

PARK AND RECREATION BOARD AGENDA - AMENDED
MONDAY APRIL 7, 2025
7:00 PM
BOARD ROOM, MUNICIPAL BUILDING, 210 COTTONWOOD AVENUE

Call to Order

Public comments for those items not included on this agenda: (Please be advised the Park and Recreation Board will receive information from the public for a three-minute time period per person with time extensions per the Park and Recreation Chairperson's discretion. Be it further advised that there may be limited discussion on the information received, however, no action will be taken under public comments.)

1. Consideration of a motion to approve the Park and Recreation minutes of the February 3, 2025, meeting.

Recreation –

2. Discussion and possible consideration on food truck at Oconomowoc Rugby Tournament at Centennial Field.
3. Discussion and possible consideration for a Special Event use of the Fine Arts Center for a musical put on by the KM Explore Charter School: Wales Elementary Campus – 5th Grade, Beckie Cavanaugh.
4. Discussion and possible consideration for Hartland National Night, August 7th, Nixon Park.

Public Works –

5. Update of Hartbrook Park playground unit installation.
6. Update on Nixon Park and Hartbrook Park's Whirl along with Annual Playground Inspections.
7. Discussion of the parking lot improvements for Penbrook Park.
8. Discussion on placement of BID sculpture in Nixon Park.
9. Update of the seeding process for the Cottonwood Wayside and the portion ECOS is having the DPW seed with wildflowers.
10. Update on the Scoreboard electrical work at Nixon Park and the flagpole improvements.
11. Update on power supply updates at Nixon Parks.

Other Items for Consideration

12. Announcements: It is not contemplated that these matters will be discussed or acted upon and may include items for future consideration. The following individuals may provide announcements: Park and Recreation Board members or other Village Staff members.

13. Adjourn
Deidre Bush y
Deputy Clerk

Notice: Please note that upon reasonable notice, efforts will be made to accommodate the needs of disabled individuals through appropriate aids and services. For additional information or to request this service, contact the Village Clerk, at (262)367-2714. The Municipal Building is handicap accessible.

PARK AND RECREATION BOARD MINUTES
MONDAY FEBRUARY 3, 2025
7:00 PM
BOARD ROOM, MUNICIPAL BUILDING, 210 COTTONWOOD AVENUE

Present: Tim Hallquist, Shaunta' de Boer, Kathy Van Thiel, Randy Ferrell, Nick Miller, Rick Conner, and Craig Eisenhut.

Others: Sara Rennekamp, Tom Jenson, Leo Jungbluth, Heather Costa, Ryan Bailey, Erin Guenterberg, Jim Muenzenberger, and Trevor De Boer.

7:00 PM Call to Order

Public comments for those items not included on this agenda: (Please be advised the Park and Recreation Board will receive information from the public for a three-minute time period per person with time extensions per the Park and Recreation Chairperson's discretion. Be it further advised that there may be limited discussion on the information received, however, no action will be taken under public comments.)

*Trevor de Boer – would like to see an archery range at the Marsh up at Cottonwood wayside at the Y site. He would like to see it on a future agenda to see if they can get it going.

1. Consideration of a motion to approve the Park and Recreation minutes of January 6, 2025.

Motion (Miller/Conner) to approve the January 6, 2025, minutes. Carried (7-0).

Recreation –

2. Discussion and consideration for Special Event for Kiwanis Bark River Bash-

Jim Muenzenberger was present for Kiwanis to explain the event. He said they have done the event for several years and are looking to bring it back with pretty much the same circumstances that they have done before. He said some items that were new last year were a bounce house and an obstacle course that went over well. The vendors were moved last year behind the seating areas of the fine arts center and that went over well. He said they are still going over some of the details. He the children's entrepreneurial market has approached them to see if they could be the vendors this year. He said the kids produce the items they are selling, the kids sell it, and the kids erect the booths they use to sell it. He said that maybe a potential change from what they have done in the past. He said they usually charge for the booths because that offsets some of the costs but just wanted to bring it up to the Park Board. He said this is a fundraiser for Kiwanis and is asking them to waive the fees. The proceeds will go towards the children's library. Brief discussion on the children's entrepreneurial market.

Motion (Eisenhut /Conner) to approve the Special Event for the Kiwanis Bark River Bash as requested and move the responsibility of the fee waiving to the Village Board. Carried (7-0).

3. Discussion and consideration for Special Event Hartland Kids Day 2025-

Erin Guenterberg said this year's Hartland Kids Day which will be held on July 30th, 2025 from 9am- 1pm. She said she had a department meeting with staff to go over the planning of the event. It is pretty much a repeat from last year and working with departments regarding safety and parking. Hallquist asked if

there were problems with parking. Jungbluth said last year they let food vendors park in the park parking lot. There will be 4-6 food trucks this year as well.

Motion (Ferrell/Miller) to approve the Special Event for Hartland Kids Day 2025. Carried (7-0).

Public Works –

4. Discussion of ECOS Committee 2025 Projects-

Jim Muenzenberger was present to explain the ECOS 2025 projects. He said they still meet usually monthly and continue to work on the environmental corridor. They have been busy working all the way down from Centennial Park and have made it down to almost the tracks now. Now they are looking at the track along the bark river which is the mill place greenway. He said he has had a discussion with staff about this area, it is a very nice natural area with a lot of nice species there, some grasses and a very nice dogwood. He said there are also a lot of invasive species that you would expect buckthorn and honey suckle. He said they would like to remove that particular growth so that the naturals can continue there. Muenzenberger said they have been talking with staff and if things they have to consider there are sensitivity because we do have property owners that have backyards that border that area, even though this is village property that we are talking about, then the backyards of people that are on Cottonwood Ave and have the river in their backyard, it provides a screen for them. They are not looking to do clear cutting in the area of any sort, they want to be respectful of all of that. He said they thought number one, it would be wise for them to have access to be able to take trees out of the river in that area so creating some pathways to get that from the path where mechanical vehicles can get in there to haul things away would be a wise thing. He said the committee would still like to make Bark River navigable all the way from Centennial Park until it leaves our borders. That is something they would still like to work on, so they are still looking for volunteers and friends' groups to try to do this by hand. Public Works Director Jenson commented that they won't be as intrusive as the original plan was. Hallquist asked if the ECOS committee is done with Penbrook and Muenzenberger said staff came back to them and said maybe they should reconsider some areas.

Muenzenberger explained the landing area near the Cottonwood Bridge. He said there is a very low bank and said they could level it out.

Muenzenberger said with maintenance they are still battling Japanese knotweed at Centennial.

Other items for Consideration-

5. Discussion on future Beer Garden and Village Board possible closed session to discuss at their meeting-

Village Manager Bailey explained the future of the Beer Garden will be discussed in a closed session at the next Village Board meeting. The Beer Garden is still going to be there, and the goal is for it to be better than ever as it is an asset to the village. He said everyone looks forward to it and we just need to make sure it is run well.

6. Announcements: It is not completed that these matters will be discussed or acted upon and may include items for future consideration. The following individuals may provide announcements: Park and Recreation Board members or other Village Staff members.

None.

- Rennekamp said she has decided to step down as Recreation Director and this Friday is her last day. She said it has been a privilege to be in this seat for 2 years and she is proud of everything that has been done together as a team. She said Heather is here and she will do great. T-ball opened a week ago and there are 120 registrants. There are 12 on a waiting list for Tuesdays and St. Charles has a wait list as well. Sara said she is working on a recreation manual, so the next team has some idea of what to do going forward.
- Jenson – an old tree in Nixon was taken down that was filled with concrete and rebar. Also, they are working on scheduling of scoreboard.
- Bailey said he met with the new Chamber Director, and he wants to promote Village businesses. Also new Bid president from US bank.

7. Adjourn -

Motion (de Boer/Miller) to adjourn. Carried (7-0).

Meeting adjourned at 7:46 pm.

Respectfully submitted By Recording Secretary,
Deidre Bushey - Deputy Clerk



Village of Hartland

Park Food Vendor Application
210 Cottonwood Ave, Hartland, WI 53029
Office: (262) 367-2714 Fax: (262) 367-2430

Contact Information

Business Name Cousins Subs
Business Owner Name Janelle Schmitz (general manager not owner)
Home/Cell Phone (414)312-6709 Email gm1210@cousinssubs.com
Address 117 w national ave City/Zip Milwaukee 53204

Food vendors that hold a Retail Food License are required to provide a copy with proof of insurance.

- Copy of Retail Food Facilities license issued by Waukesha County or State of Wisconsin
Copy of Proof of Insurance

Food vendors and products that do not require a Retail Food License: (check if applicable):

- non-profit church sports event prepacked products
Homemade baked goods - goods produced in baker's home that are shelf stable & do not require refrigeration.
Pickles, sauerkraut, jam, jellies, salsas and applesauce.

Event Information

Person/Group Reserving Park Facility/Event Name Oconomowoc Rugby Football Club
Event Location: Centennial Park Event Date 6/14/25
Arrival Time (include set-up time) 10:00 am Departure Time (include clean-up time) 3:00 pm
Description of what will be sold: Sub sandwiches, fries, cheese curds, drinks
Location where food will be sold:

Food Vendor Fee

Vendor Fee \$75

Check, cash and credit card are accepted (checks payable to Village of Hartland). Fees and deposits must be paid at the time of application.

Application must be approved by the Village's Park and Recreation Board. I verify the information provided and agree to the Park Board's Policy and Village Ordinance regarding Park Usage.

Park Food Vendor Fee

Signature Date

Name (please print)

Office Use Only: Date Paid Amount Paid Receipt # Processed

367180

FOOD PEDDLER MOTORIZED (RESTAURANT)

FPMREST - 0001839

EFF DATE: 06/19/2024 EXP DATE: 06/18/2025



Jan R. D'Amico

city clerk
www.milwaukee.gov/license

LESCH, KIM J, AGENT
COUSINS SUBMARINES, INC
117 W NATIONAL AV
MILWAUKEE, WI 53204-1808

ALDERMANIC DISTRICT 12

Vehicle Information:

PERMIT NO: 0987

2016 FORD UTILIYIVAN Grey TRUCK

VIN: 1F66F5KY5G0A12893

PLATE: FB1221

Food Est Num: 1839
Unique Identifier: 0987

City Hall - Room 105 - 200 East Wells Street - Milwaukee, WI 53202-3570 - Phone (414) 286-2238 - Fax (414) 286-3057

Email: license@milwaukee.gov - Website: www.milwaukee.gov/license



city of milwaukee
www.milwaukee.gov/license



Jan R. D'Amico

city clerk


license required to be displayed or carried

EXPIRATION DATE: 06/18/2025
LIC. NO: FPMREST 0001839
LICENSE: FOOD PEDDLER MOTORIZED (RESTAURANT)
LESCH, KIM J, AGENT
COUSINS SUBMARINES, INC
117 W NATIONAL AV
MILWAUKEE, WI 53204-1808

LESCH, KIM J, AGENT
COUSINS SUBMARINES, INC
N83 W13400 LEON RD AV
MENOMONEE FALLS, WI 53051



COUSSUB-01

AHANSON

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/10/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Risk Strategies Milwaukee 1103 Hunter Dr Ste 100 Mount Pleasant, WI 53406	CONTACT NAME: PHONE (A/C, No, Ext): (262) 321-1111 FAX (A/C, No): (262) 619-2805 E-MAIL ADDRESS: JIS-insurance@Risk-Strategies.com												
INSURER(S) AFFORDING COVERAGE													
INSURED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">INSURER A : Middlesex Insurance Company</td> <td style="width: 20%;">NAIC # 23434</td> </tr> <tr> <td>INSURER B : Insurance Company of the West</td> <td>27847</td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </table>	INSURER A : Middlesex Insurance Company	NAIC # 23434	INSURER B : Insurance Company of the West	27847	INSURER C :		INSURER D :		INSURER E :		INSURER F :	
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INSURER C :													
INSURER D :													
INSURER E :													
INSURER F :													
Cousins Submarines Inc N83 W13400 Leon Rd Menomonee Falls, WI 53051-3306													

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:			A0205168	11/1/2024	11/1/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			A0205168	11/1/2024	11/1/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			A0205168	11/1/2024	11/1/2025	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000
B	<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	WW15073860	11/1/2024	11/1/2025	PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER**CANCELLATION**

The Village of Hartland
 210 Cottonwood Ave
 Hartland, WI 53029

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Andrea Hanson



VILLAGE OF HARTLAND

210 Cottonwood Avenue | Hartland, WI 53029 | 262-367-2714

ATHLETIC FACILITY SCHEDULING APPLICATION

Organization or individual's name: Oconomowoc Rugby Football Club

Tax Exempt: No Yes - attach WI Sales & Use Tax Exemption Certificate, form S-211

Point of contact name: Jeff Olson

Phone number: 262-366-0757 Email: Olso.Jefs@gmail.com

Address: 107 W29921 Hartling Rd, Hartland, WI 53029

Additional contact: Beth Wiza

Phone number: 262-210-9491 Email: WizaEAD8@yahoo.com

Additional contact: _____

Phone number: _____ Email: _____

I verify the documented information and agree to abide by the Field Restoration Agreement, Park Board's policies, and Village ordinances regarding park usage.

Beth Wiza
Signature

1/16/25
Date

FIELDS AND FEES

Reservation date: June 14, 2025
If reserving multiple dates, please attach a schedule.

DEPOSITS

Number of Participants	1-50	51-100	101-200	201-300	301+
Refundable Deposit Amount	\$50	\$100	\$200	\$300	\$400

LARGE BASEBALL FIELDS

Park	Base Fee	Tax (if applicable)	Deposit (see above)	Number of Field Preps	Restoration Deposit (one time fee)	Total Due
Centennial	\$45	\$2.25		___ x \$60 = \$_____ (total prep fees)	\$150	
Nixon	\$45	\$2.00		___ x \$60 = \$_____ (total prep fees)	\$150	
Hartbrook	\$40	\$2.25		___ x \$60 = \$_____ (total prep fees)	\$150	
Penbrook	\$40	\$2.00		___ x \$60 = \$_____ (total prep fees)	\$150	



VILLAGE OF HARTLAND

210 Cottonwood Avenue | Hartland, WI 53029 | 262-367-2714

USER GROUP REGISTRATION FORM

For organization members who would like access to the schedule in Civic Rec. An automated email will be sent with a temporary password to complete Civic Rec registration.

Please print legibly and fill out completely.

REGISTRATION DETAILS

ORGANIZATION NAME: Oconomowoc Rugby Football Club
 NAME: Beth Wiza DATE OF BIRTH: 12/8/85 GENDER: F
 ADDRESS: 707 W. Pioneer Rd CITY: Meguan ST: WI ZIP: 53097
 PHONE: 262-210-9491 THIS NUMBER CAN RECEIVE TEXT MESSAGES: YES NO
 EMAIL: ORFCBoard@gmail.com
 EMERGENCY CONTACT NAME: Mercede Champlin RELATIONSHIP: treasurer
 PHONE: 262-510-5819 EMAIL: MercedeChamplin@gmail.com

All Hartland Recreation Department participants are asked to sign this liability release and consent to use of images. I the undersigned, do hereby agree to allow the above-named to participate in the activity indicated. I am aware of and understand that there may be potential risks inherent with participating in any recreational activities and that the Village of Hartland does not provide accident or health insurance coverage for any participant. I assume all risks and hazards incidental to such participation including transportation to and from the activities and do hereby waive, release, absolve, indemnity and agree to hold harmless the Village of Hartland, its officers, employees, staff, agents and other contract instructors for any and all claims, injuries, liabilities, damage or cause of action directly or indirectly arising out of the use of Village of Hartland facilities, equipment, and/or participation in Village of Hartland Recreation Department programs/activities. However, in the event of a medical emergency, I authorize the Village of Hartland staff to obtain medical treatment for the above-named participant. I consent and give permission for all images of myself and the above-named participant to appear in media/promotion/information materials approved by the Village of Hartland without any payment or consideration. This consent/grant of use of images includes but is not limited to the distribution/publication by any means including but not limited to the Internet, and by means of e-mails, magazines, newsletters, pamphlets, news articles, advertisement flyers, and in whatever other manner the Village of Hartland finds useful or utilizes for any other lawful purpose. This release shall continue indefinitely, until I otherwise revoke said release in writing. In the event of a revocation, I agree that the Village will not initiate any new use of images of myself or the above named participant within any new material(s) after the date of actually being notified of my revocation, but will not be obligated to withdraw or retract any distribution, circulation or publication of any existing material(s) containing any image of or information about myself or the above named participant.

SIGNATURE: Beth Wiza DATE: 1/16/25



VILLAGE OF HARTLAND

210 Cottonwood Avenue | Hartland, WI 53029 | 262-367-2714

USER GROUP REGISTRATION FORM

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Please print legibly and fill out completely.

