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CITY CLERK'S OFFICE

CITY MASCATINE IOWANE

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:
	Senior Resources
	Address: 1808 Mulberry Aue
	Telephone number: 263-7292
	E-mail address: Sr. resources@Sr-resources.org
2.	Type of event that is planned:
	fund raiser "Hats OFF To Seniors"
	We would like to stand at a few intersections with hats or
	Containers for people to donate to Senior Resources. We plan to
	Containers for people to donate to Senior Resources. We plan to advertise, wear shirts signifying the event, and place signs before the intersections.
3.	Proposed location:
	Parham and Mulberry
	Cedar and Mulberry Parham
	9th and Cypress
	4- and cypiess
4.	Date(s)/Time(s): July 26-30, Various times between 8:00-5:30.
5.	Expected length of use: Various fines between 8-5:30 (2 hour chunks)
6.	Expected size of group: 3-4 people at each location at given times
7.	Names of any person or persons in charge of the proposed use at the specified location:
	Barb Krall, Serior Resources 263-7292
	or Teresa Sprague, Angela Freyermuth
	Address(es): 1808 Mulberry Ave
	Telephone Number(s): 263-7292
	E-mail address(es): barbkrall@sr-resources.org, teresasprague@sr-resources.org
	E-mail address(es): barbkrall@sr-resources.org, teresaspraque@sr-resources.org angelafreyermuth@sr-resources.org
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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:		
	none		
11.	Number and types of animals to be used:		
	none		
12.	A description of any sound amplification to be used:		
	none		
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:		
	no need		

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14	4. All plans for the provision of security:		
	none		
15	. Beer or wine consumption? Yes NoX		
16	. Describe any items to be sold or distributed:		
	Will distribute Thank you cards		
17	Is water connection requested? YesNoX		
18	Is electricity requested? Yes No_X		
19. Have you provided a layout site plan for your proposed activity or event? Yes No			
	If yes, please attach.		
	If no, please explain:		
	Hold hats or containers for people to donate to		
	Senior Resources.		
20. Do you understand that you will be financially responsible for all site restoration needed to restore the to pre-event status? Yes X No			
The applicant agrees to indemnify, defend and save harmless the City of Muscatine, together wagents, officers and employees, from any and all claims, lawsuits, damages, losses and expensions whatever nature, which may result from or arise from the activity or event covered by the princluding but not limited to the use of public ways, irrespective of whether said claims are frivolemeritorious.			
	Stresa Sprague Authorized Representative Angla Freyerment 6.25-10		

TO BE COMPLETED BY CITY DEPARTMENTS:

I have reviewed the attached application with the following recommendations:

Recommend Approval YES NO	Audul Murs 6-30-10 Parks & Recreation Date	Comments:
YES NO	Building & Zoning Date	
YES NO	Public Works Date	
YES NO	B. Talk 6/28/10 Politica Chief Date	
YES NO	Ac James Date	
FINAL APPR	City Administrator Date	