State of Wisconsin Department of Administration Division of Capitol Police DOA-4675 (R01/2018)



Wisconsin State Capitol Police 17 W. Main St., Room 301 Madison, WI 53703 Voice: (608) 266-7840 Fax: (608) 261-6789

## **State Facility Use Permit Application**

Applications should be mailed to the Wisconsin State Capitol Police Dept., 17 W. Main St., Room 301, Madison, WI 53703. Permit application must be in at least 72 hours prior to event. Applications are typically processed in ten (10) business days.

Organization Name				Telephone Number		
				( )	_	
Address		City	ty		Zip Code	
Applicant Name		On-Site Coordinator Name/Cell Phone Number				
Address		City	City		Zip Code	
Web Site Address (if applicable)		E-Mail Address				
Location Requested			Set-Up Time & Start Time			
Dates Requested		End Time & Completion of Tear-Down Time				
Describe Proposed Use						
If Marching, Start Point & End Point						
Square Closed?	If Yes, Time of Closing:	Yes, Time of Closing: Time Open:				
☐ Yes ☐ No	(If permit received from	om City of Madison for any event, please include copy of permit)				
Anticipated Speakers						
Equipment Needs (Electricity inside/outside a building, tables, chairs, TV lights, PA system, podium, easels, etc. see page 21 of the access policy)  There will be a charge for equipment/services.						
Speaker Needs						
Crowd Estimate						
Insurance Carrier or Bond Co. (attach copy	d) Policy Number or Bond Number					
<ul> <li>By signing this document I represent that I have read the Wisconsin State Facilities Event and Exhibit Policy, or had the same read to me, that I understand the provisions of the Policy, and I agree to be bound by the terms of the Policy, as well as Wisconsin Administrative Code Chapter ADM 2, and any other applicable provisions of Wisconsin Law.</li> <li>By signing this document I understand that I, or the organization on whose behalf I am signing this application, agree to pay any charges assessed to me or the organization which I represent, as outlined in the Wisconsin State Facilities Event and Exhibit Policy.</li> </ul>						
Applicant Signature		Date Signed				
☐ Approved ☐ Denied  Conditions & Additional Information:		Date Signed				
		Chief of Capitol Police or Designee				