

**AGENDA ITEM SUMMARY**

DATE: 07-16-12 DEPARTMENT: Public Works DEPT. HEAD SIGNATURE: *JK*

**SUBJECT:**

Request approval for Boxing Smoker Special Event at Hailey Armory on July 27, 2012 the hours will be from 7:00pm – 9:00pm.

**AUTHORITY:**  ID Code \_\_\_\_\_  IAR \_\_\_\_\_  City Ordinance/Code \_\_\_\_\_  
(IF APPLICABLE)

**BACKGROUND/SUMMARY OF ALTERNATIVES CONSIDERED:**

**FISCAL IMPACT / PROJECT FINANCIAL ANALYSIS:** Caselle # \_\_\_\_\_  
Budget Line Item # \_\_\_\_\_ YTD Line Item Balance \$ \_\_\_\_\_  
Estimated Hours Spent to Date: \_\_\_\_\_ Estimated Completion Date: \_\_\_\_\_  
Staff Contact: \_\_\_\_\_ Phone # \_\_\_\_\_  
Comments: \_\_\_\_\_

**ACKNOWLEDGEMENT BY OTHER AFFECTED CITY DEPARTMENTS:** (IF APPLICABLE)

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> City Administrator    | <input type="checkbox"/> Library             | <input type="checkbox"/> Benefits Committee |
| <input type="checkbox"/> City Attorney         | <input type="checkbox"/> Mayor               | <input type="checkbox"/> Streets            |
| <input type="checkbox"/> City Clerk            | <input type="checkbox"/> Planning            | <input type="checkbox"/> Treasurer          |
| <input type="checkbox"/> Building              | <input checked="" type="checkbox"/> Police   | _____                                       |
| <input checked="" type="checkbox"/> Engineer   | <input type="checkbox"/> Public Works, Parks | _____                                       |
| <input checked="" type="checkbox"/> Fire Dept. | <input type="checkbox"/> P & Z Commission    | _____                                       |

**RECOMMENDATION FROM APPLICABLE DEPARTMENT HEAD:**

Motion to approve the Boxing Smoker Special Event and authorize the Mayor to sign.

**ADMINISTRATIVE COMMENTS/APPROVAL:**

City Administrator \_\_\_\_\_ Dept. Head Attend Meeting (circle one) Yes No

**ACTION OF THE CITY COUNCIL:**

Date \_\_\_\_\_

City Clerk \_\_\_\_\_

**FOLLOW-UP:**

\*Ord./Res./Agrmt./Order Originals: Record  
Copies (all info.): \_\_\_\_\_  
Instrument # \_\_\_\_\_

\*Additional/Exceptional Originals to: \_\_\_\_\_  
Copies (AIS only)

## DECISION

Based on the Application for a Special Event Permit for the 2012 Boxing Mixer, the City of Hailey, pursuant to Chapter 12.14 of the Hailey Municipal Code, approves the Application and grants the Special Event Permit, subject to the following conditions:

### Standard Conditions

- a. The Applicant shall comply with the terms, plans, covenants and provisions of the Application, as approved or as modified by the City of Hailey.
- b. The Applicant shall comply with all applicable local, state and federal laws, regulations and ordinances before, during and after the Special Event(s).
- c. The Applicant shall execute an agreement, relating to the reimbursement of expenses, indemnification and other provisions immediately upon the approval of the application for the Special Events Permit.
- d. In the event the Applicant fails to comply with all the conditions set forth herein, the City may revoke the Special Events Permit, in whole or in part.

### Other Conditions

DATED this 16<sup>th</sup> day of July, 2012.

CITY OF HAILEY

By: \_\_\_\_\_  
Fritz Haemmerle, its Mayor

ATTEST:

\_\_\_\_\_  
Mary Cone, City Clerk

## AGREEMENT

In consideration of the granting of a special event permit by the City of Hailey (“the City”) for the 2012 Boxing Mixer that will occur on July 27, 2012 from 7:00 p.m. to 9:00 p.m., plus specified set up and teardown time, (“the Event”), and pursuant to Section 12.14 of the Hailey Municipal Code, the undersigned, as the applicant (“Applicant”) of a Special Event Permit from the City for the Event, does hereby agree to reimburse the City for any costs incurred by the City in repairing damage or providing any services or materials resulting from the Event. The Applicant agrees that such costs may be deducted from a non-refundable security deposit or additional deposit as established by the City, and that if costs exceed any deposit made by the applicant, further reimbursement will be made to the City upon demand. The Applicant hereby agrees to indemnify, defend and hold harmless the City and its officers and employees, in

CITY OF HAILEY ■ 115 MAIN ST. S., SUITE H ■ HAILEY, IDAHO 83333 ■ 788-4221

their official and individual capacities, from any and all claims, demands, obligations, liabilities, lawsuits, judgments, attorneys' fees, costs, expenses and damages of any nature caused by or arising out of, or connected with the Event. In the event either party hereto is required to retain counsel to enforce a provision of this Agreement, or to recover damages resulting from a breach hereof, the prevailing party shall be entitled to recover from the other party all reasonable attorney's fees incurred herein or on appeal, or in bankruptcy proceedings. The Applicant agrees to comply with all the laws and ordinances of the City of Hailey, Idaho applicable to the subject matter thereof, and to conduct the Event in accordance with the terms and provisions of the application for a Special Event Permit, as approved or as modified by the City, and all conditions of the Special Event Permit. The Applicant agrees that the Special Event Permit is nontransferable and shall be conducted only for the dates and locations as approved by the City.

IN WITNESS WHEREOF, Applicant and the City have executed this Agreement on this 16<sup>th</sup> day of July, 2012.

APPLICANT:

By: \_\_\_\_\_

(please sign and print name and title, if applicable)

CITY OF HAILEY:

By: \_\_\_\_\_  
Fritz Haemmerle, its Mayor

ATTEST:

\_\_\_\_\_  
Mary Cone, its City Clerk



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JUL 09 2012

HFD:  CERT INSURANCE: None  
HPD:  STR CLOSURE: None  
HBLDG:  BARRICADE MAP: None  
HENG:  CATERING PERMIT: None  
HPD SEC:  AMPL PERMIT: None  
SIGN PERMIT: None

### SPECIAL EVENT PERMIT APPLICATION

EVENT NAME: BOXING SMOKER

LOCATION FOR EVENT (Be specific e.g., Hop Porter Park, all of 1<sup>st</sup> Avenue between Walnut and Pine, 115 Main St. S.):

Public Property  Private Property  
The Hailey Academy

#### III. EVENT SCHEDULE

Special Events are limited to four days, including set-up and tear-down days. No more than eight events per calendar year can be conducted by a single party or organization, unless a modification is granted by the City Council. **Please submit your modification requests in writing and attach to your application.**

Date(s) of Event	Hours	Estimated # of Attendees
<u>7/27/12</u>	Start Time: <u>7:00pm</u> End Time: <u>10:00pm</u>	One Hour Interval: All Day: <u>150</u>
	Start Time: _____ End Time: _____	One Hour Interval: All Day: _____
Date of Set-Up	Start Time: <u>9:00am</u> End Time: <u>12:00pm</u>	
Date of Tear Down	Start Time: <u>10:00pm</u> End Time: <u>11:00pm</u>	

#### IV. FEES

Special Event Permit Application Fee \$125  \$125<sup>00</sup>

Events that meet the following criteria may be exempted from Park Rental Fee by resolution of the City Council:

- Non-profit event that is held annually within the City of Hailey for at least ten consecutive years and consistently draw large numbers of participants and spectators. Tax Exempt #: \_\_\_\_\_
- Promoted locally and regionally within the state and the northwest.

