

## Temporary Use of Public Right-of-Way Application and Permit Please allow up to 14 days for the processing of this application.

APPLICANT INFORMATION							
Contact Person:	E-M	Iail Address:	Business Name: 24-Hour F		24-Hour Phone:		
Richard Renner	rren	ner@vodvill.co	com Lawrence Busker Fest 785-749-2		785-749-2226		
Mailing Street	:		City:		State:	Zip:	Alternate Phone:
Address 408 In	ndiana Street		Lawrence		KS	66044	913-634-1711
	LIST DATE(	S) OF REQUE	STED USE O	F RIGHT	Γ-OF-W	AY BELO	OW
Date:	From Time:	To Time:	Location of U				
8/24/2012	4pm	11:30pm					k, 8 <sup>th</sup> street between
		13	Massachusetts and New Hampshire, 10 <sup>th</sup> street between				
			Massachusetts		v Hampsl	nire	
Date:	From Time:	To Time:	Location of U				
8/25/2012	11am	12am					nk, 8th street between
							street between
		Service Secondary	Massachusetts		v Hampsl	nire	
Date:	From Time:	To Time:	Location of U			20.2	7 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
8/26/2012	11am	7pm					nk, 8th street between
							street between
			Massachusetts		v Hampsl	nire	
Date:	From Time:	To Time:	Location of U	se:			
Date:	From Time:	To Time:	Location of U	se:			
Date:	From Time:	To Time:	Location of U	se:			
Date:	From Time:	To Time:	Location of Us	se:			
Or From Date to I		From Time:		ocation o			
Is applicant the ov	wner of the adjo	oining property	? Yes 🛛 Y	lo (If no,	attach the	e owner's	written permission)
Describe the use of	of this right-of-	way (attach/inc	lude a sketch or	site plan	of the ut	ilized righ	nt-of-way):
See attached							
NOTE: We are requesting an additional Liquor Ordinance to allow liquor cales on the							
NOTE: We are requesting an additional Liquor Ordinance to allow liquor sales on the							
right of way in front of the Sandbar on 8th street during the dates of the event.							
CK. NO. 1385 DATE 7/3/12							
OK NO 1385							
CK. NO. 7/3/12							
DATE							
			S AND NO PAI		SIGNS		
Do you need mete							
Do you need no parking signs?  Yes No If yes, how many (1 sign per 30 feet)?							

*		
Note: The police department will contact up. A \$3.00 deposit per bag/sign must b Is this project being undertaken on behalf yes to above, who is your main contact	e paid to the police department at that If of the City of Lawrence? Yes	t time.  No
I hereby agree to comply with the rule have read a copy of Chapter 16, Artic regulations therein. All documents re along with a sketch or site plan of application are not prorated or refunda-	les 8 & 9, of the City Code of Lawren equired by the City Code have been s the utilized right-of-way. All fees p	nce, Kansas, and understand the submitted with this application, paid for the processing of this
City of La  Sketch or s  MUTCD c  or vehicula  Written pe	of general liability insurance in the armore wrence listed as a certificate holder site plan of the utilized right-of-way ompliant traffic control plan if the act ar traffic in any way rmission of adjacent property owner(s DOT permit if applicable	tivity will impact pedestrian
Richard Renner	Richard Remar	7/2/12
APPLICANT'S NAME (Printed)	APPLICANT'S SIGNATURE	TODAY'S DATE

	OFFICE USE ONLY	
Application Received Date:	Insurance Certificate Submitted or on File?  Yes No	Payment Received?  Yes No
Does this application need rev	view by the Historic Resources Administrator?	Yes No

APPLICANT'S NA	Certificate of general liability insur- City of Lawrence listed as a certific  Sketch or site plan of the utilized ri MUTCD compliant traffic control p or vehicular traffic in any way  Written permission of adjacent prop Copy of KDOT permit if applicable Photos or illustrations of any above	rance in the amount of \$500,000 with the icate holder ight-of-way plan if the activity will impact pedestrian operty owner(s) if applicant is not owner le e-ground fixtures, equipment, or markers	
	OFFICE USE ON	NLY	
Application Received D	ate: Insurance Certificate Submitted of Yes No	or on File? Payment Received?  Yes No	
Permit reviewed by:	Development Services / Building Inspec Police Department Public Works Utilities Historic Resources Fire Medical Parks & Recreation/Forestry/Facilities Transit	tion	
City services needed:	Bus Re-routes Meter Bags No Parking Signs Barricades	<ul> <li>Yes □ No</li> <li>Yes □ No</li> <li>□ Yes □ No</li> <li>□ Yes □ No</li> </ul>	
<ol> <li>Applicant will restore</li> <li>Applicant will mainta</li> <li>Applicant will meet c</li> <li>If permit is for a side unobstructed sidewall</li> <li>If applicant will be di</li> </ol>	the City when any use of the right-of-way the right-of-way to City specifications. in all necessary MUTCD compliant traffic onditions of KDOT permit, if applicable. walk sale downtown, applicant must maint a for pedestrian travel. gging, trenching, or boring within ten feet tain approval of the city Parks & Recreation	ic control devices throughout the project.  Intain at least six feet of continuous  It of ten feet of any tree in the right-of-way,	
	City Manager or Designee	Date	
RIGHT-OF-WA OFFICER OR E	SHOULD BE PROMINENTLY DISPLY IS BEING USED OR BE AVAILA MPLOYEE OF THE CITY OF LAWR	ABLE FOR REVIEW BY ANY RENCE UPON DEMAND.	

US Bank Plaza

ATM

Massachusetts Street

## New Hampshire

	barricades	
Alley	Eighth Street	Alley
	barricades	

Massachusetts

## New Hampshire

	barricades	i		
Alley	Tenth Street	L.	Alley	
	barricades			

Massachusetts



We support this request.

Business Name

DAN HUGHTES JOUNET

Manager/Owner

804 MASS. ST.

Address

(785) 843-5000



We support this request.
India palace.
Business Name
Manager/Owner And
Address
Ing ElothsT
Phone 785-331-4300



WellSpring School of autied Health

Business Name

Tami Melson, Student Services & Operations Manager

Manager/Owner

947 New Hampshire, Lawrence

Address

Phone

We support this request.



We support this request.

Queen Lizzy's Fishe + CHIP SHOP
Business Name
NATT POJETEN.
Manager/Owner
125 E 10 M St
Address
783 550 7638.
Phone



We support this request.
ZejWeheSpa
Business Name
Ashky Butch
Manager/Owner
13 E. 8th St. Lawren a KS Cole OK
Address
(705) 865-4372
Phone



We support this	
RICHAROS	MUSIC
Business Name	
JAMES	PILLER
Manager/Owne	r
15 E	874
Address	
(785)	842-0021
Phone	



We support this request.
Star Struck Clothing
Business Name
Leslie Grother
Manager/Owner
16 E 8th Lawrence, KS 66044
Address
785.423.0471
Phone



We support this request

State Hair Jalan
Business Name
Soul Ors
Manage V Owner
12. S. Sh street
Address
\$ 785-830-940D
Phone



We support this request.	
Laugh Out Land	and the formula of the second
Business Name	
Christic Peterson	
Manager/Owner	
1000 Mass, Suite D	
Address /	
785-856-3737	
Phone	