REGISTRATION DETAILS

ORGANIZATION NAME: Oconomowoc Rugby Football Club

NAME: Beth Wiza DATE OF BIRTH: 12/8/85 GENDER: F

ADDRESS: 707 W. Pioneer Rd CITY: Mequon ST: WI ZIP: 53097

PHONE: 262-210-9491 THIS NUMBER CAN RECEIVE TEXT MESSAGES: YES NO

EMAIL: ORFC.Board@gmail.com

EMERGENCY CONTACT NAME: Mercede Champlin RELATIONSHIP: treasurer

PHONE: 262-510-5819 EMAIL: MercedeChamplin@gmail.com

All Hartland Recreation Department participants are asked to sign this liability release and consent to use of images. I the undersigned, do hereby agree to allow the above-named to participate in the activity indicated. I am aware of and understand that there may be potential risks inherent with participating in any recreational activities and that the Village of Hartland does not provide accident or health insurance coverage for any participant. I assume all risks and hazards incidental to such participation including transportation to and from the activities and do hereby waive, release, absolve, indemnity and agree to hold harmless the Village of Hartland, its officers, employees, staff, agents and other contract instructors for any and all claims, injuries, liabilities, damage or cause of action directly or indirectly arising out of the use of Village of Hartland facilities, equipment, and/or participation in Village of Hartland Recreation Department programs/activities. However, in the event of a medical emergency, I authorize the Village of Hartland staff to obtain medical treatment for the above-named participant. I consent and give permission for all images of myself and the above-named participant to appear in media/promotion/information materials approved by the Village of Hartland without any payment or consideration. This consent/grant of use of images includes but is not limited to the distribution/publication by any means including but not limited to the Internet, and by means of e-mails, magazines, newsletters, pamphlets, news articles, advertisement flyers, and in whatever other manner the Village of Hartland finds useful or utilizes for any other lawful purpose. This release shall continue indefinitely, until I otherwise revoke said release in writing. In the event of a revocation, I agree that the Village will not initiate any new use of images of myself or the above named participant within any new material(s) after the date of actually being notified of my revocation, but will not be obligated to withdraw or retract any distribution, circulation or publication of any existing material(s) containing any image of or information about myself or the above named participant.

SIGNATURE: Beth Wiza DATE: 1/16/25

SMALL BASEBALL FIELDS

Park	Base Fee	Tax (if applicable)	Deposit (see above)	Number of Field Preps	Restoration Deposit (one time fee)	Total Due
Hartbrook	\$35	\$1.75		___ x \$20 = \$_____ (total prep fees)	\$150	
Joliet	\$35	\$1.75		___ x \$20 = \$_____ (total prep fees)	\$50	
Nixon	\$35	\$1.75		___ x \$20 = \$_____ (total prep fees)	\$50	

SOFTBALL FIELD (includes Bark River shelter)

Park	Base Fee	Tax (if applicable)	Deposit (see above)	Number of Field Preps	Restoration Deposit (one time fee)	Total Due
Bark River	\$45	2.25		___ x \$60 = \$_____ (total prep fees)	\$150	

SOCCER FIELDS

Park	Base Fee	Tax (if applicable)	Deposit (see above)	Number of Field Preps	Restoration Deposit (one time fee)	Total Due
Centennial (large)	\$35	\$1.75	100	___ x \$80 = \$_____ (total prep fees)	\$550	685
Hartbrook (large)	\$35	\$1.75		___ x \$80 = \$_____ (total prep fees)	\$550	
Hartbrook (small)	\$35	\$1.75		___ x \$80 = \$_____ (total prep fees)	\$550	
Penbrook (large)	\$35	\$1.75		___ x \$80 = \$_____ (total prep fees)	\$550	

FOOTBALL FIELD

Park	Base Fee	Tax (if applicable)	Deposit (see above)	Number of Field Preps	Restoration Deposit (one time fee)	Total Due
Centennial	\$105	5.25	100	___ x \$80 = \$_____ (total prep fees)	\$550	755

TENNIS/PICKLEBALL COURTS (booked in 2 hour blocks)

Park	Base Fee per Court	Number of Courts	Number of 2 Hour Blocks per Court	Tax (if applicable) (base fee x # of courts x # of blocks x .05)	Total Amount Due
Nixon	\$30				
Penbrook	\$30				

OFFICE USE ONLY

Date: 3/25 Field Fees: \$105 Deposit: \$100 Preps: _____ Restoration: \$2100

Court(s): _____ Permit number: _____ Date Entered: 3/25

Refunds
TE Field (101-46725): _____ Field (101-46720) _____ Deposit (101-23000): _____

Preps (101-46725): _____ Restoration (101-23000): _____ Approved by: _____

Handwritten notes:
\$105
\$35
\$100
\$1100
\$550
\$550
\$1000



VILLAGE OF HARTLAND

210 Cottonwood Avenue | Hartland, WI 53029 | 262-367-2714

PARK FACILITY RESERVATION APPLICATION

Organization name (if applicable): Oconomowoc Rugby Football Club

Tax Exempt: No Yes - attach WI Sales & Use Tax Exemption Certificate, form S-211

Point of contact name: Jeff Olson

Phone number: 262-366-0757 Email: Olso.Jeff@gmail.com

Address: 1107 W39921 Hartling Rd, Hartland, WI 53099

Additional contact: Beth Wiza

Phone number: 262-210-9491 Email: WizaEAP8@yahoo.com

I verify the information provided and agree to the Park Board's policy and Village Ordinances regarding park usage.

Beth Wiza
Signature

1/16/25
Date

RENTAL INFORMATION

Reservation date: June 14, 25 Event type: Rugby Tournament - ...

Arrival time (including set up): 7am Departure time (including clean up): 1pm

Attendance: 150 Electricity: Yes No

RENTAL FEES

Checks (payable to the Village of Hartland), cash, and credit card are accepted. All fees must be paid at the time of reservation.

Park Shelter/Open Space

- Bark River (may not use if athletic field is reserved)
- Centennial Park
- Cottonwood Wayside
- Hartbrook Park
- Nixon Splash Pad Shelter 1
- Nixon Splash Pad Shelter 2
- Nixon Park Shelter 4 (by Fine Arts Center)
- Penbrook Park (may not use if athletic field is reserved)
- Other structures to be placed in park (bounce house, dunk tank, climbing wall, etc.) **\$100 Deposit Required**
- Open Space Reserved (describe area below)

Rental Fee (based on attendance)

Attendees	Resident	Non-Resident
<input type="checkbox"/> 0 - 50	\$85.00	\$140.00
<input type="checkbox"/> 51 - 100	\$100.00	\$155.00
<input checked="" type="checkbox"/> 101+	\$150.00	\$205.00

Refundable Deposit (based on attendance)

Attendees	Deposit Amount
<input type="checkbox"/> 0 - 100	No deposit required
<input checked="" type="checkbox"/> 101 - 200	\$200.00
<input type="checkbox"/> 201+	\$300.00

Rental Fee 150

Tax (5%) on rental fee _____

Deposit 200

Structure Deposit _____

Total Due 350

Date/time rec'vd: _____ Total: _____

Date entered: _____ Permit Number: _____



Wisconsin Sales and Use Tax Exemption Certificate

Form
S-211

Do not send this certificate to the Department of Revenue

Purchaser: Complete this certificate and give it to the seller.

Seller: If this certificate is not fully completed, you must charge sales tax. Keep this certificate as part of your records.

Check One Single Purchase Continuous

Purchaser Information			
Business Name <u>Oconomowoc Rugby Football Club</u>		Type of Business <u>501(c)3</u>	
Business Address <u>1105 W17365 Lee Place</u>		City <u>Menomonee Falls</u>	State <u>WI</u>
Purchaser's Tax ID Number <u>90-0060827</u>		ZIP Code <u>53051</u>	
State of Issue <u>Wisconsin</u>			
If no Tax ID Number, enter one of the following:	FEIN	Driver's License Number/State Issued ID Number	State of Issue
Seller Information			
Name <u>VILLAGE OF HARTLAND</u>			
Address <u>210 COTTONWOOD AVENUE</u>		City <u>HARTLAND</u>	State <u>WI</u>
		ZIP Code <u>53029</u>	

Reason for Exemption

Resale (Enter purchaser's seller's permit or use tax certificate number) _____

Manufacturing and Biotechnology

- Tangible personal property (TPP) or item under s.77.52(1)(b) that is used exclusively and directly by a manufacturer in manufacturing an article of TPP or items or property under s.77.52(1)(b) or (c) that is destined for sale and that becomes an ingredient or component part of the article of TPP or items or property under s.77.52(1)(b) or (c) destined for sale or is consumed or destroyed or loses its identity in manufacturing the article of TPP or items or property under s.77.52(1)(b) or (c) destined for sale.
- Machines and specific processing equipment and repair parts or replacements thereof, exclusively and directly used by a manufacturer in manufacturing tangible personal property or items or property under s.77.52(1)(b) or (c) and safety attachments for those machines and equipment.
- The repair, service, alteration, fitting, cleaning, painting, coating, towing, inspection, and maintenance of machines and specific processing equipment, that the above purchaser would be authorized to purchase without sales or use tax, at the time the service is performed. Tools used to repair exempt machines are not exempt.
- Fuel and electricity consumed in manufacturing tangible personal property or items or property under s.77.52(1)(b) or (c) in this state. Percent of fuel exempt: _____ % Percent of electricity exempt: _____ %
- Portion of the amount of fuel converted to steam for purposes of resale. Percent of fuel exempt: _____ %
- Property used exclusively and directly in qualified research, by persons engaged in manufacturing at a building assessed under s. 70.995, by persons engaged primarily in biotechnology in Wisconsin, or a combined group member conducting qualified research for another combined group member that meets these requirements.

Farming (To qualify for this exemption, the purchaser must use item(s) exclusively and directly in the business of farming, including dairy farming, agriculture, horticulture, floriculture, silviculture, beekeeping or custom farming services.)

- Tractors (except lawn and garden tractors), all-terrain vehicles (ATV) and farm machines, including accessories, attachments, and parts, lubricants, nonpowered equipment, and other tangible personal property or items or property under s.77.52(1)(b) or (c) that are used exclusively and directly, or are consumed or lose their identities in the business of farming. This includes services to the property and items above.
- Feed, seeds for planting, plants, fertilizer, soil conditioners, sprays, pesticides, and fungicides.
- Breeding and other livestock, poultry, farm work stock, bees, beehives and bee combs.
- Containers for fruits, vegetables, bee products, grain, hay, and silage (including containers used to transfer merchandise to customers), and plastic bags, sleeves, and sheeting used to store or cover hay and silage. Baling twine and baling wire.
- Animal waste containers or component parts thereof (may only mark certificate as "Single Purchase").
- Animal bedding, drugs for farm livestock or bees, and milk house supplies.

Governmental Units and Other Exempt Entities

Enter CES No., if applicable
048089

- The United States and its unincorporated agencies and instrumentalities.
- Any federally recognized American Indian tribe or band in this state.
- Wisconsin state and local governmental units, including the State of Wisconsin or any agency thereof, Wisconsin counties, cities, villages, or towns, and Wisconsin public schools, school districts, universities, or technical college districts.
- Organizations meeting the requirements of section 501(c)(3) of the Internal Revenue Code. Wisconsin organizations must enter a CES number above.

Other

- Containers and other packaging, packing, and shipping materials, used to transfer merchandise to customers of the purchaser.
- Trailers and accessories, attachments, parts, supplies, materials, and service for motor trucks, tractors, and trailers which are used exclusively in common or contract carriage under LC, IC, or MC No. (if applicable) _____.
- Machines and specific processing equipment used exclusively and directly in a fertilizer blending, feed milling, or grain drying operation, including repair parts, replacements, and safety attachments.
- Building materials acquired solely for and used solely in the construction or repair of holding structures used for weighing and dropping feed or fertilizer ingredients into a mixer or for storage of such grain, if such structures are used in a fertilizer blending, feed milling, or grain drying operation.
- Tangible personal property purchased by a person who is licensed to operate a commercial radio or television station in Wisconsin, if the property is used exclusively and directly in the origination or integration of various sources of program material for commercial radio or television transmissions that are generally available to the public free of charge without a subscription or service agreement.
- Fuel and electricity consumed in the origination or integration of various sources of program material for commercial radio or television transmissions that are generally available to the public free of charge without a subscription or service agreement.
 Percent of fuel exempt: _____ % Percent of electricity exempt: _____ %
- Tangible personal property, property, items and goods under s.77.52(1)(b), (c), and (d), or services purchased by a Native American with enrollment # _____, who is enrolled with and resides on the _____ Reservation, where buyer will take possession of such property, items, goods, or services.
- Tangible personal property and items and property under s.77.52(1)(b) and (c) becoming a component of an industrial or municipal waste treatment facility, including replacement parts, chemicals, and supplies used or consumed in operating the facility. Caution: Do not check the "continuous" box at the top of page 1.
- Portion of the amount of electricity or natural gas used or consumed in an industrial waste treatment facility.
 (Percent of electricity or natural gas exempt _____ %)
- Electricity, natural gas, fuel oil, propane, coal, steam, corn, and wood (including wood pellets which are 100% wood) used for fuel for residential or farm use.

	% of Electricity Exempt	% of Natural Gas Exempt	% of Fuel Exempt
<input type="checkbox"/> Residential	Farm _____ %	_____ %	_____ %
<input type="checkbox"/>	_____ %	_____ %	_____ %
- Address Delivered: _____
- Percent of printed advertising material solely for out-of-state use. _____ %
- Catalogs, and the envelopes in which the catalogs are mailed, that are designed to advertise and promote the sale of merchandise or to advertise the services of individual business firms.
- Computers and servers used primarily to store copies of the product that are sent to a digital printer, a plate-making machine, or a printing press or are used primarily in prepress or postpress activities, by persons whose NAICS code is 323111, 323117, or 323120.
- Purchases from out-of-state sellers of tangible personal property that are temporarily stored, remain idle, and not used in this state and that are then delivered and used solely outside this state, by persons whose NAICS code is 323111, 323117, or 323120.
- Other purchases exempted by law. (State items and exemption). _____

I declare that the information provided is complete and accurate to the best of my knowledge, and that the product(s) purchased will be used in the exempt manner indicated. If a product is not used in an exempt manner, I will remit use tax on the purchase price at the time of first taxable use. I understand that failure to remit the use tax may result in a future liability, including tax, interest, and penalty.

CAUTION: Using this certificate to avoid paying sales tax may result in a fine of \$250 for each transaction for which the certificate is used

Signature of Purchaser <i>Elizabeth Wze</i>	Print or Type Name Elizabeth Wze	Title Vice President	Date 1/16/25
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Village of Hartland/Oconomowoc Rugby Club Centennial Park Use Agreement

WHEREAS, the Village of Hartland (hereinafter "Village") owns and maintains a public park and football field in Centennial Park in the Village; and

WHEREAS, the football field is proposed to be used by the Oconomowoc Rugby Club (hereinafter "ORC") for games being played on the soccer field and football field,

NOW THEREFORE, THE VILLAGE AND NLS HEREBY AGREE AS FOLLOWS:

1. ORC will apply for the use of the soccer and football field for the tournament by way of a Village provided Athletic Facility Reservation Form and signed agreement.
2. ORC is intending the use of the soccer and football field for a tournament for Rugby football teams.
3. Use of score board and press box for games is to be coordinated with the Lake Country Chiefs who own these items.
4. The Village will provide standard field maintenance as necessary including watering, weed/pest control, and cutting.
5. Village agrees to a cut length of 3 inches for the tournament. Standard cutting frequency is weekly.
6. Village will provide refuse/recycling collection.
7. Village will provide restroom maintenance and cleaning from April 15th – October 15th weather permitting.
8. ORC will adhere to the Village Field Use Guidelines.
9. ORC will provide field equipment including, but not limited to, sideline and goal markings/flags, down markers and other equipment necessary for games.
10. ORC will clean area after the tournament and deposit trash/recyclable items into collection containers. This includes the soccer field, bleachers, parking lot and surrounding park land area.
11. ORC and Village will coordinate and agree on field use and cancellation due to weather or field conditions.
12. The fees to use the soccer and football fields will defer to the Athletic Facility Application. This includes games and practices. ORC will pay the full amount for the intended use of the soccer and football fields prior to any use.

**Village of Hartland/Oconomowoc Rugby Club
Centennial Park Use Agreement**

13. Neither ORC nor any other agency may place any advertising, names or logos on the Village property without prior written approval from the Village Park and Recreation Board and Village Board.
14. ORC will not be allowed to store hand tools, equipment, field paint, or field painter at the park.
15. This agreement is for the date of 6/14 from 7 am to 7 pm. If the agreement is cancelled, the Village requires that ORC, at their sole expense, remove all of their equipment and restore all Village property to its condition prior to installation of these items and ORC's use (see item eleven). Notwithstanding paragraph 16, this agreement may be cancelled at any time by the Village Board in the event ORC fails to adhere to the terms of this agreement, especially as they relate to repair of the field after each use to make the surface acceptable by the Village's standards for use by another group.
17. The ORC will be required to maintain, throughout the period of the tournament, insurance with coverage as provided below:
 - A. Comprehensive General Liability Insurance in an amount of at least \$1,000,000. The policy must include the Village and its agents, officers and employees as "additional insured" along with the appropriate endorsement pages.
 - B. Comprehensive Professional Liability Insurance in an amount of a least \$1,000,000 for coverage to insure the activities of the coaches, manager, administrators and officers of the organizations engaging in recreational activities on Village Park land is recommended, but not required. The policy should include the Village and its agents, officers and employees as "additional insured".
18. The ORC will provide to the Village a one thousand (\$1,000.00) dollar deposit that will be refunded if clean-up and field restoration is satisfactorily completed by July 1st. This may be retained by the Village if damage, other than vandalism, has occurred or cleaning of the facility is required. Additional funds shall be billed should the deposit not be enough to repair any damage to the field because of their use. The Village would charge the current labor rate plus 50% for fringe benefits and any material costs in addition to a 3% administrative charge for billing purposes.
19. Neither the ORC nor any other agency shall make any modifications/alterations to the facility without prior written approval of the Village.
20. The ORC shall indemnify, defend and hold harmless the Village of Hartland and its elected officials, board members and employees from and against any and all claims, costs, expenses, losses, damages, demands, actions or causes of action which may be asserted against or incurred by Village as a result of ORC use of the property or ORC items used on property. A certificate of insurance shall be provided to the Village at the beginning of each year.

Village of Hartland/Oconomowoc Rugby Club
Centennial Park Use Agreement

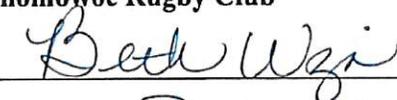
Dated this 23 day of January, 2025.