Per Day Park Rental Fee \$200  \_\_\_\_\_

Tax (on park rental fees only) 6%  \_\_\_\_\_

Security Services Deposit  \_\_\_\_\_

TOTAL DUE \$125<sup>00</sup> pd

#### V. ORGANIZATION INFORMATION

Sponsoring Organization: USA Grappling Academy

Applicant's Name: LEE ANDERSON Title: OWNER

Address: PO. Box 645 City: Belleve State: ID Zip: 83313

Telephone Day: (208) 720-3519 Evening: SAME FAX: \_\_\_\_\_

Applicant Driver's License #: MN250669H EMAIL: Superstarheadusa@yahoacan

Federal Tax #: EIN# 82-0478625 State Tax #: \_\_\_\_\_

#### VI. EVENT INFORMATION

New Event: Yes \_\_\_\_\_ No  Annual Event: Yes  No \_\_\_\_\_ Years Operating 1

Event Category:  Commercial  Noncommercial

Estimate of Gross Ticket Sales & Revenues (commercial event only): \$500-\$1,000<sup>00</sup>

Description of Event: BOXING EVENT - Fun, Family Event w/NO Alcohol!

Additional Details: \_\_\_\_\_

**VII. INSURANCE REQUIREMENTS**

It is the responsibility of your Special Event organizers to maintain a COMPREHENSIVE GENERAL LIABILITY insurance policy with coverage of not less than \$1,000,000.00 combined single limit per occurrence. Each policy shall be written as a primary policy, not contributing with or in excess of any coverage which the City may carry. *A certificate naming the City of Hailey, Blaine County, Idaho as additional insured shall be delivered to the City of Hailey with this application.* The adequacy of all insurance required by these provisions shall be subject to approval by the City Clerk. Failure to maintain any insurance coverage required by this agreement shall be cause for immediate termination of the application.

Insurance Company: Wad River Insurance Agent Name: Rebecca Rubeter Phone: (208) 788-1100

**HOLD HARMLESS CLAUSE**

Permittee (organization/applicant) shall indemnify and hold harmless the City of Hailey, its agents, its employees and authorized volunteers from and against all claims, damages, losses and expenses, including attorney's fees, arising out of the permitted activity or the conduct of Permittee's operation of the event if such claim (1) is attributable to personal injury, bodily injury, disease or death, or to injury to or destruction of property, including the loss of use there from, and (2) is not caused by any negligent act or omission of willful misconduct of the City of Hailey or its employees acting within the scope of their employment.

**SPECIAL EVENT ACTIVITIES & CITY SERVICES REQUESTED**

Your Event Organizer is responsible for providing a complete list of event activities including a list of suppliers providing services. An event logistics map is required, detailing the location for all road closures, event set up, canopies, stages, vendors, booths, and any other major services or activities planned.

Yes	No	Check all Planned Activities	Yes	No	Check all Planned Activities
	<input checked="" type="checkbox"/>	<b>Street Closures &amp; Access / Parade (if yes)</b> • Street Closure for Special Event Application and detailed map listing areas of closure, parade route is required. <i>An ITD permit is required for Main Street.</i> • Your Event Coordinator is required to have the Notification Certification completed by all affected businesses, churches, schools and neighborhoods.		<input checked="" type="checkbox"/>	<b>Alcohol Served (Free of Charge) (name of provider)</b>
				<input checked="" type="checkbox"/>	<b>Alcohol Sold</b> Requires Alcohol Beverage Catering Permit (Hailey Code 5.13)
#	<input checked="" type="checkbox"/>	<b>Canopies/Tents/Membranes/Temporary Structures (Number &amp; Size(s))</b> City of Hailey Fire Department, Fire Code Enforcement may require a permit for tents, canopies, membrane, or temporary structures over 200 sq. ft.	<input checked="" type="checkbox"/>		<b>Food/Beverages will be served (List Caterers):</b>
#	<input checked="" type="checkbox"/>	<b>Security (detail who, number of officers, times. Attach plan)</b>		<input checked="" type="checkbox"/>	<b>Vendors items sold/ solicitation</b>
<input checked="" type="checkbox"/>		<b>Medical Services</b> (Circle) First Aid and/or EMS Services *Determination of EMS services is dependent on event size and type. Who is providing this service: <u>W.R. Fire &amp; Rescue</u>		<input checked="" type="checkbox"/>	
	<input checked="" type="checkbox"/>	<b>Traffic Control / Shuttle Buses</b> (Number of buses / locations / hours of operation, attach plan.)	#	<input checked="" type="checkbox"/>	<b>Booths: Profit / Non-Profit</b>
#	<input checked="" type="checkbox"/>	<b>Electricity / Generators (Size _____)</b> Attach detailed electrical plan.		<input checked="" type="checkbox"/>	<b>Activities / Entertainment (Agenda)</b> Other equipment or entertainment
	<input checked="" type="checkbox"/>	<b>Lighting plan: attach plan</b>		<input checked="" type="checkbox"/>	<b>Signs or Banners: sign permit may be required by the City Planning and Zoning Department</b>
	<input checked="" type="checkbox"/>	<b>Gray Water Barrel / Grease Barrel</b> (circle /detail # and locations)		<input checked="" type="checkbox"/>	<b>Stages (Number and Size(s) _____)</b>
<input checked="" type="checkbox"/>		<b>Sanitation -Trash bins, Dumpsters, Recycle</b> (circle /detail # and locations)	#	<input checked="" type="checkbox"/>	<b>Barricades. How many</b> identify locations and attach logistics map
#	<input checked="" type="checkbox"/>	<b>Porta Toilets / Wash Stations</b> (Quantity ADA Regular _____)	#		<b>EVENT estimated attendance: <u>100-150</u></b> Number of staff working event: <u>15</u> Number of volunteers working event: _____
<input checked="" type="checkbox"/>		<b>Water Drinking/ Washing (circle)</b>			<b>Amplified Sound Permit-the allowable sound decibel level - (90) dB maximum</b>

I hereby certify that I have read and will abide by the laws, rules and regulations set forth by the City of Hailey, Blaine County, and the State of Idaho, and in signing this application, I hereby agree that I and the organization I represent, shall hold the City of Hailey and all of its agents or employees free and blameless from any claim, liability or damage which may arise from use of City facilities or equipment, whether or not the City of Hailey, its agents or employees are jointly negligent. I further agree to promptly reimburse the City of Hailey and all of its agents for any clean up loss or damage to City property resulting from this use, as well as permitting, staffing, equipment use/rental, property use/rental, clean up, inspections involving the use of public property, public employees or public equipment for the Special Event. In the event the deposit exceeds the actual charges, the City Clerk shall refund the balance to the applicant.

