

**CITY OF KENOSHA – DEPARTMENT OF PUBLIC WORKS
PARK USE AGREEMENT (PICNICS, WEDDINGS & BUILDING RENTALS)**

625 – 52nd Street
Room 305
Kenosha, Wisconsin 53140
OFFICE HOURS 8 AM – 4:30 PM MONDAY – FRIDAY

Phone: 653-4080
Fax: 653-4056

CASH OR CHECK ONLY – Make check payable to “City of Kenosha.”

OFFICE USE ONLY			
Rental Fees: _____	Beer/Wine: _____	Deposit: _____	Total Due: _____
Receipt #: _____	By: _____	Zimbra: _____	Park Calendar: _____
Access Database: _____		Date Paid & Permit Issued: _____	

INSTRUCTIONS:

- **Please Print (blue or black ink)**

Permitee Name: _____
Person authorized to sign this agreement on behalf of the organization.

Organization Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Daytime Phone: _____ Alternate Phone: _____

FACILITY REQUESTED: _____

Event Date: _____

Nature of Event: _____
(Be specific on what type of event – i.e., 16th birthday party, graduation, baby/bridal shower, wedding reception, etc.)

Attendance: _____ Time requested: From: _____ to _____
(Number of people) (INCLUDES SETUP AND TAKE DOWN)

PLEASE NOTE: PARK FACILITIES CLOSE AT 10 PM

Beer/Wine Permit (For Consumption Only – No Selling; MUST BE 21 OR OLDER) _____ (Yes or No)
The above-named assumes responsibility for exercising control over attendees behavior at the event.
This person or designee must be present for the duration of the event.

Do you plan to have a DJ? _____ (Yes or No)
Allowed only at Alford, Washington picnic shelters and Southport Beach House and Oribiletti Center.

Do you plan to have a Band? _____ (Yes or No)
Allowed only at Southport Beach House and Oribiletti Center.

Do you plan to place any tents/bouncy houses in the park area? _____ (Yes or No)
If yes, you must contact Diggers Hotline (1-800-242-8511) no later than five **(5) business** days prior to the event.

RESPONSIBILITIES OF THE DEPARTMENT OF PUBLIC WORKS – LIMITATIONS

The Department of Public Works, although responsible for the general maintenance of City parks, will not inspect the park area to be used immediately prior to the use to determine the suitability and safety of the use. In addition, it will not supervise such use.

RESPONSIBILITY OF APPLICANT

Please read and initial each responsibility:

- **Report unsafe conditions and/or any problems with your reservation to the Department of Public Works (653-4080 Monday-Friday 8am – 4:30pm) OR Park Supervisors: Dirk 262-945-7945 or Jeff 262-945-9134 or Non Emergency Police Number 656-1234 _____ (initial)**
- Inspect the park/facility area immediately prior to use to determine whether or not the area is suitable and safe for such use. If such inspection reveals that such area is not suitable and safe for the intended use, the area shall not be used until the area is made suitable and safe for such use. _____ (initial)
- Supervise all persons using area under authority of this agreement. Sponsoring individual/ organization must provide private security for gatherings of over 250 persons in the park. _____ (initial)
- **Beer/Wine Permit: MUST BE 21 YEARS OF AGE OR OLDER;** The consumption of fermented malt beverage and wine is permitted only by persons and groups appropriately licensed under state law and local ordinance. Liquor is prohibited. Beer, wine coolers, and wine are permitted only in designated parks as outlined in the Code of General Ordinances. The *selling* of fermented malt beverages is prohibited. Consumption of beer/wine is prohibited after 10:00 pm. _____ (initial)
- Use area in accordance with General and Special Park Rules and Regulations as outlined in the Code of General Ordinances, a copy of which is attached hereto. _____ (initial)
- **Clean up by the permittee is mandatory after the event. The permittee agrees to be responsible to:**
 - a. **Pay the cost of any damage to the facilities/equipment.**
 - b. **Excess cleanup costs which will be billed at \$50.00 per man hour incurred by the City.**
 - c. **Nails, tacks, staples, screws, and any kind of tape are prohibited; any use thereof will constitute damage and result in forfeiture of some or all of the prepaid deposit. _____ (initial)**
- **Cancellation Policy:** The City of Kenosha Department of Public Works requires a minimum of 30 days notification of any rental cancellation. A \$50.00 fee will be charged for any picnic or wedding cancellation. A \$50.00 fee will be charged for any park building (**Southport**) cancellation. All fees will be forfeited if events are canceled without minimum notification. Inclement weather on event date will not be considered as a reason for a refund. _____ (initial)
- Glass beverage containers are prohibited within the park/facility. _____ (initial)
- Upon approval of permittee's park use request, this form will be signed by the Public Works Director or an authorized representative of the Department of Public Works. A copy of this signed agreement will be given to the permittee and must be brought to the park site on the date of use. _____ (initial)
- Building rental (**Southport**) requires the permittee to pick up the keys at the Department of Public Works (625 - 52nd Street, Rm 305) on the day of the event or the Friday before the event if such event is held on a weekend. **Keys may be picked up between 8 AM and 4:30 PM and returned the next business work day.** _____ (initial)

The undersigned accepts responsibility for any damage to city property, fixtures, or buildings covered by this permit resulting from permittee's use of facilities, and are to abide by all rules of the Department of Public Works as stated in the attached Code of General Ordinances and attached Rules & Regulations.

I hereby certify that I shall be personally responsible on behalf of myself/organization for any damage sustained by the City of Kenosha Department of Public Works: park equipment, furniture, or facilities as a result of the occupancy of said premises by myself/organization. I agree to abide by and to enforce the rules, regulations, and policies of the City of Kenosha Department of Public Works affecting the use of recreation facilities.

THIS IS A LEGAL DOCUMENT CARRYING FINANCIAL OBLIGATIONS

Signature of Permittee: _____ Date: _____

Driver's License of Permittee: _____

Approved by: _____ Date: _____
Department of Public Works Director or Authorized Designee