Village of Hartland

By:  _____

Ryan Bailey, Village Manager

Oconomowoc Rugby Club

By:  _____

Printed Name: Beth Wiza _____

Title: Vice President _____



210 Cottonwood Avenue
 Hartland WI 53029
 262-367-2714 FAX: 262-367-2430
www.villageofhartland.wi.gov

SPECIAL EVENT PERMIT APPLICATION

Permit approved	_____	Date	_____
Permit fees paid	_____	Date	_____
Deposit paid	_____	Date	_____
Deposit returned	_____	Date	_____
FEES ARE NON-REFUNDABLE			

APPLICATION AND PERMIT FEES ARE REQUESTED 60 DAYS PRIOR TO YOUR EVENT. EVENTS WITHIN 60 DAYS ARE SUBJECT TO DENIAL BY VILLAGE STAFF OR THE VILLAGE BOARD.

ORGANIZATION INFORMATION

Name of Organization KM Explore Charter School: Wales Elementary Campus			
Street Address 219 North Oak Crest Drive	City Wales	State WI	Zip 53183
Phone Number 262-968-6400	Are you a 501(c)3 Organization?		Yes <input type="checkbox"/> No <input type="checkbox"/>
Event Contact Person (First & Last Name) Beckie Cavanaugh			
Address 1398 Bae Court	City Oconomowoc	State WI	Zip 53066
Email Cavanaughr@kmsd.edu	Phone Number 708-670-7756	Day of Event Phone Number 708-670-7756	
If applicant is a partnership, provide names, addresses and phone numbers for all partners. Provide names, addresses and phone numbers for all officers and directors if corporation or members if applicant is a limited-liability company.			

EVENT INFORMATION

Name of Event Pirates the Musical- KM Explore Concert	Date(s) of Event 05/06/25
Event Start Time 6:00	Event End Time 7:00 pm
Location of the Event* Nixon Park Fine Arts Performance Space	
Will your event take place in a Village of Hartland Park?	X Yes <input type="checkbox"/> No <input type="checkbox"/>
<p>You MUST attach a detailed map/diagram of your event indicating the specific location and layout for event including vendors, generators, parking, proposed road closures, structures and portable toilets.</p> <p>*If you are using a Village Park, you must complete the Park Facility Reservation Application and reserve the park facility prior to getting your special event permit approved by the Village Board.</p>	

OTHER INFORMATION			
Generally describe your event and its purpose This is a elementary school K-5th grade concert. There are no vendors, tickets or charging. This is open to the public but the audience is mainly parents and families of the students. The kids are performing Pirates the Musical. It's about 40 minutes long.			
Estimated Number of Participants 100	Spectators 200	Vendors 0	
Will alcohol be sold/served? <i>If yes, liquor and bartender licenses are necessary under separate application.</i>	Yes	<input checked="" type="checkbox"/>	<input type="checkbox"/> NO
Will you be selling/serving food?	Yes	<input checked="" type="checkbox"/>	<input type="checkbox"/> No
Will you have food trucks? <i>If yes, you will need to obtain Outside Food Vendor Permits under separate application.</i>	Yes	<input checked="" type="checkbox"/>	<input type="checkbox"/> No
If yes, how many food trucks will be at the event?			
Will you be selling merchandise? <i>If yes, you will need to obtain a Solicitor's Permit under separate application.</i>	Yes	<input checked="" type="checkbox"/>	<input type="checkbox"/> No
Does the event involve fireworks? <i>If yes, you will need to obtain a Fireworks Permit under separate application.</i>	Yes	<input checked="" type="checkbox"/>	<input type="checkbox"/> No
Does the event involve amplified music?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/> No
If yes, will the amplified music be a: Small Portable Speaker Band DJ			
Hours of amplified music:	6-7 pm. It is a portable speaker and two microphones.		
Noise is regulated within the Village of Hartland. The Village ordinance states that no person shall make loud noise such as may tend to unreasonably annoy or disturb the peace and quiet of another in the vicinity. Music for special events shall terminate at 9:00 p.m. if the event held Sunday through Thursday and at 11:00 p.m. if the event is held on a Friday, Saturday or holiday weekend.			
Is street closure requested?	Yes	<input checked="" type="checkbox"/>	<input type="checkbox"/> No
Hours of street closure:			
Diagram for Street Closure Provided?	Yes	<input checked="" type="checkbox"/>	<input type="checkbox"/> No
Will you need barricades provided by the Village for your event?	Yes	<input checked="" type="checkbox"/>	<input type="checkbox"/> No
How many barricades needed for your event?			
"Road Closed" signs requested?	Yes	<input checked="" type="checkbox"/>	<input type="checkbox"/> No
Will you be erecting any tents, canopies or other temporary structure(s)? <i>If yes, You will need to provide a plan for their proposed locations and the Department of Public Works will need to inspect these structures prior to the start of your event. Tents over 400 sq. feet will require inspection by the Building Inspector.</i>	Yes	<input checked="" type="checkbox"/>	<input type="checkbox"/> No
Will you be providing portable restrooms and wash stations?	Yes	<input checked="" type="checkbox"/>	<input type="checkbox"/> No

OTHER INFORMATION CONTINUED

If yes, how many will you provide and where will they be located? Also how will solid waste be disposed of?

Will you provide parking for participants?

Yes

No

If yes, where will parking be available?

Will you provide a dumpster/clean-up services?

Yes

X No

If yes, please describe your clean-up and refuse collection plan.

Will the event require additional security?

Yes

X

No

Will you have an emergency plan in the event of severe weather?

X

Yes

No

Will the event require first aid and/or emergency responders?

Yes

X

No

INSURANCE REQUIREMENTS

The Special Event Sponsor will obtain liability insurance for the event. Proof of this insurance with coverage no less than \$1,000,000, must list the Village of Hartland as an additional insured party and is due no later than 20 days before the event.

Are you able to provide these insurance documents?

Yes

X No

DEPOSIT REQUIREMENTS

For events to held in a Village Park: The applicant may be required to submit to the Village a refundable deposit based on number of attendees (see Park Facility Reservation Application). The deposit shall be refunded to applicant, if, upon inspection, all is in order, or a prorated portion thereof as may be necessary to reimburse the Village for loss or cleaning costs. The Village reserves the right to retain the entire deposit if cleanup is not completed satisfactorily in the time frame as specified in the permit. Unless otherwise stated in the permit, the applicant shall be fully responsible for all necessary cleanup associated with the permitted event to be completed within twelve (12) hours after the conclusion of the event.

TERMINATION OF AN EVENT

The Village reserves the right to shut down a special event that is in progress if it is deemed to be a public safety hazard by the Hartland Police Department and/or Fire Department and/or there is a violation of Village Ordinances, State Statutes or the terms of the Applicant's permit. The Village Administrator and/or his/her designee may revoke an approved Special Events Permit if the applicant fails to comply in good faith with the provisions of the permit prior to the event date.

By signing this form, the applicant certifies authorization to act on behalf of their organization and hereby agrees to hold the Village, its officers, employees, agents and contractors, harmless against all claims, liability, loss, damage or expense (including but not limited to actual attorney's fees) incurred by the Village for any damage or injury to person or property caused by or resulting directly or indirectly from the activities for which the permit is granted. Any change to coverage requires Village approval. The applicant is responsible for obtaining all necessary reservations, permits and licenses.

Rebeckah Cavanaugh



4/2/25

Signature of Applicant

Date

For staff use only

Park/Rec. Board approval, if necessary, on:

Application forwarded to:

- Administrator
- Building Inspector
- Fire Chief
- Police Chief
- Public Works Director
- Rec Director

Village Board approval, if necessary, on:

Date: _____

DEPT.	APPROVE	DENY	BY	REASON (if denied)
Bldg. Insp.				
Clerk				
Fire				
Police				
Public Works				
Rec				

Fees

_____ Outside Food Vendors	_____ Special Event Permit	TOTAL FEES _____
_____ Park Facility Fees	_____ Temp. Bartender's	
_____ Solicitor's Permit(s)	_____ Temp. Class B	

All requirements for this special event have been met.

Village Administrator approval

Date

VILLAGE OF HARTLAND FINE ARTS CENTER RESERVATION APPLICATION

210 Cottonwood Avenue

Hartland, WI 53029

Phone 262-367-2714

FAX 262-367-2430

Organization or Individual's Name: _____

Name of Person In Charge: _____

Telephone Number:(Home) _____ (Work) _____ (EMAIL) _____

Address: _____
Street/Mailing Zip Code

If Above Person Cannot Be Reached: _____

Telephone Number:(Home) _____ (Work) _____ (EMAIL) _____

Address: _____
Street/Mailing Zip Code

Name of Group, Performer: _____

Description of Entertainment: _____

Is Sponsor Classified as Non-Profit: _____

Other Permits Required: Beer Shelter Other

Date Paid: _____ Fee Paid _____ Deposit Paid _____ Receipt Number _____

FEES	Resident	0 – 50	51 – 100	101 – 200	201	
			\$80.00+ 4.00	\$100.00 + 5.00	\$125.00 + 6.25	\$150.50 + 7.53
	Non Resident	0 – 50	51 – 100	101 – 200	201 +	
		\$100.00+ 5.00	\$130.00+ 6.25	\$170.00 + 8.50	\$200.00 + 10.00	
<i>Note: Deposit to be paid by all users</i>		0-50	51-100	101-200	201-300	300+
Refundable Deposit Amounts		\$50.00	\$100.00	\$200.00	\$300.00	\$400.00

(Office Use Only)

Permit Number _____	Date of Use	Time of Use	Resident/ Non-Resident	Estimated Attendance	Insurance Certificate Required as Determined by Village (y or n)	Electricity Needed (y or n)	TOTAL FEE/DEPOSIT	Date Issued	Issued By
Fine Arts Center (FAC)									
Food/Beverage Sales at Concession Window?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No								
Sales of Other Items? Describe Items and Point of Sale									

I verify the documented information and agree to abide by the Park Board's Policy and Village Ordinances regarding Park Usage.

R. Ansh
 Signature

PLEASE BRING THIS PERMIT WITH YOU TO THE PARK

VILLAGE OF HARTLAND FINE ARTS CENTER USE POLICY

1. The goal of the establishment of the Fine Arts Center is to make available a facility that would encourage family usage with programming which could reasonably be accommodated by the size and layout of the Facility and conditions with respect to the surrounding area such as availability of parking, access routes and public safety staffing.
2. Permits for prior uses approved by the Park Board and repeated on an annual basis may be approved by staff and permits for other use of the Fine Arts Center must be submitted to the Park Board in writing on this application for approval. Requests will be granted or denied by the Park Board. (Park Board meets the first Monday of the month at 7:00 p.m. in the Village Board Room in the Village Hall). Permits must be submitted for approval two weeks prior to the Park Board meeting.
3. For scheduling purposes, uses sponsored by the Village of Hartland through a single event or series will have priority. The uses will be scheduled beginning January 1 of the year they are going to occur. Other uses may be scheduled after April 1 of the year they are going to occur. Water service and restrooms will be shut off/closed from October 15 to May 1.
4. Sponsor of Fine Arts Center use may be required to provide proof of insurance. Determination as to whether insurance will be required will be made by the Park Board. Permit holder shall submit proof of general liability coverage for not less than \$500,000 and provide an original Certificate of Insurance, naming the Village of Hartland and its agents, officers and employers as additional insured parties. Minimum 30-day notice of cancellation shall be provided.
5. All uses must be free of charge. Participants may not pass a collection plate, or solicit from the audience. Donations may be accepted at concession areas only. Material distribution must be confined to the concession areas.
6. Uses of the Fine Arts Center shall not begin before sun up and shall end no later than sun down or the specific requested closing time approved by the Park Board.
7. Sales of food or refreshments by civic groups are allowed at the concession area (defined as the window in the Fine Arts Center). Sales of any other items anywhere else at the Fine Arts Center are subject to Park Board and/or Village Board approval.
8. Vehicles cannot be parked in the picnic areas or on the grass.
9. No grills, fire or hot coals will be permitted within the FAC building.
10. All equipment and articles must be removed from the park by sun down or the closing time approved by the Park Board.
11. It will be the responsibility of the sponsor/individual reserving the Fine Arts Center to pick up litter in the area after the event, including in the Fine Arts Center, concession area, rest rooms and surrounding park area. The applicant will be responsible for any damage or excessive clean up required and the cost will be deducted from the deposit.
12. Cancellation policy. The Village reserves the right to cancel or stop use at any time. Reasons may include but are not limited to failure to comply with regulations, inclement weather with potential damage to grounds, lack of crowd control, conduct or activity not covered in original proposal. The Village Administrator, Director of Public Works, Police Chief and/or Fire Chief or their designated representatives shall have the authority to cancel an event. If the applicant desires to cancel, proper notice should be provided to the Village as soon as possible.
13. If Shelter #4 is reserved, applicant shall pay the reservation fee. See Shelter reservation application.
14. Picnic Tables Usage: There are a limited number of picnic tables available in the parks for all users. Large groups will provide their own additional seating. Please respect the rights of others to utilize the park facilities.
15. The volume of radios, sound systems, etc. must be kept at level so as to not unreasonably annoy or disturb the peace and quiet of other park users or surrounding residents in accordance with Section 9.07 of the Municipal Code.
16. Supervision: The applicant and all named persons responsible for supervision must be present from the time the facility is opened, while the event is in progress, and must wait until all users of the building have vacated the building or premises and have completed security measures. The applicant and the individuals supervising the function shall be responsible for the conduct and control of both patrons and participants of each function. The applicant and individuals supervising are responsible for seeing that no equipment or other portions of facilities are used except those that are requested in the building use application. The applicant and the persons responsible for supervision shall see that the facility is left in the same condition as when the organization entered the facility.
17. It shall be the responsibility of the applicant and those associated with applicant to avoid the violation of any provision of the Village of Hartland, State or Federal ordinances, Statutes, regulations and codes. The individual/organization using the facility assumes all responsibilities for injuries that may occur to persons or participants.
18. No smoking will be allowed in the Fine Arts Center building.
19. Keys may be picked up at the Village Hall M-F, 7:30 a.m. – 4:30 p.m. They must be returned to the Village within 48 hours after FAC use during normal office hours or may be left in the drop box located at the front of the Village Hall. It shall be the responsibility of the applicant to make sure the facility is locked up after use.
20. The FAC restrooms are open to all park patrons and are not exclusive to the permit holder.
21. **Malt Beverages:** Are permitted in all picnic areas when a valid malt beverage permit is procured from the /Admin. Office. FAC/shelter reservation is required if so desired. No other intoxicating liquor products are permitted.
22. **Refunds:** In case of cancellation, permit fee can be refunded **ONLY IF**, at least **TWO WEEKS** prior to event, a written request and **ORIGINAL PERMIT** are received by the Village Hall office. A \$10.00 fee will be charged for administrative processing. The **ORIGINAL PERMIT**, a written request and a \$10.00 fee is required to change a reservation.
23. Dogs must be licensed, on a leash not exceeding six feet in length and under the owner's control. Owners shall promptly remove and dispose of any excrement in a sanitary manner.



Wisconsin Sales and Use Tax Exemption Certificate

Form S-211

Do not send this certificate to the Department of Revenue

Purchaser: Complete this certificate and give it to the seller.

Seller: If this certificate is not fully completed, you must charge sales tax. Keep this certificate as part of your records.

Check One Single Purchase Continuous

Purchaser Information			
Business Name School District of Kettle Moraine		Type of Business Education	
Business Address 563 AJ Allen Cir		City Wales	State WI
Purchaser's Tax ID Number		ZIP Code 53183	
If no Tax ID Number, enter one of the following:		Driver's License Number/State Issued ID Number	State of Issue
FEIN 39-1024329			
Seller Information			
Name			
Address		City	State ZIP Code

Reason for Exemption

Resale (Enter purchaser's seller's permit or use tax certificate number) _____

Manufacturing and Biotechnology

- Tangible personal property (TPP) or item under s.77.52(1)(b) that is used exclusively and directly by a manufacturer in manufacturing an article of TPP or items or property under s.77.52(1)(b) or (c) that is destined for sale and that becomes an ingredient or component part of the article of TPP or items or property under s.77.52(1)(b) or (c) destined for sale or is consumed or destroyed or loses its identity in manufacturing the article of TPP or items or property under s.77.52(1)(b) or (c) destined for sale.
- Machines and specific processing equipment and repair parts or replacements thereof, exclusively and directly used by a manufacturer in manufacturing tangible personal property or items or property under s.77.52(1)(b) or (c) and safety attachments for those machines and equipment.
- The repair, service, alteration, fitting, cleaning, painting, coating, towing, inspection, and maintenance of machines and specific processing equipment, that the above purchaser would be authorized to purchase without sales or use tax, at the time the service is performed. Tools used to repair exempt machines are not exempt.
- Fuel and electricity consumed in manufacturing tangible personal property or items or property under s.77.52(1)(b) or (c) in this state.
Percent of fuel exempt: _____ % Percent of electricity exempt: _____ %
- Portion of the amount of fuel converted to steam for purposes of resale. Percent of fuel exempt: _____ %
- Property used exclusively and directly in qualified research, by persons engaged in manufacturing at a building assessed under s. 70.995, by persons engaged primarily in biotechnology in Wisconsin, or a combined group member conducting qualified research for another combined group member that meets these requirements.

Farming (To qualify for this exemption, the purchaser must use item(s) exclusively and directly in the business of farming, including dairy farming, agriculture, horticulture, floriculture, silviculture, beekeeping or custom farming services.)