Event Organizer's Signature: \_\_\_\_\_

Date: 7/7/12



**AGENDA ITEM SUMMARY**

DATE: 07-16-12 DEPARTMENT: Public Works DEPT. HEAD SIGNATURE: *SK*

**SUBJECT:**

Request approval for Northern Rockies Arts & Crafts Fair, will be held on August 4, 2012 from 9:00 a.m. to 6:00 p.m. and August 5, 2012 from 9:00 a.m. to 5:00 p.m., at Village at Hailey Center, 311 S. Main Street.

**AUTHORITY:**  ID Code \_\_\_\_\_  IAR \_\_\_\_\_  City Ordinance/Code \_\_\_\_\_  
(IF APPLICABLE)

**BACKGROUND/SUMMARY OF ALTERNATIVES CONSIDERED:**

**FISCAL IMPACT / PROJECT FINANCIAL ANALYSIS:** Caselle # \_\_\_\_\_  
Budget Line Item # \_\_\_\_\_ YTD Line Item Balance \$ \_\_\_\_\_  
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Staff Contact: \_\_\_\_\_ Phone # \_\_\_\_\_  
Comments: \_\_\_\_\_

**ACKNOWLEDGEMENT BY OTHER AFFECTED CITY DEPARTMENTS:** (IF APPLICABLE)

- |  |  |   |
|--|--|---|
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| <input type="checkbox"/> City Attorney         | <input type="checkbox"/> Mayor               | <input type="checkbox"/> Streets            |
| <input type="checkbox"/> City Clerk            | <input type="checkbox"/> Planning            | <input type="checkbox"/> Treasurer          |
| <input type="checkbox"/> Building              | <input checked="" type="checkbox"/> Police   | _____                                       |
| <input checked="" type="checkbox"/> Engineer   | <input type="checkbox"/> Public Works, Parks | _____                                       |
| <input checked="" type="checkbox"/> Fire Dept. | <input type="checkbox"/> P & Z Commission    | _____                                       |

**RECOMMENDATION FROM APPLICABLE DEPARTMENT HEAD:**

Motion to approve the Northern Rockies Arts & Crafts Fair and authorize the Mayor to sign.

**ADMINISTRATIVE COMMENTS/APPROVAL:**

City Administrator \_\_\_\_\_ Dept. Head Attend Meeting (circle one) Yes No

**ACTION OF THE CITY COUNCIL:**

Date \_\_\_\_\_

City Clerk \_\_\_\_\_

**FOLLOW-UP:**

\*Ord./Res./Agmt./Order Originals: Record  
Copies (all info.): \_\_\_\_\_  
Instrument # \_\_\_\_\_

\*Additional/Exceptional Originals to: \_\_\_\_\_  
Copies (AIS only)

## DECISION

Based on the Application for a Special Event Permit for the 2012 Northern Rockies Arts & Crafts Fair, the City of Hailey, pursuant to Chapter 12.14 of the Hailey Municipal Code, approves the Application and grants the Special Event Permit, subject to the following conditions:

### Standard Conditions

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- b. The Applicant shall comply with all applicable local, state and federal laws, regulations and ordinances before, during and after the Special Event(s).
- c. The Applicant shall execute an agreement, relating to the reimbursement of expenses, indemnification and other provisions immediately upon the approval of the application for the Special Events Permit.
- d. In the event the Applicant fails to comply with all the conditions set forth herein, the City may revoke the Special Events Permit, in whole or in part.

### Other Conditions

DATED this 16<sup>th</sup> day of July, 2012.

CITY OF HAILEY

By: \_\_\_\_\_  
Fritz Haemmerle, its Mayor

ATTEST:

\_\_\_\_\_  
Mary Cone, City Clerk

## AGREEMENT

In consideration of the granting of a special event permit by the City of Hailey ("the City") for the 2012 Northern Rockies Arts & Crafts Fair that will occur on August 4, 2012 from 9:00 a.m. to 6:00 p.m. and August 5, 2012 from 9:00 a.m. to 5:00 p.m., plus specified set up and teardown time, ("the Event"), and pursuant to Section 12.14 of the Hailey Municipal Code, the undersigned, as the applicant ("Applicant") of a Special Event Permit from the City for the Event, does hereby agree to reimburse the City for any costs incurred by the City in repairing damage or providing any services or materials resulting from the Event. The Applicant agrees that such costs may be deducted from a service security deposit as established by the City, and that if costs exceed any deposit made by the applicant, further reimbursement will be made to the

CITY OF HAILEY ■ 115 MAIN ST. S., SUITE H ■ HAILEY, IDAHO 83333 ■ 788-4221

City upon demand. The Applicant hereby agrees to indemnify, defend and hold harmless the City and its officers and employees, in their official and individual capacities, from any and all claims, demands, obligations, liabilities, lawsuits, judgments, attorneys' fees, costs, expenses and damages of any nature caused by or arising out of, or connected with the Event. In the event either party hereto is required to retain counsel to enforce a provision of this Agreement, or to recover damages resulting from a breach hereof, the prevailing party shall be entitled to recover from the other party all reasonable attorney's fees incurred herein or on appeal, or in bankruptcy proceedings. The Applicant agrees to comply with all the laws and ordinances of the City of Hailey, Idaho applicable to the subject matter thereof, and to conduct the Event in accordance with the terms and provisions of the application for a Special Event Permit, as approved or as modified by the City, and all conditions of the Special Event Permit. The Applicant agrees that the Special Event Permit is nontransferable and shall be conducted only for the dates and locations as approved by the City.

IN WITNESS WHEREOF, Applicant and the City have executed this Agreement on this 16<sup>th</sup> day of July, 2012.

APPLICANT:

By: \_\_\_\_\_

(please sign and print name and title, if applicable)

CITY OF HAILEY:

By: \_\_\_\_\_  
Fritz Haemmerle, its Mayor

ATTEST:

\_\_\_\_\_  
Mary Cone, its City Clerk

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**VII. INSURANCE REQUIREMENTS**

It is the responsibility of your Special Event organizers to maintain a COMPREHENSIVE GENERAL LIABILITY insurance policy with coverage of not less than \$1,000,000.00 combined single limit per occurrence. Each policy shall be written as a primary policy, not contributing with or in excess of any coverage which the City may carry. *A certificate naming the City of Hailey, Blaine County, Idaho as additional insured shall be delivered to the City of Hailey with this application.* The adequacy of all insurance required by these provisions shall be subject to approval by the City Clerk. Failure to maintain any insurance coverage required by this agreement shall be cause for immediate termination of the application.

Insurance Company: Philadelphia Ins Agent Name: Betty Urbany Phone: 726-8846

**HOLD HARMLESS CLAUSE**

Permittee (organization/applicant) shall indemnify and hold harmless the City of Hailey, its agents, its employees and authorized volunteers from and against all claims, damages, losses and expenses, including attorney's fees, arising out of the permitted activity or the conduct of Permittee's operation of the event if such claim (1) is attributable to personal injury, bodily injury, disease or death, or to injury to or destruction of property, including the loss of use there from, and (2) is not caused by any negligent act or omission of willful misconduct of the City of Hailey or its employees acting within the scope of their employment.

