

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:

Tiffany Hood - Woods Farm Fresh Produce  
 Address: 2222 120<sup>th</sup> St. Wilton, IA 52778  
 Telephone number: 563 940 9669  
 E-mail address: cowgirlstif7@msn.com

2. Type of event that is planned:

Vender show (fundraiser)

3. Proposed location:

Parking (where Saturday market sets up)

4. Date(s)/Time(s): Sunday July 13<sup>th</sup>, 2014 11-2

5. Expected length of use: majority

6. Expected size of group: unknown yet

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

Tiffany Hood

Address(es): Same as above

Telephone Number(s): \_\_\_\_\_

E-mail address(es): \_\_\_\_\_



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

Plan to have a DJ - not confirmed yet.

9. List mechanical or electronic equipment to be used:

If we have a DJ, then their equipment

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:

N/A

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

DJ equipment if we hire one.

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:

5-10, vendors responsible for their own area.

14. All plans for the provision of security:

Myself & Volunteers supervising event.

15. Beer or wine consumption? Yes \_\_\_ No

16. Describe any items to be sold or distributed:

Vendor items (tupperware, makeup, bags, candles, etc.)  
Craft  
Fresh vegetables  
Cooked on the grill food

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:

Each vendor sets up in each parking spot, just like the Saturday market vendors do.

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.

Giffany Wood  
Authorized Representative

4/30/14  
Date

**TO BE COMPLETED BY CITY DEPARTMENTS:**

I have reviewed the attached application with the following recommendations:

Recommend Approval

YES  NO

*Michael Miller* 5-7-14  
Parks & Recreation Date

Comments:

[Empty comment box]

YES  NO

*[Signature]* 5/1/14  
Building & Zoning Date

MUST HAVE ALL VENDOR LICENSES + HEALTH INSPECTION APPROVALS FOR EVENT

YES  NO

*[Signature]* 5/2/14  
Public Works Date

[Empty comment box]

YES  NO

*B. Talbot* 5/12/14  
Police Chief Date

[Empty comment box]

YES  NO

*[Signature]* 5/6/14  
Fire Chief Date

[Empty comment box]

**FINAL APPROVAL:**

YES  NO

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

[Empty comment box]

*[Handwritten mark]*