- Tractors (except lawn and garden tractors), all-terrain vehicles (ATV) and farm machines, including accessories, attachments, and parts, lubricants, nonpowered equipment, and other tangible personal property or items or property under s.77.52(1)(b) or (c) that are used exclusively and directly, or are consumed or lose their identities in the business of farming. This includes services to the property and items above.
- Feed, seeds for planting, plants, fertilizer, soil conditioners, sprays, pesticides, and fungicides.
- Breeding and other livestock, poultry, farm work stock, bees, beehives and bee combs.
- Containers for fruits, vegetables, bee products, grain, hay, and silage (including containers used to transfer merchandise to customers), and plastic bags, sleeves, and sheeting used to store or cover hay and silage. Baling twine and baling wire.
- Animal waste containers or component parts thereof (may only mark certificate as "Single Purchase").
- Animal bedding, drugs for farm livestock or bees, and milk house supplies.

Governmental Units and Other Exempt Entities

Enter CES No., if applicable

008-1020420480-05

- The United States and its unincorporated agencies and instrumentalities.
- Any federally recognized American Indian tribe or band in this state.
- Wisconsin state and local governmental units, including the State of Wisconsin or any agency thereof, Wisconsin counties, cities, villages, or towns, and Wisconsin public schools, school districts, universities, or technical college districts.
- Organizations meeting the requirements of section 501(c)(3) of the Internal Revenue Code. Wisconsin organizations must enter a CES number above.

Other

- Containers and other packaging, packing, and shipping materials, used to transfer merchandise to customers of the purchaser.
- Trailers and accessories, attachments, parts, supplies, materials, and service for motor trucks, tractors, and trailers which are used exclusively in common or contract carriage under LC, IC, or MC No. (if applicable) _____.
- Machines and specific processing equipment used exclusively and directly in a fertilizer blending, feed milling, or grain drying operation, including repair parts, replacements, and safety attachments.
- Building materials acquired solely for and used solely in the construction or repair of holding structures used for weighing and dropping feed or fertilizer ingredients into a mixer or for storage of such grain, if such structures are used in a fertilizer blending, feed milling, or grain drying operation.
- Tangible personal property purchased by a person who is licensed to operate a commercial radio or television station in Wisconsin, if the property is used exclusively and directly in the origination or integration of various sources of program material for commercial radio or television transmissions that are generally available to the public free of charge without a subscription or service agreement.
- Fuel and electricity consumed in the origination or integration of various sources of program material for commercial radio or television transmissions that are generally available to the public free of charge without a subscription or service agreement.
Percent of fuel exempt: _____ % Percent of electricity exempt: _____ %
- Tangible personal property and items, property and goods under s.77.52(1)(b), (c), and (d) to be resold by _____ on my behalf where _____ is registered to collect and remit sales tax to the Department of Revenue on such sales.
- Tangible personal property, property, items and goods under s.77.52(1)(b), (c), and (d), or services purchased by a Native American with enrollment # _____, who is enrolled with and resides on the _____ Reservation, where buyer will take possession of such property, items, goods, or services.
- Tangible personal property and items and property under s.77.52(1)(b) and (c) becoming a component of an industrial or municipal waste treatment facility, including replacement parts, chemicals, and supplies used or consumed in operating the facility. Caution: Do not check the "continuous" box at the top of page 1.
- Portion of the amount of electricity or natural gas used or consumed in an industrial waste treatment facility.
(Percent of electricity or natural gas exempt _____ %)
- Electricity, natural gas, fuel oil, propane, coal, steam, corn, and wood (including wood pellets which are 100% wood) used for fuel for residential or farm use.

	% of Electricity Exempt	% of Natural Gas Exempt	% of Fuel Exempt
<input type="checkbox"/> Residential	_____ %	_____ %	_____ %
<input type="checkbox"/> Farm	_____ %	_____ %	_____ %
- Address Delivered: _____
- Percent of printed advertising material solely for out-of-state use. _____ %
- Catalogs, and the envelopes in which the catalogs are mailed, that are designed to advertise and promote the sale of merchandise or to advertise the services of individual business firms.
- Computers and servers used primarily to store copies of the product that are sent to a digital printer, a plate-making machine, or a printing press or are used primarily in prepress or postpress activities, by persons whose NAICS code is 323111, 323117, or 323120.
- Purchases from out-of-state sellers of tangible personal property that are temporarily stored, remain idle, and not used in this state and that are then delivered and used solely outside this state, by persons whose NAICS code is 323111, 323117, or 323120.
- Other purchases exempted by law. (State items and exemption). _____

I declare that the information provided is complete and accurate to the best of my knowledge, and that the product(s) purchased will be used in the exempt manner indicated. If a product is not used in an exempt manner, I will remit use tax on the purchase price at the time of first taxable use. I understand that failure to remit the use tax may result in a future liability, including tax, interest, and penalty.

CAUTION: Using this certificate to avoid paying sales tax may result in a fine of \$250 for each transaction for which the certificate is used

Signature of Purchaser 	Print or Type Name Jeremy Struss	Title Finance Manager	Date 10/20/2021
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(DETACH AND PRESENT TO SELLER)



210 Cottonwood Avenue
 Hartland WI 53029
 262-367-2714 FAX: 262-367-2430
www.villageofhartland.wi.gov

SPECIAL EVENT PERMIT APPLICATION

Permit approved	_____	Date	_____
Permit fees paid	_____	Date	_____
Deposit paid	_____	Date	_____
Deposit returned	_____	Date	_____

FEES ARE NON-REFUNDABLE

APPLICATION AND PERMIT FEES ARE DUE 60 DAYS PRIOR TO YOUR EVENT

ORGANIZATION INFORMATION			
Name of Organization Village of Hartland			
Street Address 210 Cottonwood Avenue	City Hartland	State WI	Zip 53029
Phone Number 262-367-2714	Are you a 501(c)3 Organization?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Event Contact Person (First & Last Name) Heather Costa			
Address 210 Cottonwood Avenue	City Hartland	State WI	Zip 53029
Email heatherc@villageofhartland.wi.gov	Phone Number 262-367-0352	Day of Event Phone Number 262-367-0352	
If applicant is a partnership, provide names, addresses and phone numbers for all partners. Provide names, addresses and phone numbers for all officers and directors if corporation or members if applicant is a limited-liability company.			

EVENT INFORMATION	
Name of Event National Night Out	Date(s) of Event August 7, 2025
Event Start Time 6:00 pm	Event End Time 9:00 pm
Location of the Event* Nixon Park	
Will your event take place in a Village of Hartland Park?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<i>You MUST attach a detailed map/diagram of your event indicating the specific location and layout for event including vendors, generators, parking, proposed road closures, structures and portable toilets.</i>	
<i>*If you are using a Village Park, you must complete the Park Facility Reservation Application and reserve the park facility prior to getting your special event permit approved by the Village Board.</i>	

OTHER INFORMATION

Generally describe your event and its purpose National Night Out is a community event that promotes police along with fire and DPW. There will be vendors, activities, food and music.

Estimated Number of Participants 1,000	Spectators	Vendors 4-6
---	------------	----------------

Will alcohol be sold/served? <i>If yes, liquor and bartender licenses are necessary under separate application.</i>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
---	---	-----------------------------

Will you be selling/serving food? The beer garden along with food vendors	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
---	---	-----------------------------

Will you have food trucks? <i>If yes, you will need to obtain Outside Food Vendor Permits under separate application.</i>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
---	---	-----------------------------

If yes, how many food trucks will be at the event?		
--	--	--

Will you be selling merchandise? <i>If yes, you will need to obtain a Solicitor's Permit under separate application.</i>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
--	------------------------------	--

Does the event involve fireworks? <i>If yes, you will need to obtain a Fireworks Permit under separate application.</i>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
---	------------------------------	--

Does the event involve amplified music? Thursday Night Concert Series	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
---	---	-----------------------------

If yes, will the amplified music be a:	<input checked="" type="checkbox"/> Band	<input type="checkbox"/> DJ
--	--	-----------------------------

Hours of amplified music:	6-9 pm
---------------------------	--------

Noise is regulated within the Village of Hartland. The Village ordinance states that no person shall make loud noise such as may tend to unreasonably annoy or disturb the peace and quiet of another in the vicinity. Music for special events shall terminate at 9:00 p.m. if the event held Sunday through Thursday and at 11:00 p.m. if the event is held on a Friday, Saturday or holiday weekend.

Is street closure requested?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
------------------------------	------------------------------	--

Hours of street closure:	
--------------------------	--

Diagram for Street Closure Provided? No street closure, Nixon Park parking lot closure	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
--	------------------------------	--

Will you need barricades provided by the Village for your event?	Yes	No
--	-----	----

How many barricades needed for your event?		
--	--	--

"Road Closed" signs requested? Park parking lot closed for event	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
--	---	-----------------------------

Will you be erecting any tents, canopies or other temporary structure(s)? <i>If yes, You will need to provide a plan for their proposed locations and the Department of Public Works will need to inspect these structures prior to the start of your event. Tents over 400 sq. feet will require inspection by the Building Inspector.</i>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
---	------------------------------	--

Will you be providing portable restrooms and wash stations?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
---	------------------------------	--

OTHER INFORMATION CONTINUED

If yes, how many will you provide and where will they be located? Also how will solid waste be disposed of?

Will you provide parking for participants?

Yes No

If yes, where will parking be available? Street parking, municipal lot parking

Will you provide a dumpster/clean-up services?

Yes No

If yes, please describe your clean-up and refuse collection plan.

Will the event require additional security?

Yes No

Will you have an emergency plan in the event of severe weather?

Yes No

Will the event require first aid and/or emergency responders?

Yes No

INSURANCE REQUIREMENTS

The Special Event Sponsor will obtain liability insurance for the event. Proof of this insurance with coverage no less than \$1,000,000, must list the Village of Hartland as an additional insured party and is due no later than 20 days before the event.

Are you able to provide these insurance documents?

Yes No

DEPOSIT REQUIREMENTS

For events to held in a Village Park: The applicant may be required to submit to the Village a refundable deposit based on number of attendees (see Park Facility Reservation Application). The deposit shall be refunded to applicant, if, upon inspection, all is in order, or a prorated portion thereof as may be necessary to reimburse the Village for loss or cleaning costs. The Village reserves the right to retain the entire deposit if cleanup is not completed satisfactorily in the time frame as specified in the permit. Unless otherwise stated in the permit, the applicant shall be fully responsible for all necessary cleanup associated with the permitted event to be completed within twelve (12) hours after the conclusion of the event.

TERMINATION OF AN EVENT

The Village reserves the right to shut down a special event that is in progress if it is deemed to be a public safety hazard by the Hartland Police Department and/or Fire Department and/or there is a violation of Village Ordinances, State Statutes or the terms of the Applicant's permit. The Village Administrator and/or his/her designee may revoke an approved Special Events Permit if the applicant fails to comply in good faith with the provisions of the permit prior to the event date.

By signing this form, the applicant certifies authorization to act on behalf of their organization and hereby agrees to hold the Village, its officers, employees, agents and contractors, harmless against all claims, liability, loss, damage or expense (including but not limited to actual attorney's fees) incurred by the Village for any damage or injury to person or property caused by or resulting directly or indirectly from the activities for which the permit is granted. Any change to coverage requires Village approval. The applicant is responsible for obtaining all necessary reservations, permits and licenses.

Hearman

2/5/2025

Signature of Applicant

Date

For staff use only

Park/Rec. Board approval, if necessary, on:

Application forwarded to:

- Administrator
- Building Inspector
- Fire Chief
- Police Chief
- Public Works Director
- Rec Director

Village Board approval, if necessary, on:

Date: _____

DEPT.	APPROVE	DENY	BY	REASON (if denied)
Bldg. Insp.	<i>2-7-25</i>		<i>S. Hussinger by SP</i>	
Clerk	<i>2-7-25</i>		<i>S. Clelland</i>	
Fire	<i>2/18/25</i>		<i>[Signature]</i>	
Police	<i>2-6-25</i>		<i>Chief Misko</i>	
Public Works	<i>2/10/25</i>		<i>[Signature]</i>	
Rec	<i>2-5-2025</i>		<i>[Signature]</i>	

Fees

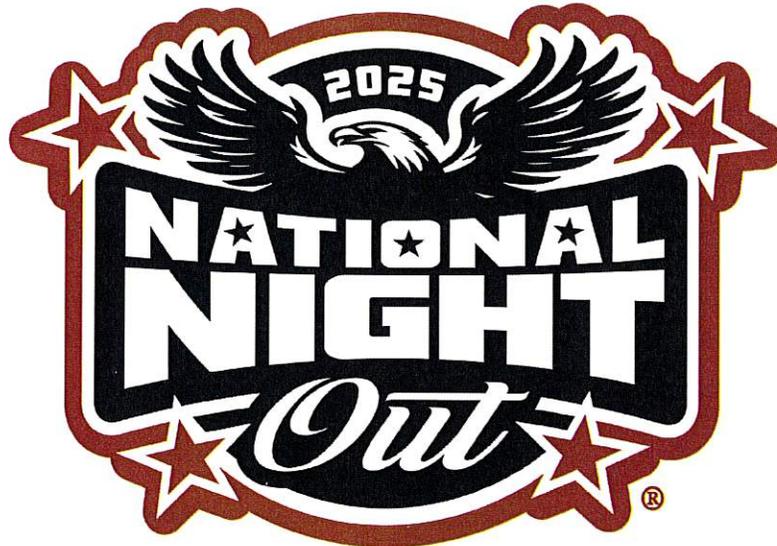
_____ Outside Food Vendors	_____ Special Event Permit	TOTAL FEES _____
_____ Park Facility Fees	_____ Temp. Bartender's	
_____ Solicitor's Permit(s)	_____ Temp. Class B	

All requirements for this special event have been met.

Village Administrator approval

Date

JOIN US FOR THIS
FREE COMMUNITY EVENT
HOSTED BY
THE VILLAGE OF HARTLAND



POLICE • COMMUNITY PARTNERSHIPS

NATIONAL NIGHT OUT

AUGUST 7, 6-8 PM
NIXON PARK, HARTLAND

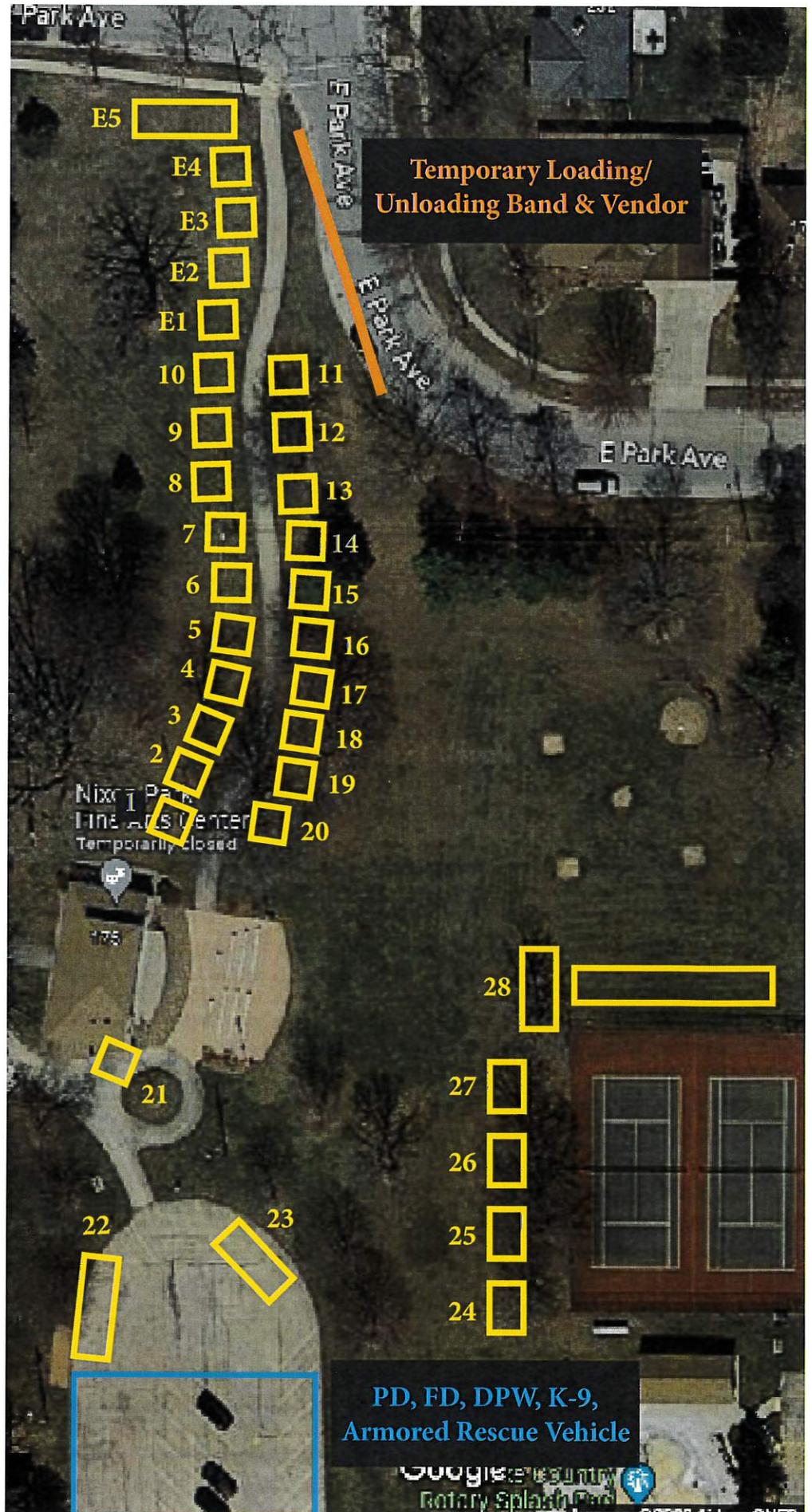
Join the members of the Village of Hartland Police Department, Fire Department and Department of Public Works, along with local and community organizations and businesses for:

FOOD • MUSIC • ACTIVITIES • FAMILY FUN

Hartland National Night Out Vendor Map, Nixon Park (August 7, 2025)

VENDORS

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.
- 11.
- 12.
- 13.
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- 15.
- 16.
- 17.
- 18.
- 19.
- 20.
- 21.
- 22.
- 23.
- 24.
- 25.
- 26.
- 27.
- 28.
- E1.
- E2.
- E3.
- E4.
- E5.