**SPECIAL EVENT ACTIVITIES & CITY SERVICES REQUESTED**

Your Event Organizer is responsible for providing a complete list of event activities including a list of suppliers providing services. An event logistics map is required, detailing the location for all road closures, event set up, canopies, stages, vendors, booths, and any other major services or activities planned.

Yes	No	Check all Planned Activities	Yes	No	Check all Planned Activities
		<b>Street Closures &amp; Access / Parade (if yes)</b> <ul style="list-style-type: none"> <li>Street Closure for Special Event Application and detailed map listing areas of closure, parade route is required. <i>An ITD permit is required for Main Street.</i></li> <li>Your Event Coordinator is required to have the Notification Certification completed by all affected businesses, churches, schools and neighborhoods.</li> </ul>		✓	<b>Alcohol Served (Free of Charge)</b> (name of provider)
				✓	<b>Alcohol Sold</b> Requires Alcohol Beverage Catering Permit (Hailey Code 5.13)
#		<b>Canopies/Tents/Membranes/Temporary Structures</b> (Number & Size(s)) <i>10 x 10 Spaces</i> City of Hailey Fire Department, Fire Code Enforcement may require a permit for tents, canopies, membrane, or temporary structures over 200 sq. ft.			<b>Food/Beverages</b> will be served (List Caterers):  <i>Local Restaurants booths maybe</i>
#	✓	<b>Security</b> (detail who, number of officers, times. Attach plan)			<b>Vendors items sold/ solicitation</b>  <i>up to 50</i>
	✓	<b>Medical Services</b> (Circle) First Aid and/or EMS Services *Determination of EMS services is dependent on event size and type. Who is providing this service: _____		✓	
	✓	<b>Traffic Control / Shuttle Buses</b> <i>Mr Rides Stop Main</i> (Number of buses / locations / hours of operation, attach plan.)	#	SD	<b>Booths: Profit / Non-Profit</b>
#	✓	<b>Electricity / Generators</b> (Size _____) Attach detailed electrical plan.		✓	<b>Activities / Entertainment</b> (Agenda) <i>Kids Fun</i> Other equipment or entertainment <i>Face painting</i>
	✓	<b>Lighting plan:</b> attach plan  <i>No</i>		✓	<b>Signs or Banners:</b> sign permit may be required by the City Planning and Zoning Department
	✓	<b>Gray Water Barrel / Grease Barrel</b> (circle /detail # and locations)		✓	<b>Stages</b> (Number and Size(s) _____)
✓		<b>Sanitation</b> -Trash bins, Dumpsters, Recycle (circle /detail # and locations) <i>6</i>	#	✓	<b>Barricades.</b> How many identify locations and attach logistics map
#	✓	<b>Porta Toilets / Wash Stations</b> (Quantity ADA Regular _____) <i>4 (1 accessible) Hand wash station</i>	#	500-1000	<b>EVENT estimated attendance:</b> <i>1000 Both Days</i> Number of staff working event: <i>4</i> Number of volunteers working event: <i>12</i>
✓		<b>Water</b> (Drinking/ Washing (circle))  <i>4 H Club</i>		No	<b>Amplified Sound Permit</b> -the allowable sound decibel level - (90) dB maximum

I hereby certify that I have read and will abide by the laws, rules and regulations set forth by the City of Hailey, Blaine County, and the State of Idaho, and in signing this application, I hereby agree that I and the organization I represent, shall hold the City of Hailey and all of its agents or employees free and blameless from any claim, liability or damage which may arise from use of City facilities or equipment, whether or not the City of Hailey, its agents or employees are jointly negligent. I further agree to promptly reimburse the City of Hailey and all of its agents for any clean up loss or damage to City property resulting from this use, as well as permitting, staffing, equipment use/rental, property use/rental, clean up, inspections involving the use of public property, public employees or public equipment for the Special Event. In the event the deposit exceeds the actual charges, the City Clerk shall refund the balance to the applicant.

Event Organizer's Signature: Virginia Lowe Date: 6.30.2012

## *Northern Rockies Arts and Crafts Fair*

The Hailey Chamber of Commerce is pleased to announce the Main street venue for our Arts & Crafts Fair event this August 4th & 5<sup>th</sup> 2012 This event is held in conjunction with the Annual Northern Rockies Folk Festival on August 3rd & 4th as well as the Kiwanis Classic Car Show, and Blaine County Fair Horse Show all in downtown .

We will feature a Children's Corner with children's activities, games and crafts, an extra attraction of the fair, as well as information booths for non-profits and chamber member businesses.

We hope for a good turnout, and a pleasant fair.

**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

05/08/12

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 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 Ketchum Branch Bisnett Insurance Inc. PO Box 5567 Ketchum, ID 83340 Betty Urbany	208-726-8866	CONTACT NAME:	
	208-726-8491	PHONE (A/C, No, Ext):	FAX (A/C, No):
		E-MAIL ADDRESS:	
		INSURER(S) AFFORDING COVERAGE	
		INSURER A : Philadelphia Insurance Comp	
		INSURER B :	
		INSURER C :	
		INSURER D :	
		INSURER E :	
		INSURER F :	

INSURED  
**Hailey Chamber of Commerce**  
PO Box 100  
Hailey, ID 83333

**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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	X		PHPK714302	05/01/12	05/01/13	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	X		PHPK859329	05/01/12	05/01/13	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB EXCESS LIAB DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N N/A				WC STATUTORY LIMITS OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
Coverage under this policy provides for the additional insured for all causes of action arising out of the event scheduled for July 4, 2012, this policy is intended to be primary to, and not contributory with, any other insurance maintained by or on behalf of State of Idaho or Idaho Dept. of Transportaton

**CERTIFICATE HOLDER****CANCELLATION**

<b>IDAHOTR</b>  Idaho Transportation Dept State of Idaho PO Box 7129 Boise, ID 83707-7129	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 <b>Betty Urbany</b>

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**AGENDA ITEM SUMMARY**

DATE: 07-16-12 DEPARTMENT: Public Works DEPT. HEAD SIGNATURE: \_\_\_\_\_

**SUBJECT:**

Request approval for Kiwanis Car Show, will be held at Roberta Mc Kercher Park, Saturday, August 4, 2012 from 8:00 a.m. and 5:00 p.m..

