATERMELON SWAMPED

3. Proposed location:

IOWA AVENUE BETWEEN 3RD & 4TH
 AND ATTACHED RACE ROUTES

4. Date(s)/Time(s):

AUGUST 17, 2013 7⁰⁰ AM TO 10⁰⁰ AM

5. Expected length of use:

RACE ROUTE FROM 8⁰⁰ AM TO 9⁰⁰ AM

6. Expected size of group:

350-450

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

SAME AS APPLICANT INFORMATION.

Address(es): _____

Telephone Number(s): _____

E-mail address(es): _____

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

NONE

9. List mechanical or electronic equipment to be used:

NONE

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

LEAD VEHICLE / BICYCLE - MUSCATINE RESCUE UNIT.

11. Number and types of animals to be used:

NONE.

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

MICROPHONE & SPEAKERS AT FINISH
4th & TOWA

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:

MUSCATINE RUMBLE CLUB WILL HAVE MONITORS
AT KEY INTERSECTIONS WITH SUPPORT FROM
MUSCATINE POLICE.

14. All plans for the provision of security:

SECURITY / BARRICADES WILL BE SET UP.
PROVIDED BY STREET DEPARTMENT
COMMIE MASON.

15. Beer or wine consumption? Yes _____ No X

16. Describe any items to be sold or distributed:

NONE

17. Is water connection requested? Yes _____ No X

18. Is electricity requested? Yes _____ No X

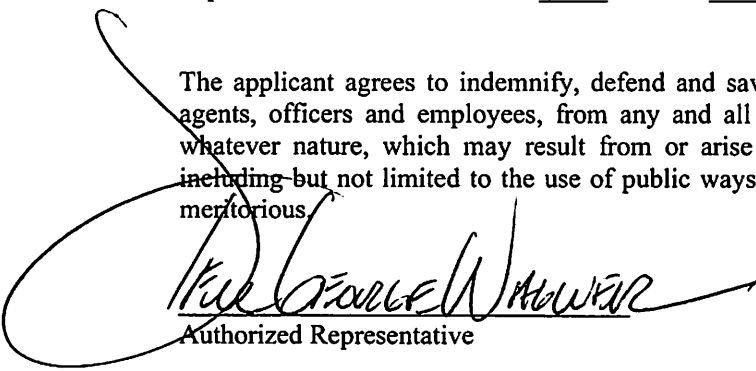
19. Have you provided a layout site plan for your proposed activity or event? Yes X No _____

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 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.


Authorized Representative

7/1/13
Date

TO BE COMPLETED BY CITY DEPARTMENTS:

I have reviewed the attached application with the following recommendations:

Recommend
Approval

☒
YES

☐
NO

[Signature] 7-15-13
Parks & Recreation Date

Comments:

☒
YES

☐
NO

[Signature] 7/2/13
Building & Zoning Date

☒
YES

☐
NO

[Signature] 7/5/13
Public Works Date

☒
YES

☐
NO

P. Targ 7/9/13
Police Chief Date

☒
YES

☐
NO

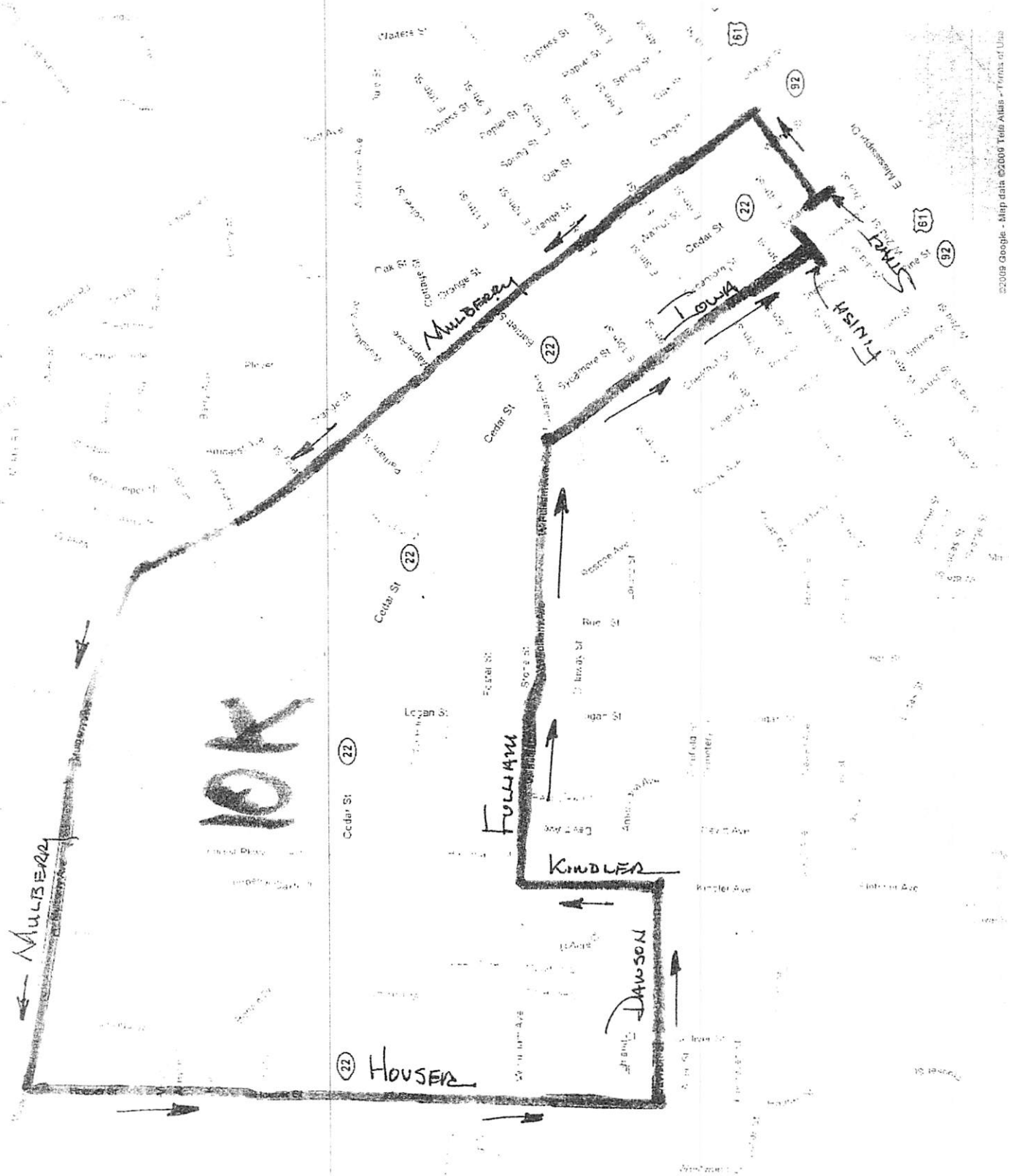
[Signature] 7/5/13
Fire Chief Date

FINAL APPROVAL:

☐
YES

☐
NO

City Administrator Date



Google maps