Village of Hartland

Park Food Vendor Application

210 Cottonwood Ave, Hartland, WI 53029
Office: (262) 367-2714 Fax: (262) 367-2430

Contact Information

Business Name Kona Ice Lake Country
Business Owner Name Jamie Sterken
Home/Cell Phone 414 526 4291 Email jsterken@kona-ice.com
Address US 8W 39800 Industrial Rd Suite 53066 City/Zip Oconomowoc, WI

Food vendors that hold a Retail Food License are required to provide a copy with proof of insurance.

- Copy of Retail Food Facilities license issued by Waukesha County or State of Wisconsin
- Copy of Proof of Insurance

Food vendors and products that do not require a Retail Food License: (check if applicable):

- non-profit church sports event prepacked products
- Homemade baked goods – goods produced in baker's home that are shelf stable & do not require refrigeration.
- Pickles, sauerkraut, jam, jellies, salsas and applesauce.

Event Information

Person/Group Reserving Park Facility/Event Name Hartland P&R
Event Location: Nixon Park Event Date _____
Arrival Time (include set-up time) 6pm Departure Time (include clean-up time) 8pm
Description of what will be sold: Shared ice
Location where food will be sold: Kona Ice truck

Food Vendor Fee

Vendor Fee \$75

Check, cash and credit card are accepted (checks payable to Village of Hartland). Fees and deposits must be paid at the time of application.

Application must be approved by the Village's Park and Recreation Board. I verify the information provided and agree to the Park Board's Policy and Village Ordinance regarding Park Usage.

Signature [Signature] Date 3-6-25
Name (please print) Jamie Sterken

Park Food Vendor Fee \$75.00

Office Use Only: Date Paid 2/25/25 Amount Paid \$75 Receipt # 262628 Processed 2/25/25



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/12/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

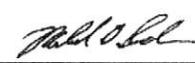
PRODUCER Northern Kentucky Insurance 5915 Centennial Circle Florence KY 41042	CONTACT NAME: Amie Turner	
	PHONE (A/C, No, Ext): (859)586-8580	FAX (A/C, No): (859)586-8616
	E-MAIL ADDRESS: amie@cornerstoneinsllc.com	
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Great American Spirit Insurance Company	33723
	INSURER B: Great American Insurance Company	16691
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES CERTIFICATE NUMBER: 2024-2025 REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			BOP3806013	07/15/2024	07/15/2025	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 4,000,000 \$
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/>			CAP3806014	07/15/2024	07/15/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			WC3806015	07/15/2024	07/15/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Certificate holder is listed as an additional insured with regards to the operations of the named insured.

CERTIFICATE HOLDER	CANCELLATION
Village of Hartland 210 Cottonwood Avenue Hartland WI 53029	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 



Waukesha County
DEPARTMENT OF PARKS AND LAND
USE
Division of Environmental Health

License, Permit or Registration

The person, firm, or corporation whose name appears on this license is hereby authorized to operate the facility indicated below. The operation and maintenance of the facility shall be in accordance with the Waukesha County Code. This is not a zoning permit.

ACTIVITY Mobile Retail Food - Not Serving Meals, Simple - Simple-Non-TCS	EXPIRATION DATE 30-Jun-2025	ID NUMBER HDEH-CDQG2M
LICENSEE MAILING ADDRESS STERKEN FAMILY, LLC N58W39800 INDUSTRIAL RD SUITE E OCONOMOWOC WI 53066	NOT TRANSFERABLE	BUSINESS / ESTABLISHMENT ADDRESS KONA ICE LAKE COUNTRY VIN#1FDYR5PMSHKA23297 OCONOMOWOC WI 53066

If you do not receive a renewal form prior to June 30th from your licensing authority, you should send in your payment for renewing your permit to the following address:

Waukesha County Department of Parks and Land Use Division of
Environmental Health
515 W Moreland Blvd AC 260
Waukesha, WI 53188
(262)896-8300

* Include the name of your facility and the ID number.

pd 3/10/25 #262772



Village of Hartland Mobile Food Vendor Application

210 Cottonwood Ave., Hartland WI 53029
Office: (262) 367-2714 Fax: (262) 367-2430

* For use outside of a Village Park

FOOD VENDOR REQUIREMENTS

Please carefully read the Village's Mobile Food Vendor Ordinance for complete specifications and restrictions.

- Copy of insurance
- Copy of Mobile Retail Food Facilities License
- Site plan with map of location
- Written permission from the property owner if event is on private property
- Fee

*will provide
> before
event*

Food Vendors and products that do not require a Retail Food License: (check if applicable):

- non-profit church sports event prepacked products
- Homemade baked goods – goods produced in baker's home that are shelf stable and do not require refrigeration.
- Pickles, sauerkraut, jam, jellies, salsas and applesauce.

CONTACT INFO

Applicant/Business Chick-fil-A Delafield			
Name Of Agent Caitlyn Chance			
Street Address 2980 Golf Court	City Delafield	State WI	Zip 53029
Phone Number 262-646-2215	Email marketing@cfadelafield.com		

EVENT INFO

Event National Night Out Hartland	
Address 175 E. Park Avenue	
Date August 7, 2025	
Time 6:00pm	Departure 8:30pm

FEES

- \$25 one-time
- \$150 annual

Cash, check, credit card accepted. Payable to Village of Hartland.

VENDOR DETAILS

Describe the food vending:

Pre-made fresh food items to be sold out of a serve only trailer. Items will include Chicken Sandwiches, Mac & Cheese, Nuggets, Waffle Chips, Sodas, Waters and Baked Desserts.

Where will the food vending take place? <u>Nixon Park</u>
What is the address of the property? <u>175 E. Park Avenue Hartland, WI 53029</u>
What days/hours will the food vending take place?
August 7, 2025
Describe your plan to address sanitation.
All trash is taken back to restaurant.
Describe your plan to address pedestrian and traffic safety.
APPLICANT'S STATEMENT
I hereby certify that this application is complete, true and correct to the best of my knowledge. I will do my best to avoid producing excessive noise and other nuisances and to abide by the regulations established in §22- 168 through §173 of the Village of Hartland Municipal Code. I agree to comply with the laws of the State of Wisconsin and to the provisions of the Village of Hartland Municipal Code including the provision that this license may be revoked or suspended for violations to this ordinance.

Printed Name of Applicant

Caitlyn Chance

Signature of Applicant

February 4, 2025

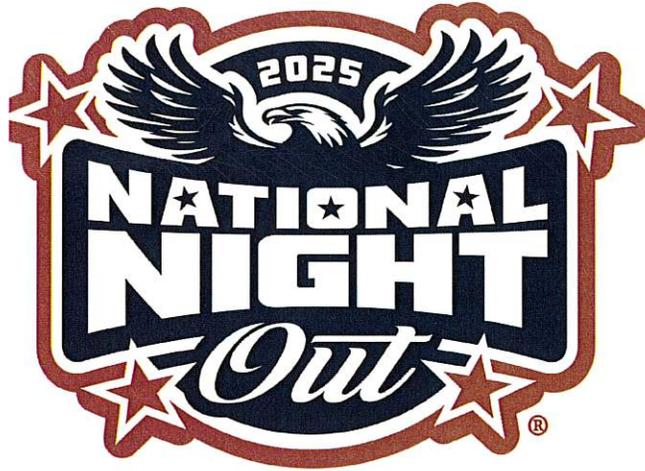
Date

For staff use

Fees collected with application submission:

PERMIT FEES CHARGED _____

DEPT.	APPROVE	DENY	BY	REASON (if denied)
Police	_____	_____	_____	_____
Fire	_____	_____	_____	_____



OK ✓
paid \$70

POLICE • COMMUNITY PARTNERSHIPS

NATIONAL NIGHT OUT

AUGUST 7, 6-8 PM

NIXON PARK, HARTLAND

VENDOR BOOTH APPLICATION FORM

Application deadline is Friday, June 27.

BUSINESS NAME/ORGANIZATION Chick-fil-A Delafield

CONTACT NAME Caitlyn Chance

ADDRESS 2980 Golf Court

CITY/STATE/ZIP Delafield

PHONE 858-883-5079 DAY OF EVENT PHONE 858-883-5079

PRODUCTS TO BE DISPLAYED OR SOLD Food Trailer, Swag Giveaway

COMPLIMENTARY ACTIVITY TO BE OFFERED Undecided, will be a hands on craft of some sort for kids.

REQUESTED BOOTH SPACE (INCLUDES A NON-REFUNDABLE RESERVATION FEE)

\$25 FOR 12' x 12' BOOTH SPACE \$45 FOR 24' x 12' BOOTH SPACE

MAIL APPLICATION & PAYMENT TO:

VILLAGE OF HARTLAND, ATTN: NATIONAL NIGHT OUT
210 COTTONWOOD AVENUE
HARTLAND, WI 53029

PAYABLE TO THE VILLAGE OF HARTLAND

DA0250

Chick-fil-A #04291
2980 Golf Court
Delafield, WI 53018-2179



6,023

Page 1 of 1



003012 R3K2T1A
VILLAGE OF HARTLAND
210 COTTONWOOD AVE
HARTLAND WI 53029

Date: 03/02/2025
Check #: 0429121946
Payment Amount: 70.00
Vendor #:



NNO # 262772

Remittance Advice

Invoice Date	Invoice No.	Invoice Description	Invoice Net Amount
02/05/2025	NN0020525		70.00

PLEASE DETACH BEFORE DEPOSITING CHECK



Adventure Rock
21250 West Capitol Drive
Brookfield Wisconsin 53072
U.S.A

INVOICE

Bill To
Village of Hartland 210 Cottonwood Avenue, Hartland, WI 53029 Hartland 53029 Wisconsin U.S.A

Invoice#	ADRock-5988
Invoice Date	February 19, 2025
Terms	Custom
Due Date	August 07, 2025
262-790-6800	105

Item	Description	Qty	Rate	Amount
Portable Wall 3-Hour Deposit	Event Name: Hartland National Night Out Event Date: Thursday, August 7th, 2025 Event Time: 6:00pm - 8:00pm Deposit due (2) weeks from the date of this invoice.	1.00	350.00	350.00
Portable Wall 3-Hour Balance	Event Date: Thursday, August 7th, 2025 Event Time: 6:00pm - 8:00pm Balance due at the time of your event.	1.00	350.00	350.00
Portable Wall Early Bird Discount	\$50 discount on all events booked before March 1st, 2025	1.00	-50.00	-50.00

If you have questions regarding this invoice feel free to contact us at 262-790-6800. Thank you for climbing with us.

Sub Total	650.00
Total	\$650.00
Balance Due	\$650.00

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the
requester. Do not
send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	<p>1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)</p> <p>Adventure Rock Inc.</p>	
	<p>2 Business name/disregarded entity name, if different from above.</p>	
	<p>3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor <input checked="" type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership)</p> <p>Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.</p> <p><input type="checkbox"/> Other (see instructions)</p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____</p> <p style="text-align: right;"><i>(Applies to accounts maintained outside the United States.)</i></p>
	<p>3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/></p>	
	<p>5 Address (number, street, and apt. or suite no.). See instructions.</p> <p>21250 W. Capitol Drive</p>	<p>Requester's name and address (optional)</p>
	<p>6 City, state, and ZIP code</p> <p>Brookfield, WI 53072</p>	
	<p>7 List account number(s) here (optional)</p>	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number	
[] [] [] - [] [] - [] [] [] []	
or	
Employer identification number	
3 9 - 1 9 0 7 3 9 9	

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person	Date 5/1/2024
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

ADVENTUREROCK

where your adventures begin

PORTABLE WALL RENTAL AGREEMENT

Thank you for choosing Adventure Rock for your special event. This letter will act as an agreement between the Lessee, *Your Organization* and Adventure Rock Inc. (ARI, herein known as "lessor"). Whereas Lessee desires to rent ARI's portable climbing structure and secure services of ARI staff to supervise use of the climbing structure, the parties agree to the following:

Rental

ARI will supply each Portable Wall rental with a portable rock-climbing wall (three or four climbing routes) and two trained and qualified staff (\$100 each additional), to work event. ARI will also provide all equipment needed for operation of the rock wall. ARI acknowledges that Lessee will not supervise or assist ARI staff in their work under this agreement. ARI staff shall be solely responsible for providing instruction to and supervision of individuals using the climbing structure. ARI agrees to supply liability insurance in a minimum amount of \$1,000,000 per occurrence.

Deposit/ Balance

In order to hold your reservation, we need to receive a minimum deposit of \$350.00 within two (2) weeks of the date your invoice is sent. The remaining balance will be due the day of the event. Payments can be paid via cash, check, or credit card. Cash and check payments can be mailed to or dropped off at Adventure Rock Brookfield. Checks should be made out to "Adventure Rock" with your invoice number in the memo line. Credit card payments can be made in person at Adventure Rock Brookfield or over the phone 262-790-6800 x1.

Reschedule/ Cancellation

To reschedule your event with advanced notice of one month or more, a fee of half of your deposit will be assessed. To reschedule with less than one month's notice you will lose your full deposit. All rescheduled events are subject to our availability. If you choose to cancel your event, a fee equal to your deposit will apply.

Weather

Weather is always a concern with a portable wall event. However, in the event of bad weather, such as high winds, lightning, or torrential rain, our policy is: (1) If we cancel prior to the start of the event we will refund half of your deposit. (2) If you are weathered out after the start of the event, payment is assessed for the time you use the wall. This amount is determined in one hour increments only.

In case of bad road conditions, vehicle or trailer failure, or any other extreme circumstance that would keep ARI from attending your event, ARI will give a full refund. No extra penalty can be levied against ARI. ARI will make every effort possible to meet all of its commitments.

Your deposit indicates agreement to these terms.

This Agreement shall be governed by the laws of the state of Wisconsin. The parties irrevocably submit to jurisdiction of the federal court in the state of Wisconsin. Should any dispute between the parties arise under this Agreement, written notice of such dispute shall be delivered from one party to the other party and thereafter, the parties, through appropriate representatives, shall meet and attempt to resolve the dispute in face-to-face negotiation. This meeting shall occur within forty-five (45) days of the date on which the written notice of such dispute is received by the other party. If no resolution is reached through informal resolution, the parties shall be entitled to seek any and all available legal remedies.

**21250 W CAPITOL DR.
BROOKFIELD, WI 53072
WWW.ADVENTUREROCK.COM**

ADVENTUREROCK

where your adventures begin

PORTABLE WALL INFO SHEET

GENERAL INFO

- Adventure Rock operates three Portable Walls
- Each Portable Wall rental includes: wall, two trained staff members, and all needed climbing equipment

COSTS

- Rate: \$700 for first 3 hours
 - \$200/hour for each additional hour
 - Deposit: \$350 due within two weeks of the date the invoice is sent
 - Balance due by the day of the event
- Travel fee:
 - No travel fee if event is within 30 miles of Adventure Rock Brookfield
 - \$3.50/mile for events over 30 miles from Adventure Rock Brookfield
- Non-Operational Staffing Fee: \$75/hour for wall and staff to be present at event but not operating (early arrival, lunch break, etc.)
- Additional insurance (optional)
 - \$55/additional name/entity insured
 - Requires official name and address
- Additional Staff: \$100/staff

EVENT

- Arrival: 30 minutes before event time *unless otherwise requested*
- Tear-down: Approximately 30 minutes
- Client is not charged for set-up and tear-down, only for actual event time
- Weather
 - We do not operate in lightning (<30 minutes) or high wind (>30mph)
 - We do operate in rain unless directed otherwise by client

CANCELLATION POLICY

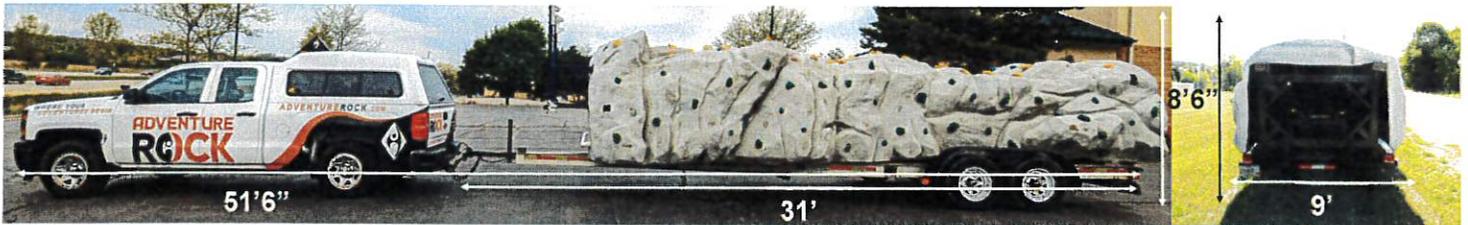
- Deposit is non-refundable within one month of your event
- Weather: If AR needs to cancel, due to inclement weather, prior to the start of the event, we will refund half of your deposit. If you are weathered out during the event, payment will be assessed based on operating time.
- In any circumstance that AR cannot make it to your event (road conditions, vehicle or trailer failure) AR will give a full refund.



SET-UP REQUIREMENTS:

- 20'x100'x35' working area
 - Can work in less than 100' length if necessary
 - At least 20' wide and 35' high is important
- Most likely cannot set-up inside buildings
 - Inside set up requires pre-booking site visit with Portable Wall Coordinator and 12'x10' garage door
 - Damage to floor is possible and should be considered
 - Truck weighs 5000lbs, trailer weighs 5000lbs

PORTABLE WALL #1



PORTABLE WALL #2



PORTABLE WALL #3



THESE DIMENSIONS INDICATE:

- Total truck and trailer length
- Trailer length
- Maximum height of truck and trailer
- Maximum width of truck and trailer

Heather Costa

From: Eric <message-service@sender.zohoinvoice.com>
Sent: Monday, March 17, 2025 10:26 AM
To: Heather Costa
Subject: Payment received - Thanks

Dear Village of Hartland,

Thanks for the payment.