**AUTHORITY:**  ID Code \_\_\_\_\_  IAR \_\_\_\_\_  City Ordinance/Code \_\_\_\_\_  
(IF APPLICABLE)

**BACKGROUND/SUMMARY OF ALTERNATIVES CONSIDERED:**

**FISCAL IMPACT / PROJECT FINANCIAL ANALYSIS:** Caselle # \_\_\_\_\_  
Budget Line Item # \_\_\_\_\_ YTD Line Item Balance \$ \_\_\_\_\_  
Estimated Hours Spent to Date: \_\_\_\_\_ Estimated Completion Date: \_\_\_\_\_  
Staff Contact: \_\_\_\_\_ Phone # \_\_\_\_\_  
Comments: \_\_\_\_\_

**ACKNOWLEDGEMENT BY OTHER AFFECTED CITY DEPARTMENTS:** (IF APPLICABLE)

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> City Administrator    | <input type="checkbox"/> Library             | <input type="checkbox"/> Benefits Committee |
| <input type="checkbox"/> City Attorney         | <input type="checkbox"/> Mayor               | <input type="checkbox"/> Streets            |
| <input type="checkbox"/> City Clerk            | <input type="checkbox"/> Planning            | <input type="checkbox"/> Treasurer          |
| <input type="checkbox"/> Building              | <input checked="" type="checkbox"/> Police   | _____                                       |
| <input checked="" type="checkbox"/> Engineer   | <input type="checkbox"/> Public Works, Parks | _____                                       |
| <input checked="" type="checkbox"/> Fire Dept. | <input type="checkbox"/> P & Z Commission    | _____                                       |

**RECOMMENDATION FROM APPLICABLE DEPARTMENT HEAD:**

Motion to approve the Kiwanis Car Show 2012 and authorize the Mayor to sign.

**ADMINISTRATIVE COMMENTS/APPROVAL:**

City Administrator \_\_\_\_\_ Dept. Head Attend Meeting (circle one) Yes No

**ACTION OF THE CITY COUNCIL:**

Date \_\_\_\_\_

City Clerk \_\_\_\_\_

**FOLLOW-UP:**

\*Ord./Res./Agrmt./Order Originals: Record  
Copies (all info.): \_\_\_\_\_  
Instrument # \_\_\_\_\_

\*Additional/Exceptional Originals to: \_\_\_\_\_  
Copies (AIS only)

## DECISION

Based on the Application for a Special Event Permit for the 2012 Kiwanis Car Show, the City of Hailey, pursuant to Chapter 12.14 of the Hailey Municipal Code, approves the Application and grants the Special Event Permit, subject to the following conditions:

### Standard Conditions

- a. The Applicant shall comply with the terms, plans, covenants and provisions of the Application, as approved or as modified by the City of Hailey.
- b. The Applicant shall comply with all applicable local, state and federal laws, regulations and ordinances before, during and after the Special Event(s).
- c. The Applicant shall execute an agreement, relating to the reimbursement of expenses, indemnification and other provisions immediately upon the approval of the application for the Special Events Permit.
- d. In the event the Applicant fails to comply with all the conditions set forth herein, the City may revoke the Special Events Permit, in whole or in part.

### Other Conditions

DATED this 16<sup>th</sup> day of July, 2012.

CITY OF HAILEY

By: \_\_\_\_\_  
Fritz Haemmerle, its Mayor

ATTEST:

\_\_\_\_\_  
Mary Cone, City Clerk

## AGREEMENT

In consideration of the granting of a special event permit by the City of Hailey ("the City") for the 2012 Kiwanis Car Show that will occur on August 4, 2012 from 8:00 a.m. to 5:00 p.m., plus specified set up and teardown time, ("the Event"), and pursuant to Section 12.14 of the Hailey Municipal Code, the undersigned, as the applicant ("Applicant") of a Special Event Permit from the City for the Event, does hereby agree to reimburse the City for any costs incurred by the City in repairing damage or providing any services or materials resulting from the Event. The Applicant agrees that such costs may be deducted from a service security deposit as established by the City, and that if costs exceed any deposit made by the applicant, further reimbursement will be made to the City upon demand. The Applicant hereby agrees to

CITY OF HAILEY ■ 115 MAIN ST. S., SUITE H ■ HAILEY, IDAHO 83333 ■ 788-4221

indemnify, defend and hold harmless the City and its officers and employees, in their official and individual capacities, from any and all claims, demands, obligations, liabilities, lawsuits, judgments, attorneys' fees, costs, expenses and damages of any nature caused by or arising out of, or connected with the Event. In the event either party hereto is required to retain counsel to enforce a provision of this Agreement, or to recover damages resulting from a breach hereof, the prevailing party shall be entitled to recover from the other party all reasonable attorney's fees incurred herein or on appeal, or in bankruptcy proceedings. The Applicant agrees to comply with all the laws and ordinances of the City of Hailey, Idaho applicable to the subject matter thereof, and to conduct the Event in accordance with the terms and provisions of the application for a Special Event Permit, as approved or as modified by the City, and all conditions of the Special Event Permit. The Applicant agrees that the Special Event Permit is nontransferable and shall be conducted only for the dates and locations as approved by the City.

IN WITNESS WHEREOF, Applicant and the City have executed this Agreement on this 16<sup>th</sup> day of July, 2012.

APPLICANT:

By: \_\_\_\_\_

(please sign and print name and title, if applicable)

CITY OF HAILEY:

By: \_\_\_\_\_

Fritz Haemmerle, its Mayor

ATTEST:

\_\_\_\_\_  
Mary Cone, its City Clerk

CITY OF HAILEY ■ 115 MAIN ST. S., SUITE H ■ HAILEY, IDAHO 83333 ■ 788-4221



# SPECIAL EVENT PERMIT APPLICATION

RECEIVED  
FEB 15 2012  
Pd

I. EVENT NAME: KIWANIS CAR SHOW

II. LOCATION FOR EVENT (Be specific e.g., Hop Porter Park, all of 1<sup>st</sup> Avenue between Walnut and Pine, 115 Main St. S.):

Public Property       Private Property

ROBERTA McKERCHER PARK

EMAIL TO DEPT HEADS: <u>3-20-12</u>	
HFD: <input checked="" type="checkbox"/>	CERT INSURANCE: <input checked="" type="checkbox"/>
HPD: <input checked="" type="checkbox"/>	STR CLOSURE: <u>NO</u>
HBLDG: <input checked="" type="checkbox"/>	BARRICADE MAP: <input type="checkbox"/>
HENG: <input checked="" type="checkbox"/>	CATERING PERMIT: <input type="checkbox"/>
HPD SEC: <u>NO</u>	AMPL PERMIT: <input type="checkbox"/>
	SIGN PERMIT: <input type="checkbox"/>

### III. EVENT SCHEDULE

Special Events are limited to four days, including set-up and tear-down days. No more than eight events per calendar year can be conducted by a single party or organization, unless a modification is granted by the City Council. **Please submit your modification requests in writing and attach to your application.**

Date(s) of Event	Hours	Estimated # of Attendees
<u>AUG 4, 2012</u>	Start Time: <u>8:00 AM</u> End Time: <u>5:00 PM</u>	One Hour Interval: <u>400</u> All Day: <u>2,000</u>
	Start Time:                      End Time:	One Hour Interval: All Day:
Date of Set-Up		
	Start Time: <u>8:00 AM</u> End Time: <u>5:00 PM</u>	
Date of Tear Down		
	Start Time:                      End Time:	

### IV. FEES

- Special Event Permit Application Fee      \$125
- Per Day Park Rental Fee      ~~\$200~~ 200 - yes
- Security Deposit      ~~\$500~~
- Tax (on park rental fees only)      6%
- TOTAL DUE**
- Additional Deposit Required

125.00  
200.00  
12.00  
337.00 ✓ PD  
—

*NEW ordinance  
Waive*

*Rec# 12.002624*

### V. ORGANIZATION INFORMATION

Applicant's Name: KIWANIS CLUB Title: LOWELL THOMAS-

Mailing Address: P.O. Box 901, HAILEY ID Zip Code: 83333

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Day Telephone: 720-7091 Evening Telephone: SAME

FAX Number: \_\_\_\_\_ E-Mail Address: jlowellthomas@kiwanis.org

Applicant Driver's License #: FA 12576 WF LOWELL THOMAS

Sponsoring Organization: KIWANIS CLUB OF HAILEY

Non-Profit:  Yes  No

Tax Exempt #: 217091

Federal Tax #: 01-0890748 State Tax #: \_\_\_\_\_

### VI. EVENT INFORMATION

New Event: Yes \_\_\_\_\_ No  Annual Event: Yes  No \_\_\_\_\_ Years Operating 26

Event Category:  Commercial  Noncommercial

Estimate of Gross Ticket Sales & Revenues (commercial event only): N/A

Description of Event:  
1 DAY CAR SHOW. PROFIT DONATED TO CHILDREN IN NEED THRU THE KIWANIS CLUB.

