Clerk's Office
7525 W. Greenfield Avenue
West Allis, WI 53214
(414) 302-8220
www.westalliswi.gov

CARNIVAL PERMIT

- Permit is valid during the period of the carnival listed below
- A $15 record check fee charged per person listed on the application (this fee is not waived)
- Fees shall be waived for churches where the carnival will be on church Grounds or the adjoining church/school grounds; within the BID and where the BID is the permit holder; and City-sponsored events.
- All fees are non-refundable
- Cash or check only
- Section 9.10 of the Revised Municipal Code

☐ **Renewal** ☐ **New** *****New applicants need right to premises approved by City Attorney*****

LICENSE FEE: $50 + RIDES/STANDS _____BACKGROUND CK ____ = TOTAL PAID: $_____

APPLICANT (All license information will be mailed or emailed to information provided in this section)	
Registered Business Name. Corporation or LLC *(complete Section II)*	
Registered Partnership Name *(complete Section II)*	
Individual *(complete Section I)*	
Federal Employer Identification Number (FEIN)	
Address of Entity	
E-Mail Address	
Phone Number	

ABOUT THE BUSINESS:	
Business Name (d/b/a)	
Premises Address *(where business is being conducted)*	
Business Phone Number	

SECTION I: INDIVIDUAL	
Name *(first, middle, last, suffix)*	
Address	
City and Zip	
Phone Number	
E-Mail Address	
Date of Birth	
Driver's License or State I.D.	☐☐☐☐-☐☐☐☐-☐☐☐☐-☐☐

SECTION II: CORPORATION, LLC, OR PARTNERSHIP (List names and addresses of all members)	
Name of Member *(first, middle, last, suffix)*	
Address	
City and Zip	
Phone Number	
E-Mail Address	
Date of Birth	
Driver's License or State I.D.	☐☐☐☐-☐☐☐☐-☐☐☐☐-☐☐

Name of Member *(first, middle, last, suffix)*	
Address	
City and Zip	
Phone Number	
E-Mail Address	
Date of Birth	
Driver's License or State I.D.	☐☐☐☐-☐☐☐☐-☐☐☐☐-☐☐

SECTION III: PERSON(S) IN IMMEDIATE CHARGE OF THE AMUSEMENT AT ALL TIMES DURING OPERATION	
Name of Member *(first, middle, last, suffix)*	
Address	
City and Zip	
Phone Number	
E-Mail Address	
Date of Birth	
Driver's License or State I.D.	☐☐☐☐-☐☐☐☐-☐☐☐☐-☐☐

IV. SPONSORING ORGANIZATION(S)	
Name of Organization	
Name of Principal Officers *(first, middle, last, suffix)*	
Address	
City and Zip	
Phone Number	
E-Mail Address	
Date of Birth	

Name of Principal Officers *(first, middle, last, suffix)*	
Address	
City and Zip	
Phone Number	
E-Mail Address	
Date of Birth	

V. CARNIVAL INFORMATION	
Carnival Name	
Location of Carnival	
Dates of Carnival	
Time of Carnival	
Description of the types of acts or entertainment to be shown	
Description of merchandise to be sold	
Will food be sold	Y N
Will carnival keep or use any ponies, horses, livestock or other animals	Y N

VI. THE FOLLOWING THREE ITEMS MUST BE SUBMITTED WITH EACH APPLICATION	
☐	**Cash bond or Surety Bond Attached.** The permittee shall deposit with the City no later than ten (10) days prior to the first day of conducting any carnival activity and shall maintain for a period of thirty (30) days after the termination of activities a cash bond of $5,000, or in lieu thereof shall post and maintain in full force and effect during said period a surety bond in the amount of $5,000. Such bond shall be issued by a surety company, approved by the City Attorney, and shall be in a form approved by the City Attorney. **Surety Bond Approved by City Attorney:**
☐	**Proof from the Dept. of Safety and Professional Services.** The applicant must provide proof from the Department of Safety and Professional Services stating the carnival and rides are in compliance with all applicable State of Wisconsin rules and regulations prior to issuance of permit.
☐	**Proof of insurance** in accordance with Wisconsin Administrative Code, Safety and Professional Services, Section 334.035 with an endorsement to the effect that the City will be indemnified and held harmless from any and all claims, damages or judgments arising from the granting of the permit or the operation of the show or exhibition.

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CARNIVAL PERMIT

By signing below, the applicant certifies under penalty of perjury, the above questions have been answered correctly. The applicant agrees that there shall be full compliance with all state and local laws in the conduct of the activities for which a permit may be granted.

_____
Applicant's Signature and Date

The applicant shall pay a permit fee as follows: **$100.00** for any combination of five (5) or less rides and/or stands, plus **$10.00** for each additional ride and/or stand. Please list below rides and/or stands.

	RIDES	STANDS
1.		
2.		
3.		
4.		
5		
6		
7		
8		
9		
10		

CLERK'S OFFICE USE		
LICENSE #	**Council: Granted**_____ **POF** _____ **Denied** _____	**Issued**
	Inspections: BINS _____**Fire** _____ **Health**_____**Police**_____.	