We have received your payment of \$650.00. Here's an overview of the payment for your reference.

Payment Overview:

Invoice # : ADRock-5988

Invoice date : February 19, 2025

Amount : \$650.00

We are thankful for your business and look forward to working with you again.

Regards

Adventure Rock

Adventure Rock Staff

262-790-6800

invoices@adventurerock.com

<https://link.edgepilot.com/s/5b2ef61c/f3ZqowxjjUmqj6Li8lzwBQ?u=http://www.adventurerock.com/>

Heather Costa

From: Torin J. Misko
Sent: Monday, February 10, 2025 9:04 AM
To: Dave Jambretz; Ryan Bailey; Heather Costa
Cc: Brian DeBarge
Subject: Fw: Request for Military Aerial Support (Static Display)
Attachments: Request for Army AVN Support.pdf; DD Form 2535.pdf; Village of Hartland Area (Nixon Park LZ).docx

We put in a request to have a Blackhawk helicopter land during our NNO. Since Flight for Life has not been able to attend the last 2 years. I will let you know when we hear back.

Chief Jambretz, maybe we should still request Flight for Life in case this does not get approved. If it does get approved, we can always cancel Flight for Life.

Torin J. Misko
Chief of Police
Hartland Police Department
210 Cottonwood Avenue
Hartland, WI 53029
262-367-2323
tmisko@villageofhartland.wi.gov

From: Nicholas S. Greenwood <ngreenwood@villageofhartland.wi.gov>
Sent: Monday, February 10, 2025 8:52:26 AM
To: ng.wi.wiarng.mbx.avn-grp@mail.mil <ng.wi.wiarng.mbx.avn-grp@mail.mil>
Cc: Torin J. Misko <tmisko@villageofhartland.wi.gov>; Brian DeBarge <briand@villageofhartland.wi.gov>
Subject: Request for Military Aerial Support (Static Display)

Good morning,

The Village of Hartland will be conducting our annual National Night Out (2025) on Thursday, August 7, 2025, from 1800-2000hrs. We would be honored to have the WIARNG join us for this occasion, and we are requesting (1) UH-60 Blackhawk Helicopter for a static display. Please see the attached request forms and let me know if anything else is needed. Thank you for your time and consideration.



Officer Nicholas Greenwood
Hartland Police Department
210 Cottonwood Ave
Hartland, WI 53029
Phone: 262-367-2323
Email: ngreenwood@villageofhartland.wi.gov
<https://www.villageofhartland.wi.gov/>

LANDING AUTHORIZATION AGREEMENT

From:

Property Owner: Village of Hartland

Approving Official (Name): Ryan Bailey

Approving Official (Title): Village Manager

Landing Site: Nixon Park (Baseball Field)

Landing Date(s): Thursday, August 7, 2025

Address: 175 E. Park Ave. Hartland, WI 53029

To:

Deputy Chief of Staff for Aviation and Safety

2400 Wright Street

Madison, WI 53704

1. The aforementioned Approving Official, on behalf of the Property Owner, authorizes the Wisconsin Army National Guard to land a helicopter on the Landing site listed above during the associated Landing Date(s).
2. The Property Owner acknowledges the potential environmental impacts of landing a helicopter at the site such as noise nuisance; rotor wash, which may blow loose items, sand, dirt and gravel, or tear up grass; and small amounts of fuel and/or oil that may be left behind.
3. Additional restrictions or limitations apply as stated below:

Signature: _____



Approving Official (Name): Ryan Bailey

Approving Official (Title): Village Manager

Date Signed: 7/10/2025

SECURITY AGREEMENT

(For Static Display Requests Only)

1. Thank you for your interest in requesting the Wisconsin Army National Guard Aviation Community to participate in your event.
2. When submitting your DD 2535 form, Request for Military Aerial Support, please take a moment to review Section VI, Block 24, line e. This line indicates that you are willing to provide security for the aircraft at the event site during the entire stay. The WIARNG Aviation Community is providing additional clarification on the security requirements that must be met by the Requestor in order for us to support your static display request.
3. When you initial the security requirements block in Section VI, you are confirming that you will coordinate for an armed and uniformed law enforcement agency (LEA) individual to be present upon arrival of the aircraft and aircrew to your event location. This individual must be visible within the proximity of the aircraft for the duration of the time you are requesting that the aircraft be on the ground. It is the responsibility of the Requestor (not the aircrew or the WIARNG) to ensure that this security requirement is met.
4. In the event that an LEA individual is not present upon the aircraft's on site arrival, the aircrew will be instructed to wait fifteen minutes and then they are required to return to the flight facility. They are not allowed to participate in your event, without the security requirement being met. If the LEA individual must leave at any time for longer than fifteen minutes, the aircrew will be instructed that they must return to home station.
5. We understand that this may be a change to our requirements when you've requested a static display in the past and want to ensure that you are aware of the requirements and the actions we will need to take if the requirements cannot be met.
6. The undersigned acknowledges review and understanding of the above requirements and no questions concerning the DD 2535, Section VI, Block 24, line e. Further, the undersigned acknowledges that by initialing the respective block of the DD 2535 that he/she assumes responsibility as the Sponsor of the event for coordinating the aforementioned security requirements.

Signature: _____



Approving Official Name (Last, First, MI): _____

Greenwood, Nicholas, S.

Approving Official (Title): _____

Police Officer

Date Signed: FEB 10, 2025

REQUEST FOR MILITARY AERIAL SUPPORT
ALL EVENT REQUESTERS MUST READ THE INSTRUCTIONS ON PAGE 4
BEFORE COMPLETING THIS FORM.

REQUEST NUMBER OMB No. 0704-0290
OMB approval expires
 20260131

The public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-informationcollections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ORGANIZATION. RETURN COMPLETED FORM TO THE ADDRESS ON PAGE 4.

ALL DATA WILL BE HANDLED ON A "FOR OFFICIAL USE ONLY" BASIS.

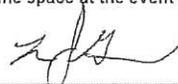
SECTION I - ACTIVITY

1. CATEGORY REQUESTED (<i>X and complete as applicable</i>)	1) DATE(S) REQUESTED (Start to End) (YYYYMMDD)	(2) TYPE AIRCRAFT REQUESTED		(3) MILITARY SERVICE REQUESTED	
		ANY (X)	SPECIFIC (Optional)	ALL (X)	SPECIFIC (Optional)
<input type="checkbox"/> a. FLYOVER (See paragraph 5 of Instructions)				<input checked="" type="checkbox"/>	WIARNG
<input checked="" type="checkbox"/> b. STATIC DISPLAY (See paragraph 6 of Instructions)	20250807	<input checked="" type="checkbox"/>	UH-60 Blackhawk	<input type="checkbox"/>	
<input checked="" type="checkbox"/> c. SINGLE AIRCRAFT DEMONSTRATION (See paragraph 8 of Instructions) Is this request for an air show? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	20250807	<input type="checkbox"/>		<input type="checkbox"/>	
<input type="checkbox"/> d. OTHER AERIAL SUPPORT (i.e. Parachute Demo, SAR Demo)				<input type="checkbox"/>	
e. AERIAL DEMONSTRATION TEAM (<i>X all requested. See Instructions.</i>)	(a) PRIMARY DATE (YYYYMMDD)		(b) ALTERNATE DATE(S) (YYYYMMDD)	(c) I WILL CONSIDER ANY DATE DURING AIR SHOW SEASON (X one)	
<input type="checkbox"/> U.S. ARMY GOLDEN KNIGHTS					
<input type="checkbox"/> U.S. NAVY BLUE ANGELS					
<input type="checkbox"/> U.S. NAVY LEAP FROGS					
<input type="checkbox"/> U.S. AIR FORCE THUNDERBIRDS				<input type="checkbox"/> YES	
<input type="checkbox"/> U.S. AIR FORCE WINGS OF BLUE				<input checked="" type="checkbox"/> NO	
<input type="checkbox"/> OTHER (Specify)					

2. INCLUSIVE DATES/TIME OF EVENT (YYYYMMDD/0:00 a.m. or p.m.)

START DATE 20250807	END DATE 20250807	REHEARSAL DATE (required for air shows/open houses)	TIME 1700-2000	<input checked="" type="checkbox"/> CHECK IF 1-DAY EVENT
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SECTION II - EVENT AND SITE INFORMATION

3.a. EVENT TITLE (to include if air show) Village of Hartland National Night Out Police Department Event			b. SITE OF EVENT (Must be accessible by persons with disabilities) Nixon Park (Hartland, WI)		
c. SITE CITY, STATE AND ZIP CODE Hartland, WI, 53029	d. SITE ELEVATION (Feet above sea level) 950ft ASL	e. RUNWAY LENGTH X WIDTH 0x0	f. ARRESTING GEAR WITHIN REQUIRED DISTANCE (X one) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	g. TYPE OF SITE (e.g., airport, park, lake, etc.) Park/ Baseball field	
h. EXPLAIN RECRUITING SUPPORT (Including local Armed Forces point of contact if applicable.) Event onsite organizations are allowed to recruit			i. We agree to provide local military recruiters, at no charge, prime space at the event for recruiting purposes. SIGNATURE: 		

j. WEBSITE AND SOCIAL MEDIA HANDLES FOR EVENT: (Contact aircraft/parachute team for specific unit or Service level social media platform handles and hashtags.)

WEBSITE	https://www.villageofhartland.wi.gov/163/Police
FACEBOOK	https://www.facebook.com/HartlandPD
INSTAGRAM	
TWITTER	
OTHER	

k. IS THERE CIVILIAN AERIAL PARTICIPATION PLANNED FOR THE EVENT? (X one) YES NO

4. EVENT SITE CERTIFICATION (To be completed by an agent exercising authority for site use) I certify that an agreement has been made with the requesting organization indicated in Section III to use the event site indicated in 2.b. above.

a. NAME (Last, First, Middle Initial) (Include Mr./Ms./Mil. Rank) Greenwood, Nicholas, S.	b. TITLE Officer	c. TELEPHONE NO. (Include area code) (262)367-2323
d. SIGNATURE 		e. DATE SIGNED (YYYYMMDD) 20250210

5. ATTENDANCE		6. PLANNED MEDIA COVERAGE (X as applicable)				YOUR MEDIA/PR POC (Name/telephone/email):	
a. PROJECTED 800+	b. PRIOR EVENT 600	<input type="checkbox"/> TELEVISION	<input type="checkbox"/> RADIO	<input checked="" type="checkbox"/> SOCIAL MEDIA			
		<input type="checkbox"/> REGIONAL	<input checked="" type="checkbox"/> PRINT				
		<input type="checkbox"/> NATIONAL	<input type="checkbox"/> NONE				
				NAME	Torin Misko (Chief)		
				TELEPHONE	(262)367-2323		
				EMAIL	tmisko@villageofhartland.wi.gov		

SECTION III - REQUESTER INFORMATION

7. LOCAL REQUESTING ORGANIZATION <i>(not contracted event promoter, airboss, or others not directly employed by event requesting organization)</i>			b. TYPE <i>(X one)</i>	
a. NAME <i>(Include website)</i> Village of Hartland Police, https://www.villageofhartland.wi.gov/163/Police			<input type="checkbox"/> PROFIT <input checked="" type="checkbox"/> NONPROFIT	
8. POINT OF CONTACT FOR AVIATION ACTIVITIES FOR THIS EVENT <i>(Please PRINT all contact information.)</i>				
a. <i>(X one)</i> <input checked="" type="checkbox"/> MR. <input type="checkbox"/> MS.		b. NAME <i>(Last, First, Middle Initial)</i> Greenwood, Nicholas, S		c. RANK <i>(If military)</i>
d. PHONE NUMBERS <i>(Include area code)</i>			e. E-MAIL ADDRESS	
(1) TELEPHONE NO. 262-367-2323	(2) CELL PHONE NO. 760-978-7125	(3) DSN	ngreenwood@villageofhartland.wi.gov	
9. IS EVENT OFFICIALLY SUPPORTED BY LOCAL GOVERNMENT <i>(X one)</i>				YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
10. WILL YOU PROVIDE A POST-EVENT REPORT ON REQUEST? <i>(X one)</i>				YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
11. DOES REQUESTING ORGANIZATION PERMIT MEMBERSHIP WITHOUT REGARD TO RACE, COLOR, NATIONAL ORIGIN, RELIGION, AGE, DISABILITY, SEX, GENDER IDENTITY, OR SEXUAL ORIENTATION? <i>(X one)</i>				YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
12. WILL ALL ASPECTS OF THIS EVENT BE AVAILABLE TO ALL PERSONS WITHOUT REGARD TO RACE, COLOR, NATIONAL ORIGIN, RELIGION, AGE, DISABILITY, SEX, GENDER IDENTITY, OR SEXUAL ORIENTATION? <i>(X one)</i>				YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
13. WILL THE EVENT BE OPEN TO THE GENERAL PUBLIC? <i>(X one)</i>				YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>

SECTION IV - FEDERAL AVIATION ADMINISTRATION COORDINATION

(This Section is not required for static displays. Requester may submit a completed FAA Form 7711 (safety form) along with this form in lieu of obtaining a FSDO signature in this section. However, the FSDO contact name and number MUST be included here.)

FOR THIS EVENT TO BE CONSIDERED FOR U.S. MILITARY SUPPORT, THE REQUESTER MUST HAVE THIS SECTION COMPLETED BY THE FLIGHT STANDARDS DISTRICT OFFICE RESPONSIBLE FOR CONTROLLING THE AERIAL ACTIVITIES AT THE EVENT SITE.

For events where the airspace falls under the purview of the United States Department of Transportation, Federal Aviation Administration (FAA) coordination is required for all U.S. military aviation activities described in Section I EXCEPT AIRCRAFT STATIC DISPLAYS. THE REQUESTER WILL FORWARD THIS DOCUMENT, WITH SECTIONS I THROUGH III AND SECTIONS V THROUGH VII COMPLETED, TO THE FLIGHT STANDARDS DISTRICT OFFICE (FSDO) HAVING JURISDICTION OVER THE SITE. After completion of Section IV by the FSDO, form will be returned to the requester for submission to DoD. Requesters will allow a minimum of 45 days for FAA review and completion.

14. FLIGHT STANDARDS DISTRICT OFFICE REVIEW I have reviewed the requested activity in Section I and determined that: <i>(X and complete as applicable)</i>		
<input type="checkbox"/> a. FAA/OTHER GOVERNMENTAL WAIVER IS NOT REQUIRED.		
<input type="checkbox"/> b. WAIVER IS REQUIRED FOR THE FOLLOWING AERIAL ACTIVITIES LISTED IN SECTION I: <i>(Specify)</i>		
<input type="checkbox"/> c. COORDINATION HAS BEEN ACCOMPLISHED WITH CONTROLLING AIR TRAFFIC CONTROL FACILITY.		
<input type="checkbox"/> d. AIR TRAFFIC COORDINATION IS NOT REQUIRED.		
<input type="checkbox"/> e. DEMONSTRATION SITE FEASIBILITY STUDY IS REQUIRED AND SITE PLAN WAS SUBMITTED BY THE REQUESTER. <i>(Must meet show line, crowd line, airspace parameters and show congested areas, dwellings, thoroughfares, and obstructions within 3 NM of show center.)</i>		
<input type="checkbox"/> f. DEMONSTRATION SITE FEASIBILITY STUDY IS NOT REQUIRED.		
<input type="checkbox"/> g. NO MAJOR NOISE CONCERNS IN THE REQUESTED AIRSPACE.		
15. FEASIBILITY DETERMINATION Based upon my review of this site, I find the site to be: <i>(X one)</i>		
<input type="checkbox"/> SATISFACTORY	<input type="checkbox"/> CONDITIONAL SATISFACTORY <i>(See NOTE)</i>	<input type="checkbox"/> UNSATISFACTORY <i>(See NOTE)</i>

NOTE: If the show site is marked "Conditional Satisfactory," explain the conditions which must be met by the show requester to provide a "Satisfactory" site in the Additional Comments section. If the show site is marked "Unsatisfactory," the request for the applicable activity cannot be accepted by the Department of Defense.

16. ADDITIONAL COMMENTS <i>(Mandatory if FARs are waived) (Explain the desired effects of U.S. military participation in this event and how it will be amplified via social media)</i>		

17. COORDINATING OFFICIAL		
a. NAME <i>(Last, First, Middle Initial)</i>	b. FLIGHT STANDARDS DISTRICT OFFICE	c. TELEPHONE NO. <i>(Include area code)</i>
d. TITLE AND SIGNATURE		e. DATE SIGNED <i>(YYYYMMDD)</i>

SECTION V - PROGRAM

18. PROGRAM THEME AND OBJECTIVE *(Please explain how aviation support is an integral part of the event.)*

National Night Out is an annual community-building campaign that promotes police-community partnerships and neighborhood camaraderie to make our neighborhoods safer while enhancing the relationship between neighbors and law enforcement. Community businesses and organizations partner together with the Village of Hartland Police Department for this community event.