Additional Details:  
SUCCESSFUL EVENT HELD THE PAST 5 YEARS

### VII. INSURANCE REQUIREMENTS

It is the responsibility of your Special Event organizers to maintain a COMPREHENSIVE GENERAL LIABILITY insurance policy with coverage of not less than \$1,000,000.00 combined single limit per occurrence. Each policy shall be written as a primary policy, not contributing with or in excess of any coverage which the City may carry. *A certificate naming the City of Hailey, Blaine County, Idaho as additional insured shall be delivered to the City of Hailey with this application.* The adequacy of all insurance required by these provisions shall be subject to approval by the City Clerk. Failure to maintain any insurance coverage required by this agreement shall be cause for immediate termination of the application.

Insurance Company: SAFECO/AMERICAN STATES Agent Name: MARTY MILLER BISNETT INSURANCE

Address: P.O. Box 5567, KETCHUM ID Phone: (208) 726-8866

#### HOLD HARMLESS CLAUSE

Permittee (organization/applicant) shall indemnify and hold harmless the City of Hailey, its agents, its employees and authorized volunteers from and against all claims, damages, losses and expenses, including attorney's fees, arising out of the permitted activity or the conduct of Permittee's operation of the event if such claim (1) is attributable to personal injury, bodily injury, disease or death, or to injury to or destruction of property, including the loss of use there from, and (2) is not caused by any negligent act or omission of willful misconduct of the City of Hailey or its employees acting within the scope of their employment.

(Attach any additional pages as needed)

# SPECIAL EVENT ACTIVITIES & CITY SERVICES REQUESTED

Your Event Organizer is responsible for providing a complete list of event activities including a list of suppliers providing services. An event logistics map is required, detailing the location for all road closures, event set up, canopies, stages, vendors, booths, and any other major services or activities planned.

Yes	No	Check all Planned Activities	Yes	No	Check all Planned Activities
		<b>Street Closures &amp; Access / Parade</b> Detailed map listing areas of closure, parade route is required. An ITD permit is required for Main Street.	YES		Alcohol Served (Free of Charge) (name of provider) <i>WICKED SPUD</i>
	NO		YES		Alcohol Sold Requires Alcohol Beverage Catering Permit (Hailey Code 5.13)
	NO	<b>Street Closures &amp; Access /Parade</b> require your Event Coordinator to notify all affected businesses, churches schools and neighborhoods	YES		Food/Beverages will be served (List Caterers): <i>FULL MOON - BELLEVUE</i>
#		<b>Canopies/Tents/Membranes/Temporary Structures</b> (Number & Size(s)) City of Hailey Fire Department, Fire Code Enforcement	#		Vendors items sold/ solicitation
6 10X10			#		
		<b>Medical Services</b> (Circle) First Aid and/or EMS Services  Who is providing services? _____		NO	
	NO				
#		<b>Security</b> (detail who, number of officers, times. Attach plan)	#		Booths: Profit / Non-Profit <i>2 2</i>
	NO				
		<b>Traffic Control / Shuttle Buses</b> (Number of buses / locations / hours of operation, attach plan.)		NO	Lighting plan: attach plan <i>DAYTIME</i>
#		<b>Electricity / Generators</b> (Size <i>20 AMP CIRCUITS</i> ) Attach detailed electrical plan. <i>AT PARK</i>			Activities / Entertainment (Agenda) Other equipment or entertainment <i>BAND 11:30-7:30 DJ 10:00-1:30</i>
2			X		Signs or Banners: sign permit may be required by the City Planning and Zoning Department
		<b>Water</b> Drinking / Washing (circle) <i>1 SELF CONTAINED SINK</i>		X	Stages (Number and Size(s)) <i>NO</i>
	NO	<b>Gray Water Barrel / Grease Barrel</b> (circle /detail # and locations)	#		Barricades. How many <i>4 TO 6 - PRIVATE STREET IN FRONT OF ARMORY</i> identify locations and attach logistics map
			6		
<i>6 TRASH CANS</i>		<b>Sanitation</b> -Trash bins, Dumpsters, Recycle (circle /detail # and locations)	#		EVENT estimated attendance <i>THRU DAY</i>
			2,000		
#		<b>Porta Toilets / Wash Stations</b> (Quantity ADA Regular)	#	10	Number of staff working event
2		<i>2 1 1</i>	#	6	Number of volunteers working

I hereby certify that I have read and will abide by the laws, rules and regulations set forth by the City of Hailey, Blaine County, and the State of Idaho, and in signing this application, I hereby agree that I and the organization I represent, shall hold the City of Hailey and all of its agents or employees free and blameless from any claim, liability or damage which may arise from use of City facilities or equipment, whether or not the City of Hailey, its agents or employees are jointly negligent. I further agree to promptly reimburse the City of Hailey and all of its agents for any clean up loss or damage to City property resulting from this use, as well as permitting, staffing, equipment use/rental, property use/rental, clean up, inspections involving the use of public property, public employees or public equipment for the Special Event. In the event the deposit exceeds the actual charges, the City Clerk shall refund the balance to the applicant.

Event Organizer's Signature: *Lowell Thomas*

Date: *2-14-12*

# ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID MM  
KIWAN-1

DATE (MM/DD/YYYY)  
10/04/11

<b>PRODUCER</b> Ketchum Branch Bisnett Insurance Inc. PO Box 5567 Ketchum ID 83340 Phone: 208-726-8866 Fax: 208-726-8491	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.												
<b>INSURED</b>  Kiwanis Club of Hailey And The Wood River Valley PO Box 100 Hailey ID 83333	<table border="1"> <tr> <th style="width: 80%;">INSURERS AFFORDING COVERAGE</th> <th style="width: 20%;">NAIC #</th> </tr> <tr> <td>INSURER A: <b>First National Insurance Co</b></td> <td></td> </tr> <tr> <td>INSURER B:</td> <td></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> </table>	INSURERS AFFORDING COVERAGE	NAIC #	INSURER A: <b>First National Insurance Co</b>		INSURER B:		INSURER C:		INSURER D:		INSURER E:	
INSURERS AFFORDING COVERAGE	NAIC #												
INSURER A: <b>First National Insurance Co</b>													
INSURER B:													
INSURER C:													
INSURER D:													
INSURER E:													

## COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	01CI0862591	10/01/11	10/01/12	EACH OCCURRENCE	\$ 1000000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1000000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$ 10000
					PERSONAL & ADV INJURY	\$ 1000000
					GENERAL AGGREGATE	\$ 2000000
					PRODUCTS - COMP/OP AGG	\$ 2000000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	\$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$
	<input type="checkbox"/> HIRED AUTOS					
	<input type="checkbox"/> NON-OWNED AUTOS					
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC AGG	\$
	EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE	\$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$
	<input type="checkbox"/> DEDUCTIBLE					\$
	<input type="checkbox"/> RETENTION \$					\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT	\$
	If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE	\$
	OTHER				E.L. DISEASE - POLICY LIMIT	\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS  
**Clubs-Civic**

Certificate Holder is included as Additional Insured.