19. CHARGES AND FEES *(Specify the monetary amounts charged below.)*

a. ADMISSION \$0.00	b. PARKING \$0.00	c. SEATING \$0.00	d. OTHER <i>(Specify)</i> Non-profit
e. DOES EVENT RAISE FUNDS? <i>(X one)</i> <input type="checkbox"/> YES <i>(Complete 20.f. and 20.g.)</i> <input checked="" type="checkbox"/> NO	f. FUNDS WILL BE USED FOR <i>(X as applicable)</i> <input type="checkbox"/> (1) CHARITIES <input type="checkbox"/> (2) EXPENSES <input type="checkbox"/> (3) PRIZES <input type="checkbox"/> (4) OTHER <i>(Explain in 20.g.)</i>	g. SPECIFIC INSTRUCTIONS FOR USE OF FUNDS <i>(e.g., Company, Charity or Organization to benefit)</i>	

20. HISTORICAL INFORMATION

a. LIST ALL YEARS THE EVENT HAS BEEN HELD 2024,2023,2022,2021,2020,2019,2018+	b. MOST RECENT DoD DEMONSTRATION TEAM <i>(if any) AND YEAR OF PERFORMANCE (e.g., Blue Angels, Thunderbirds, Golden Knights; year)</i> N/A	c. LIST CIVILIAN AND MILITARY AIRCRAFT AT THE LAST EVENT None
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SECTION VI - SUPPORT

(For all requests other than flyovers, which could include air shows, open houses, some static displays, and non-air show flyovers if the unit is not local.)

21. THE REQUESTER AGREES TO: <i>(Initial each applicable item signifying acceptance. Lack of initials renders the event ineligible for all support other than flyovers.)</i>	APPLICABLE? <i>(If yes, enter initials.)</i>	INITIALS
a. OBTAIN THE AIR SHOW WAIVER FROM THE FAA MONITOR PRIOR TO THE EVENT FOR EACH ACTIVITY REQUIRING A WAIVER <i>(plan a 60-day lead time)</i> . FAILURE TO OBTAIN A WAIVER WILL RESULT IN DEMONSTRATION CANCELLATION AT THE EXPENSE OF THE REQUESTER <i>(air shows and open houses only)</i> .	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
b. PAY COSTS AS OUTLINED ON PAGE 5, PARAGRAPHS 7, 8, AND 9 OF INSTRUCTIONS, AS APPLICABLE.	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
c. PROVIDE OR REIMBURSE TRANSPORTATION, MEALS, AND LODGING COSTS <i>(including pre-event visits)</i> FOR ARMED FORCES PARTICIPANTS, AS REQUIRED. <i>(Reimbursement for demonstration teams covered in paragraphs 7, 8, and 9 of Instructions.)</i>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
d. PROVIDE SUITABLE AIRCRAFT FUEL AT MILITARY CONTRACT PRICES <i>(air shows and open houses only)</i> . <i>(Requester must pay all costs over military contract prices, including any transportation and handling charges, if fuel is not available at such prices.)</i>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
e. PROVIDE SECURITY FOR AIRCRAFT AT EVENT SITE DURING ENTIRE STAY. <i>(Certain assets (such as the F-35) will require extensive security.)</i>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	NSG
f. PROVIDE MOBILE FIREFIGHTING, CRASH, GROUND-TO-AIR COMMUNICATIONS, MOBILE ARRESTING GEAR, GROUND SUPPORT EQUIPMENT AS APPLICABLE PER SERVICE SPECIFIC SUPPORT MANUALS, AT THE SHOW SITE FOR FLIGHT AND PARACHUTE DEMONSTRATIONS AND STATIC DISPLAY AIRCRAFT <i>(air shows and open houses only)</i> .	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
g. PROVIDE AMBULANCE AND MEDICAL PERSONNEL ON SITE DURING FLIGHT AND PARACHUTE DEMONSTRATIONS AND CERTAIN OTHER TYPES OF AERIAL ACTIVITIES AS DETERMINED, IN ADVANCE, BY THE MILITARY SERVICES.	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
h. PROVIDE TELEPHONE FACILITIES FOR NECESSARY OFFICIAL COMMUNICATIONS AT THE EVENT SITE.	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
i. PROVIDE AERIAL PHOTOGRAPH AND AIRFIELD DIAGRAM UPON REQUEST.	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
j. WILL RUN EMERGENCY RESPONSE DRILL ON REHEARSAL DAY <i>(air shows and open houses only)</i> .	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

SECTION VII - CERTIFICATION BY REQUESTER *(Signature will expire the day after the date of event.)*

22. PRESIDENT/CHAIRMAN OF REQUESTING ORGANIZATION/BASE OR WING COMMANDER *(If civilian sponsored or military requested, respectively; this will not be a contracted event promoter or others not directly employed by the event sponsoring organization.)*
I certify that the information provided above is complete and accurate to the best of my knowledge. I understand that representatives from the military services will contact us to discuss arrangements and additional costs involved prior to final commitments. Any changes to the information on this form may invalidate eligibility for military participation.

a. SIGNATURE 	b. DATE SIGNED (YYYYMMDD) 2025 02 10	c. PRINT NAME AND TITLE Officer Nicholas S. Greenwood
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INSTRUCTIONS

1. The attached form is used to request U.S. Armed Forces aircraft participation at public events in support of community relations programs, flyovers, static displays and requests for an aerial demonstration team (U.S. Army Golden Knights, U.S. Navy Leap Frogs, U.S. Navy Blue Angels, or U.S. Air Force Thunderbirds), and U.S. Marine Corps, Army, Navy and Air Force single-ship demonstration teams, to perform on or off a military installation worldwide. This form is used by each Military Service to determine eligibility of an event for military aerial support. Once an event has been approved as eligible, it is the event requester's responsibility to contact units and coordinate any possible military unit participation. **The event requester is required to inform all the other requested Military Services once acceptance of any military aviation participation has been confirmed.**

2. Do not use this form to request flyovers for military funeral honors. Information on requesting military funeral honors support may be found at <https://www.militaryonesource.mil/leaders-service-providers/casualty-assistance/military-funeral-honors/>.

3. Uniformed members of the military, DoD civilians or DoD contractor employees must not be the point of contact or event site certifier for non-military hosted events. This form must be completed by the requesting organization who is responsible for conducting the event. The local Flight Standards District Office that has jurisdiction over the event site will complete all appropriate blocks in Section IV. Requests for static displays only do not require FAA coordination. Complete Sections I - III and V - VII, and forward the form to the nearest Flight Standards District Office (FSDO) for completion of Section IV. To locate nearest FSDO, visit FAA's website at http://www.faa.gov/about/office_org/field_offices/fsdo/.

4. The local requesting organization is responsible for the accurate completion of the form and conducting the event. The organization must consult with the event site authority. At no time should a contractor for an event complete this form. The information on this form must be typed or printed in ink, and is used to evaluate the event for compliance with public law and Department of Defense policies, and to determine its eligibility for Armed Forces participation. In all cases, military participation must not interfere with military operations and training programs, and must be at no additional cost to the U.S. Government. Requesters will consult with local military recruiters and provide, at no cost, prime space for recruiting activities in an area or location close to branch related static displays, branch related performance team and/or that allows for 60-90% of event foot traffic to pass by while traveling from entrance to viewing area. Department of Defense is unable to support events for which the request is intended to make a business profit. Events which have an admission charge, or other associated charges, do not necessarily preclude military participation. Military commands cannot participate in events which charge admission unless the military participation is incidental to the event, and not the primary attraction. Incomplete forms, or forms submitted late, cannot be considered and will be returned to the requester's representative.

5. Flyover requests will be considered for aviation-oriented events (i.e., air shows, airport anniversaries or aviation related dedication events), or for patriotic observances held in conjunction with Armed Forces Day, Memorial Day, Independence Day, POW/MIA Recognition Day, or Veterans Day (event must be within seven days of the actual holiday date to be considered). Flyovers are limited to aircraft formations of the providing Military Service policy. Sports events with a military appreciation theme will be considered on a case-by-case basis by the requested Military Service. Requesters of events other than air shows and open houses are prohibited from scheduling more than one Service to conduct the flyover. Once a military organization confirms flyover support, requester must not notify any other Military Service requested so they will not participate in the same event. The Blue Angels and Thunderbirds generally do not perform flyovers. Requests for flyovers must be received for processing at least 60 days prior to the event for full consideration by the Services. Requests received closer than 30 days will not allow adequate planning for some organizations to support. Complete Sections I-III and V-VII, and forward the form to the nearest Flight Standards District Office (FSDO) for completion of Section IV. The Missing Man Formation is generally reserved for select national military observances that are solemn and commemorative in nature, or for military funeral services as determined by the Military Services' individual policies.

6. Requests for aircraft static displays will only be considered for air shows, airport events, expositions and fairs, and public events which contribute to the public knowledge of Armed Forces equipment and capabilities (including recruiting and ROTC events). Complete Sections I-III and V-VII (Section IV is not applicable when requesting static displays only). Requests must be made from the requesting organization in accordance with each Military Service's policy in paragraph 10 of these instructions. The requester must satisfy all safety and operational requirements for the requested aircraft. Requests received closer than 60 days (90 days for Marine Corps support) will not allow adequate planning for some organizations to support.

7. Civilian-sponsored requests for performances by a flight demonstration team (Blue Angels and Thunderbirds) will be considered only for events which are: (1) aviation oriented (e.g., air shows, airport events, historical aviation events); (2) planning civilian aviation participation; (3) open to all Military Services for participation, and (4) held during the air show season (mid-March to mid-November). A partial reimbursement cost (lodging and meals) per official demonstration (including any performance where admission is charged to view a team) is payable by non-military requesters as indicated in the team support manual. Appearances on a military installation or requested by a military organization will only be approved in support of an official installation "open house" program (no admission charge/entrance fee). All event requesters are required to comply with all aspects of the team support manual, as applicable. Requests for the U.S. Navy Blue Angels and Thunderbirds must be received by July 1 of the year that is two years preceding the year of the event. Complete Sections I-III and V-VII, and forward the form to the nearest FAA Flight Standards District Office (FSDO) for completion of

7. (Continued) Section IV before submitting to each service individually per the instructions listed in number nine of this page. The schedules will be released in December two years prior to the season. Subsequent to public release of the schedules, teams will be rescheduled if a scheduled event is cancelled, the original requesting organization is changed, or the original event site is changed. Previously validated requests will automatically be reconsidered.

NOTE: Several of the aerial demonstrations (teams and single-ship) and other aircraft participating in events, have runway length, arresting gear, and other ground support requirements that must be provided by the event organizer. Refer to Military Service-specific support manuals for details before requesting support. Military Services should provide arresting gear, ground support equipment, and security support (as applicable) to civilian air shows supporting approved DoD jet or single-ship demonstration team performances, static display aircraft, etc. This support ensures the safety and security of the performing military teams. Arresting gear support should be requested and coordinated between the air show point of contact and the major commands that provide mobile arresting gear in accordance with the applicable policies of the Military Department being asked to provide the equipment. Funding the transportation of arresting gear, installation, removal, and ground support equipment will be the responsibility of the air show.

8. Requests for single aircraft demonstrations (e.g., F-22, F-18, Harrier) will be considered for events as described in paragraph 7 (1) through (4) above. Army single aircraft demonstrations must be received for processing at least 60 days prior to the event. Air Force single aircraft demonstration requests are due July 1 of the year prior to the event with the schedule announced for the following year in December. Navy single aircraft demonstration requests must be received by July 1 of the year preceding the year of the event. USMC Harrier AV-8B, Osprey MV-22, and Lightning II F-35B demonstration or static display requests must be received by August 26 of the year preceding the year of the event. The Harrier demonstration can only be performed over a prepared hard surface or open water. (Scheduled Harrier events will receive two aircraft, one for demonstration and one for static display. Fifty gallons of distilled water must be provided for each Harrier demonstration.) Meals, lodging, and transportation for the aircrews must be provided by the requester. Social media coverage, at a minimum, is expected for all flyovers and static displays. Each Service will provide social media hashtags and handles to be used.

9. Civilian-sponsored requests for the U.S. Army parachute team, the "Golden Knights," are considered for events open to the public such as air shows, sporting events, fairs, and other outdoor events that help connect the public with America's Army and enhance the U.S. Army's marketing and engagement efforts. Appearances on military installations are only approved in support of official "open house" programs. All requesters, military and civilian, must provide vehicles, hotel rooms, and a daily show fee. The show fee must be received 60 days before the event or it will be cancelled. Contact the Golden Knights for the current year's support manual which includes the most up-to-date information on support requirements and current show fee. The Golden Knights' show schedule is released in mid-January approximately 30 days after the International Council of Air Shows (ICAS) convention. After the official schedule is released, the Golden Knights consider additional performances if the event is requested at least 60 days prior to the event and there is a team available. In the event of a cancellation, previously submitted requests are automatically considered. The show requester completes Section I, II, III, V, and VII of this form and forwards the form to the nearest FAA Flight Standards District Office (FSDO) for completion of Section IV. Please send the completed form to the contact listed below.

10. All Air Force requests must be made via the Air Force Aerial Events Website, <https://www.airshows.pa.hq.af.mil>. For Army, Navy or Marine Corps support, requester must complete the DD Form 2535 and follow the submission instructions as noted below. Additional DD Forms 2535 may be obtained through the office(s) listed below, through the nearest military installation public affairs office, or on the Internet at https://www.esd.whs.mil/Directives/forms/dd2500_2999/. For legibility reasons, event requesters are highly encouraged to fill out applicable information on-line prior to printing form out.

ARMY:

Community Relations Division
HQDA, Office of the Chief, Public Affairs
1500 Army Pentagon, Room 1D470
Washington, DC 20310-1500
usarmyoutreach@army.mil
www.army.mil/comrel

U.S. Army Parachute Team
Attn: Show Scheduler
P.O. Box 73712
Fort Bragg, NC 28307-0126
(910) 907-3025 (fax)
usarmy.knox.hqda.list.apc.show@mail.mil

For instructions on how to request Army assets, please visit:
www.army.mil/comrel/assetrequests

MARINE CORPS:

For instructions on how to request Marine Corps assets, please visit
www.marines.mil/community
(703) 614-1034 (voice)
Submit completed forms via email to
hqmc.comrel@usmc.mil

NAVY:

Navy Office of Community Outreach
Attn: Aviation Support
5722 Integrity Drive, Bldg 456-3
Millington, TN 38054
(901) 874-5803 (voice)
Submit completed forms via email at
aviationsupport@navy.mil
www.outreach.navy.mil

AIR FORCE:

Office of the Secretary of the Air Force
Office of Public Affairs (SAF/PA)
1690 Air Force Pentagon
Washington, DC 20330
(703) 695-9664 (voice)
aerialevents@us.af.mil
Submit request online at
www.airshows.pa.hq.af.mil

REQUESTER: PLEASE RETAIN A COPY OF THIS FORM FOR FUTURE REFERENCE.

REQUEST FOR ARMY AVIATION SUPPORT

DATA REQUIRED BY THE PRIVACY ACT OF 1974

Mission No. (Official Use Only)

Authority: Executive Order 9397
 Principal Purpose: For flight mission requests
 Routine Uses: To request flight support from WIARNG
 Disclosure: Disclosure of this information is voluntary

TAG, JFHQ-WI
 To: ATTN: WIAR-AVN
 Madison, WI 53704

From:
 (Unit or
 Org'n):

 Village of Hartland

Date:

 10-Feb-25

Requester Name: Nicholas Greenwood

Phone #: (262) 367-2323 E-mail: ngreenwood@villageofhartland.wi.gov

Day of Mission POC: Chief Torin Misko

Cell #: (262) 424-6756 E-mail: tmisko@villageofhartland.wi.gov

Mission Summary: Blackhawk Flyover/ Static Display for National Night Out Event

MISSION DETAILS

Description of Mission (provide add'l info that will aid the crew in executing the mission):

Requesting 1x WIARNG Blackhawk Helicopter

Weather Abort Time: _____ (Time requestor needs to be notified to execute backup plan.)

PAX Categories (select all that apply)

Mission Type(s) Requested

- Civilian
- Federal Civilian Employees
- Foreign / Non-US
- Military
- Minors/ROTC
- N/A (no passengers flying)

- Air Movement
- Orientation Flight
- Flyover
- Static Display
- Other
- Passenger loading / ground training

Y N If ACFT will land off public use airport or federal lands, complete page 4 (LDG Auth Agree't).

ROUTE OF FLIGHT

MISSION DATE	DEPART TIME *	DEPARTURE LOCATION <small>(AIRPORT NAME OR LAT/LONG)</small>	ARRIVAL LOCATION <small>(AIRPORT NAME OR LAT/LONG)</small>	ARRIVAL TIME
07-Aug-25			43.101240, -88.344385	1700hrs

* Passengers should arrive a minimum of 45 minutes prior to the departure time for a mandatory safety briefing. Requester should place a check mark next to times that are not flexible. Departure time is the default H-Hour.

For Official Use Only:

ACFT No. by Type: _____ Date Updated: _____

WIARNG Form 72-E (pg 2 of 5), MAY 2019 - PREVIOUS VERSIONS ARE OBSOLETE

PASSENGER MANIFEST

DATA REQUIRED BY THE PRIVACY ACT OF 1974

PASSENGER MANIFEST A

SEAT	RANK	NAME (Last, First, MI)	SSN*	UNIT	PHONE #
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					

PASSENGER MANIFEST B

SEAT	RANK	NAME (Last, First, MI)	SSN*	UNIT	PHONE
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					

PASSENGER MANIFEST C

SEAT	RANK	NAME (Last, First, MI)	SSN*	UNIT	PHONE
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					

*SSN not required for WIARNG Soldiers (already on file).

Attach additional pages as necessary.

WIARNG Form 72-E (pg 3 of 5), MAY 2019 - PREVIOUS VERSIONS ARE OBSOLETE

Village of Hartland GIS

DISCLAIMER:

This map is not a survey of the actual boundary of any property this map depicts.

The Village of Hartland does not guarantee the accuracy of the material contained here in and is not responsible for any misuse or misrepresentation of this information or its derivatives.



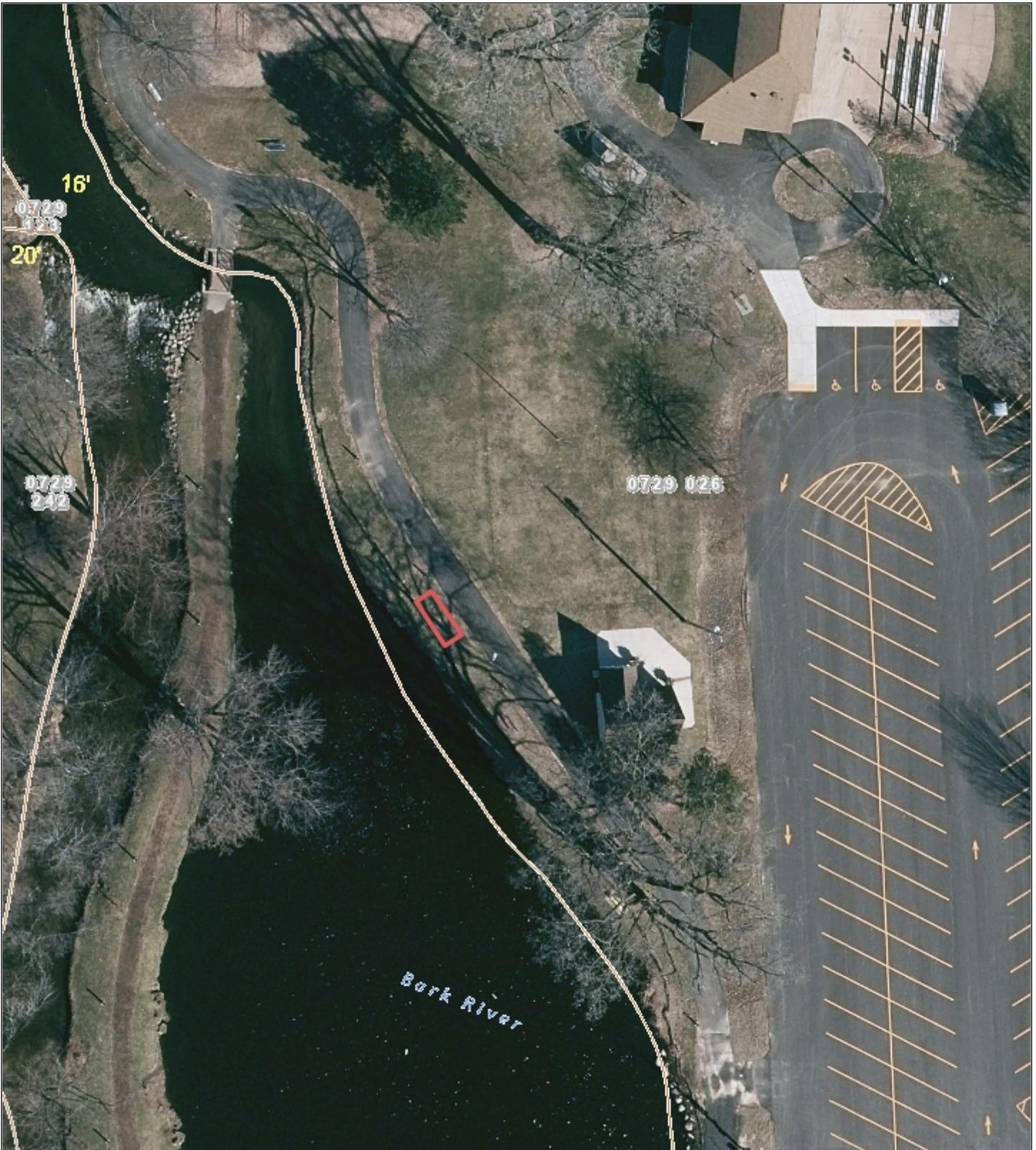
Village of Hartland
210 Cottonwood Ave
Hartland, WI 53029
262-367-2714

SCALE: 1 = 19'

Print Date:

2/27/2025





Village of Hartland GIS



Village of Hartland
210 Cottonwood Ave
Hartland, WI 53029
262-367-2714

DISCLAIMER:

This map is not a survey of the actual boundary of any property this map depicts.

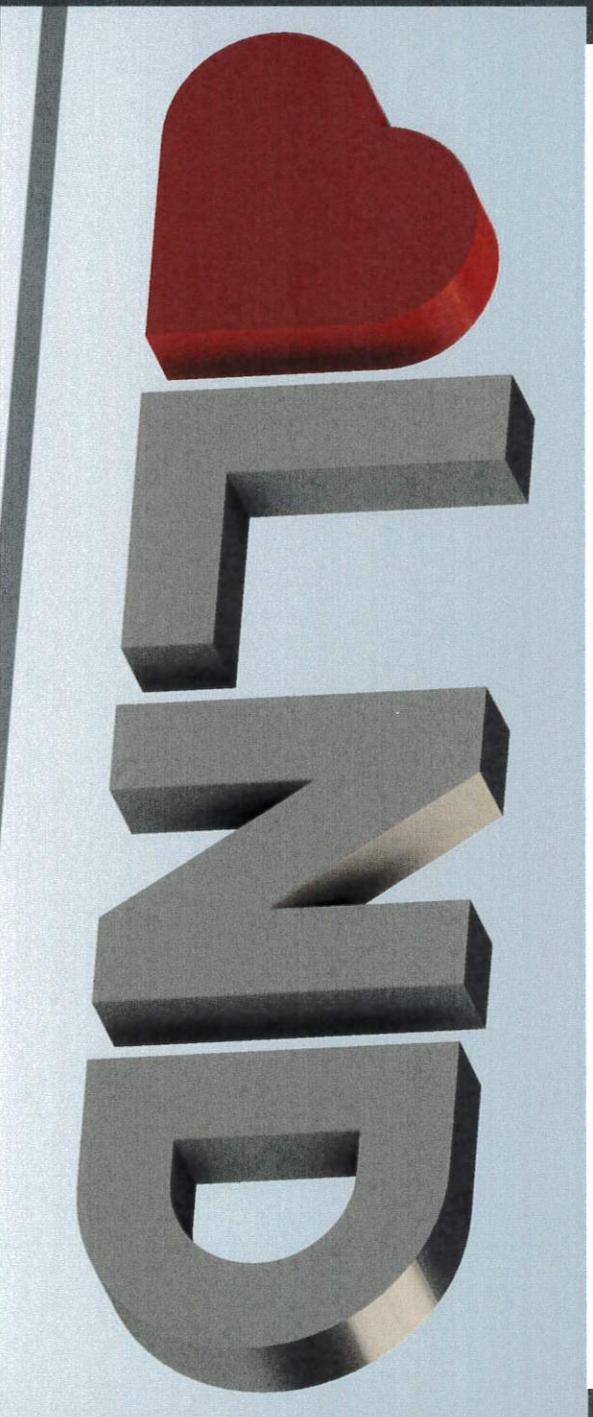
The Village of Hartland does not guarantee the accuracy of the material contained here in and is not responsible for any misuse or misrepresentation of this information or its derivatives.



SCALE: 1 = 42'

Print Date: 3/31/2025

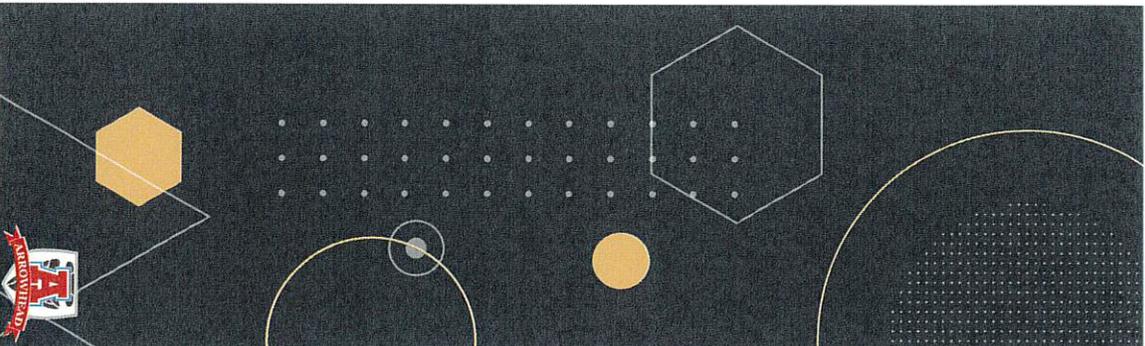
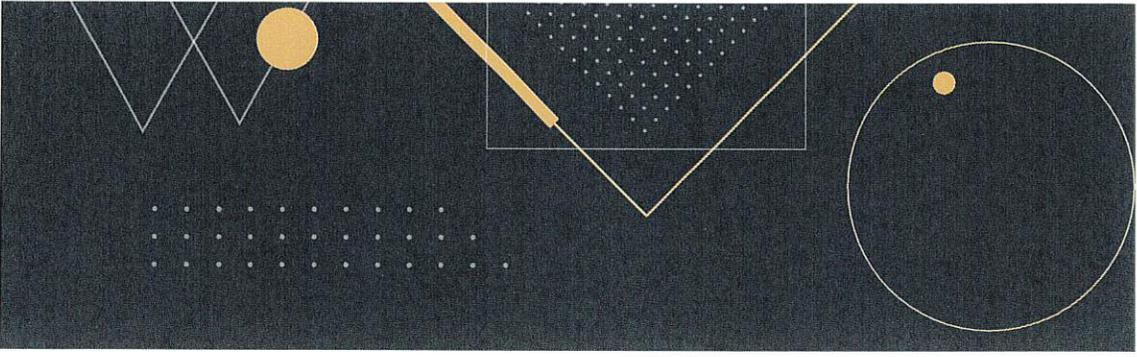
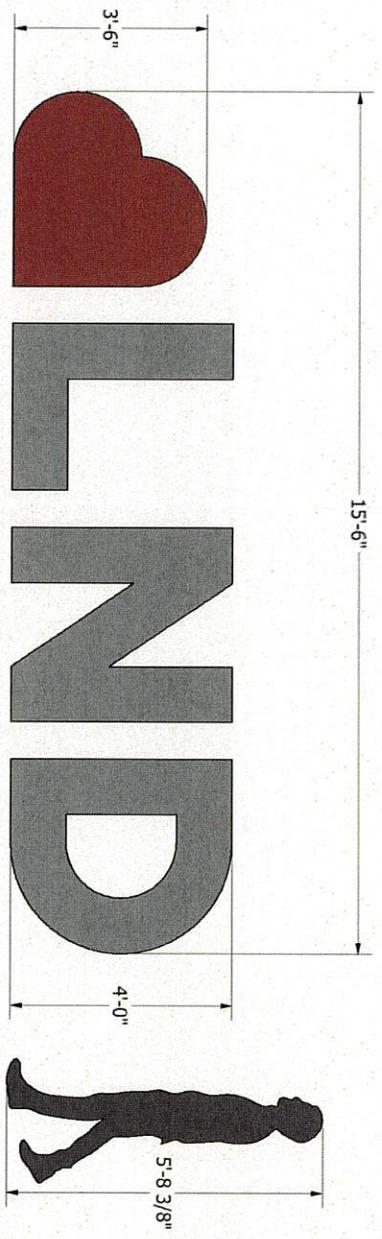
The Design



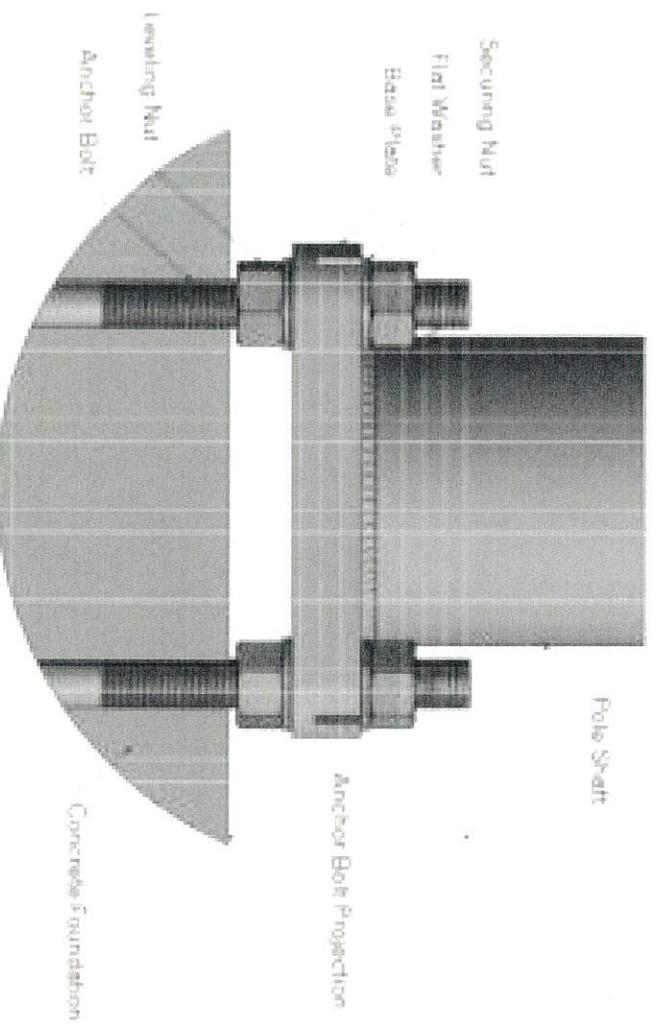
*** All letters have depth of 8 -12"



Dimensions of Sculpture

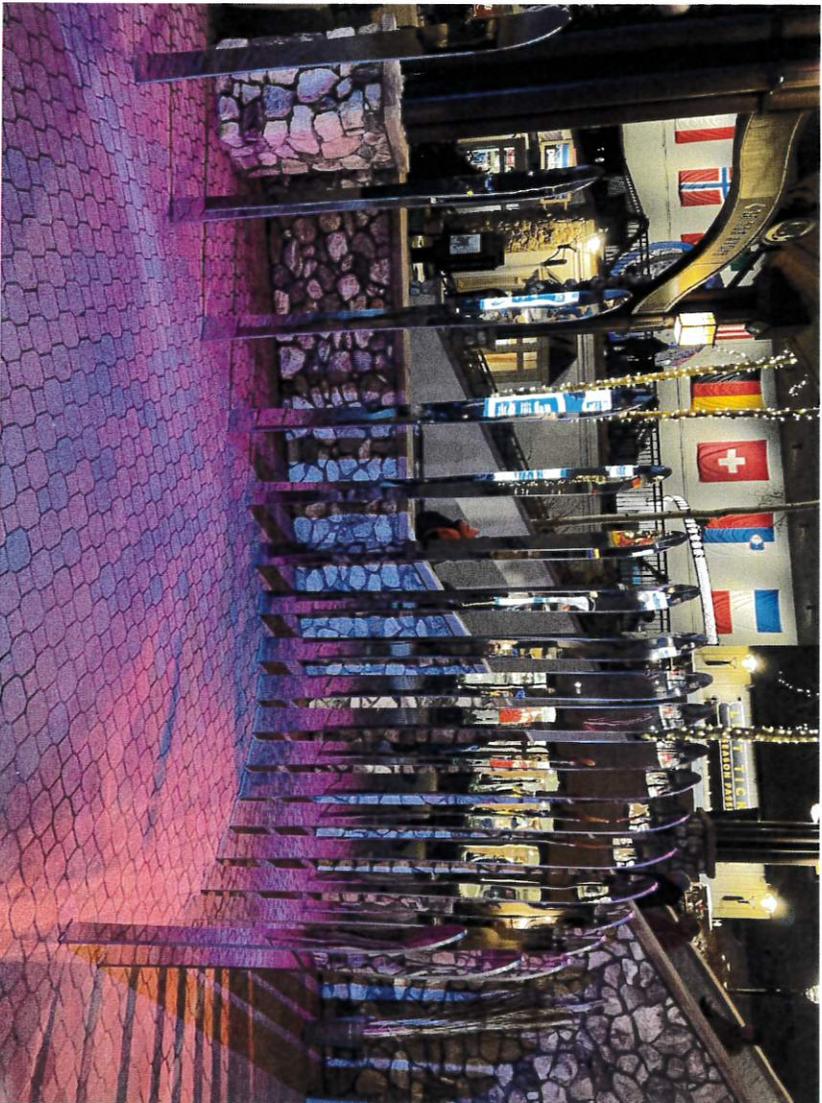
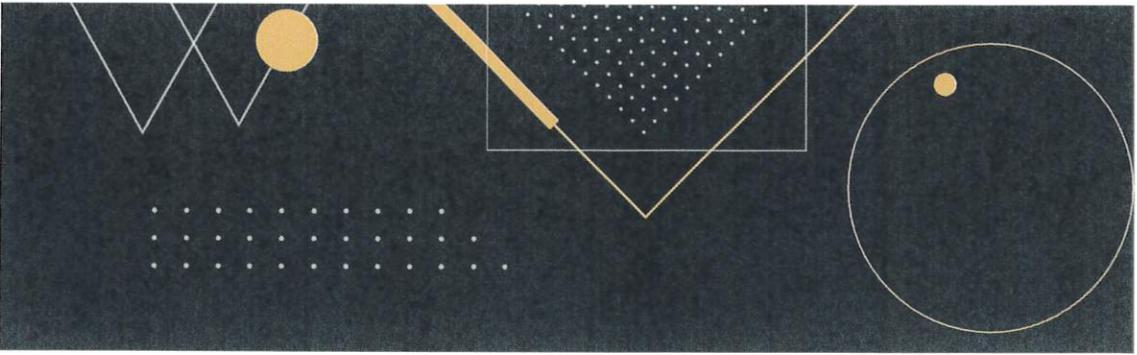


Bolted Mounting Method



- 4 bolts per letter running through letters into the ground
- Allows for movement of sculpture if needed in the future





Lighting of the Sculpture