<b>CERTIFICATE HOLDER</b>  City of Hailey Trina Isaacs 115 Main Street South Hailey ID 83333	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL _____ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE Marty Miller <i>Marty Miller</i>
---	--

## **IMPORTANT**

If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

## **DISCLAIMER**

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.





### STREET CLOSURE FOR SPECIAL EVENT

EVENT NAME: Kiwanis Car Show

The above listed event received a street closure permit for a community event.

STREET CLOSURE DATES: 8-4-12

Route/street closure is map is attached.

Names of streets to be closed (attach further closures on a separate sheet if needed)		
<u>CEDEAR ST</u>	Between (street) <u>3<sup>RD</sup> AVENUE</u>	And (street) <u>4<sup>TH</sup> AVENUE</u>
	Between (street)	And (street)
Time of Street Closure	Start: <u>8:00 AM</u>	End: <u>5:00 PM</u>
Participant type and number of entries of each type (check all that apply):		
<input checked="" type="checkbox"/> Participants/Spectators _____ <input type="checkbox"/> Animals _____ <input checked="" type="checkbox"/> Vehicles _____ <input type="checkbox"/> Floats _____ <input type="checkbox"/> Busses _____ <input type="checkbox"/> Bikes _____		

LOWELL THOMAS  
(208) 720-7091



RECEIVED  
JUL 10 2012

## AMPLIFIED SOUND PERMIT APPLICATION

**Instructions:**

Fill in the details on the application return it to the Special Events Administrator. It will then be forwarded to the appropriate authority for approval and signature. The completed and signed application will act as your permit and will be forwarded to you once approvals and signatures are completed.

**It is important for the success of your event that surrounding residents and businesses are aware of the event and to have a contact for the event.** It is your responsibility to notify all residents and businesses in the immediate area that may be affected by the events amplified music prior to the event. On the back of this permit is a form entitled "Notification of Amplified Sound Event" to be used for notification. Please fill out the form, copy and distribute it to your event neighbors.

By notifying surrounding residents in advance of your event, it is the expectation of the City of Hailey that you will take the opportunity to correct amplification levels if you are contacted directly.

Events may require an Amplified Sound Permit to be filed along with a Special Events Permit. The Hailey Municipal Code does exempt certain events as a special event, however, an Amplified Sound Permit maybe required. Please contact the Special Events Administrator at 208-788-4221 x22 to help determine the requirements for your event.

**Applicable Requirements:** There is no fee for the administrative review of this application or the first Hailey Police Department visit to your event, for visits 2 and more the fee charged to the applicant will be \$25.00 per visit. The allowable sound decibel level is – (90) dB maximum and sound may only be amplified between the hours of 10 am and 10 pm.

*Kiwanis Club of Hailey*

Name of Applicant: LOWELL THOMAS Phone: 7-10-12

Address of Applicant: 811 ASPEN VALLEY DR, HAILEY

Type of Event: CAR SHOW

Location of Event: ROBERTA MCKERHER PARK

Date of Event: 8-4-12 Number of People Expected: 2,000

Time of Amplification: From 9:30 AM to 4:00 PM

**By signing this application, you are confirming the receipt and knowledge of the applicable requirements and agree to comply with them.** In the event the Police Department has to intervene, the permit may be voided if found to not be in compliance with the applicable requirements.

Signature of Applicant: Lowell Thomas Date: 7-10-12

When signed by the Police Chief or designee, a copy of the signed application will be your permit.

Chief of Police, or designee: \_\_\_\_\_ Date: \_\_\_\_\_

<input type="checkbox"/> Permit Approved	(For City Use Only)
<input type="checkbox"/> Not Approved (check reason below)	
<input type="checkbox"/> Use of the equipment would constitute a detriment to traffic safety;	
<input type="checkbox"/> The issuance of the permit would be otherwise detrimental to the public health, safety or welfare;	
<input type="checkbox"/> The issuance of the permit will substantially interfere with the peace and quiet of the neighborhood or the community;	
<input type="checkbox"/> The applicant would violate the provisions of this Code or any other law.	



**AGENDA ITEM SUMMARY**

DATE: 07-16-12 DEPARTMENT: Public Works DEPT. HEAD SIGNATURE: 

**SUBJECT:**

Request approval for Road Runner 5k-Senior Connection Special Event at Hailey Armory on September 15, 2012 the hours will be from 8:00am – 3:00pm.

**AUTHORITY:**  ID Code \_\_\_\_\_  IAR \_\_\_\_\_  City Ordinance/Code \_\_\_\_\_  
(IF APPLICABLE)

**BACKGROUND/SUMMARY OF ALTERNATIVES CONSIDERED:**

**FISCAL IMPACT / PROJECT FINANCIAL ANALYSIS:** Caselle # \_\_\_\_\_  
Budget Line Item # \_\_\_\_\_ YTD Line Item Balance \$ \_\_\_\_\_  
Estimated Hours Spent to Date: \_\_\_\_\_ Estimated Completion Date: \_\_\_\_\_  
Staff Contact: \_\_\_\_\_ Phone # \_\_\_\_\_  
Comments: \_\_\_\_\_

**ACKNOWLEDGEMENT BY OTHER AFFECTED CITY DEPARTMENTS:** (IF APPLICABLE)

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> City Administrator    | <input type="checkbox"/> Library             | <input type="checkbox"/> Benefits Committee |
| <input type="checkbox"/> City Attorney         | <input type="checkbox"/> Mayor               | <input type="checkbox"/> Streets            |
| <input type="checkbox"/> City Clerk            | <input type="checkbox"/> Planning            | <input type="checkbox"/> Treasurer          |
| <input type="checkbox"/> Building              | <input checked="" type="checkbox"/> Police   | _____                                       |
| <input checked="" type="checkbox"/> Engineer   | <input type="checkbox"/> Public Works, Parks | _____                                       |
| <input checked="" type="checkbox"/> Fire Dept. | <input type="checkbox"/> P & Z Commission    | _____                                       |

**RECOMMENDATION FROM APPLICABLE DEPARTMENT HEAD:**

Motion to approve the Road Runner 5k Special Event and authorize the Mayor to sign.

**ADMINISTRATIVE COMMENTS/APPROVAL:**

City Administrator \_\_\_\_\_ Dept. Head Attend Meeting (circle one) Yes No

**ACTION OF THE CITY COUNCIL:**

Date \_\_\_\_\_

City Clerk \_\_\_\_\_

**FOLLOW-UP:**

\*Ord./Res./Agrmt./Order Originals: Record  
Copies (all info.): \_\_\_\_\_  
Instrument # \_\_\_\_\_

\*Additional/Exceptional Originals to: \_\_\_\_\_  
Copies (AIS only)

## DECISION

Based on the Application for a Special Event Permit for the 2012 Road Runner 5k, the City of Hailey, pursuant to Chapter 12.14 of the Hailey Municipal Code, approves the Application and grants the Special Event Permit, subject to the following conditions:

### Standard Conditions

- a. The Applicant shall comply with the terms, plans, covenants and provisions of the Application, as approved or as modified by the City of Hailey.
- b. The Applicant shall comply with all applicable local, state and federal laws, regulations and ordinances before, during and after the Special Event(s).
- c. The Applicant shall execute an agreement, relating to the reimbursement of expenses, indemnification and other provisions immediately upon the approval of the application for the Special Events Permit.
- d. In the event the Applicant fails to comply with all the conditions set forth herein, the City may revoke the Special Events Permit, in whole or in part.

### Other Conditions

DATED this 16<sup>th</sup> day of July, 2012.

CITY OF HAILEY

By: \_\_\_\_\_  
Fritz Haemmerle, its Mayor

ATTEST:

\_\_\_\_\_  
Mary Cone, City Clerk

## AGREEMENT

In consideration of the granting of a special event permit by the City of Hailey ("the City") for the 2012 Boxing Mixer that will occur on September 15, 2012 from 8:00 a.m. to 3:00 p.m., plus specified set up and teardown time, ("the Event"), and pursuant to Section 12.14 of the Hailey Municipal Code, the undersigned, as the applicant ("Applicant") of a Special Event Permit from the City for the Event, does hereby agree to reimburse the City for any costs incurred by the City in repairing damage or providing any services or materials resulting from the Event. The Applicant agrees that such costs may be deducted from a non-refundable security deposit or additional deposit as established by the City, and that if costs exceed any deposit made by the applicant, further reimbursement will be made to the City upon demand. The Applicant hereby agrees to indemnify, defend and hold harmless the City and its officers and employees, in

CITY OF HAILEY ■ 115 MAIN ST. S., SUITE H ■ HAILEY, IDAHO 83333 ■ 788-4221

their official and individual capacities, from any and all claims, demands, obligations, liabilities, lawsuits, judgments, attorneys' fees, costs, expenses and damages of any nature caused by or arising out of, or connected with the Event. In the event either party hereto is required to retain counsel to enforce a provision of this Agreement, or to recover damages resulting from a breach hereof, the prevailing party shall be entitled to recover from the other party all reasonable attorney's fees incurred herein or on appeal, or in bankruptcy proceedings. The Applicant agrees to comply with all the laws and ordinances of the City of Hailey, Idaho applicable to the subject matter thereof, and to conduct the Event in accordance with the terms and provisions of the application for a Special Event Permit, as approved or as modified by the City, and all conditions of the Special Event Permit. The Applicant agrees that the Special Event Permit is nontransferable and shall be conducted only for the dates and locations as approved by the City.

IN WITNESS WHEREOF, Applicant and the City have executed this Agreement on this 16<sup>th</sup> day of July, 2012.

APPLICANT:

By: \_\_\_\_\_

(please sign and print name and title, if applicable)

CITY OF HAILEY:

By: \_\_\_\_\_

Fritz Haemmerle, its Mayor

ATTEST:

\_\_\_\_\_  
Mary Cone, its City Clerk

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EMAIL TO DEPT HEADS: 0  
 HFD:  CERT INSURANCE: YES  
 HPD:  STR CLOSURE: YES  
 HBLDG:  BARRICADE MAP: NO  
 HENG:  CATERING PERMIT: NO  
 HPD SEC:  AMPL PERMIT: NO  
 SIGN PERMIT: NO

RECEIVED  
 JUN 21 2012

**SPECIAL EVENT PERMIT APPLICATION**

EVENT NAME: Road Runner 5K

LOCATION FOR EVENT (Be specific e.g., Hop Porter Park, all of 1<sup>st</sup> Avenue between Walnut and Pine, 115 Main St. S.):

Public Property     Private Property

**III. EVENT SCHEDULE**

Special Events are limited to four days, including set-up and tear-down days. No more than eight events per calendar year can be conducted by a single party or organization, unless a modification is granted by the City Council. **Please submit your modification requests in writing and attach to your application.**

Date(s) of Event	Hours	Estimated # of Attendees
9-15-12	Start Time: <u>8am</u> End Time: <u>3pm</u>	One Hour Interval: All Day:
	Start Time:                      End Time:	One Hour Interval: All Day:
Date of Set-Up	Start Time:                      End Time:	
Date of Tear Down	Start Time:                      End Time:	

**IV. FEES**

Special Event Permit Application Fee      \$125            125.00  
 Events that meet the following criteria may be exempted from Park Rental Fee by resolution of the City Council:  
 Non-profit event that is held annually within the City of Hailey for at least ten consecutive years and consistently draw large numbers of participants and spectators.      Tax Exempt #: \_\_\_\_\_  
 Promoted locally and regionally within the state and the northwest.  
 Per Day Park Rental Fee      \$200            /  
 Tax (on park rental fees only)      6%            /  
 Security Services Deposit            /  
**TOTAL DUE**      125.00

#500  
 212.00  
 125.00  
 -----  
 337.00

**V. ORGANIZATION INFORMATION**

Sponsoring Organization: Senior Connection  
 Applicant's Name: Kim Coonis      Title: Executive Director  
 Address: PO Box 28      City: Hailey      State: Id      Zip: 83333  
 Telephone Day: 208-788-3468      Evening: \_\_\_\_\_      FAX: \_\_\_\_\_  
 Applicant Driver's License #: \_\_\_\_\_      EMAIL: kcoonis@qwestoffice.net  
 Federal Tax #: 82-0315917      State Tax #: 00012064409

**VI. EVENT INFORMATION**

New Event: Yes \_\_\_\_\_ No X      Annual Event: Yes X No \_\_\_\_\_      Years Operating \_\_\_\_\_  
 Event Category:       Commercial       Noncommercial  
 Estimate of Gross Ticket Sales & Revenues (commercial event only): 10,000  
 Description of Event: 5K funRun  
 Additional Details: \_\_\_\_\_

**VII. INSURANCE REQUIREMENTS**

It is the responsibility of your Special Event organizers to maintain a COMPREHENSIVE GENERAL LIABILITY insurance policy with coverage of not less than \$1,000,000.00 combined single limit per occurrence. Each policy shall be written as a primary policy, not contributing with or in excess of any coverage which the City may carry. *A certificate naming the City of Hailey, Blaine County, Idaho as additional insured shall be delivered to the City of Hailey with this application.* The adequacy of all insurance required by these provisions shall be subject to approval by the City Clerk. Failure to maintain any insurance coverage required by this agreement shall be cause for immediate termination of the application.

Insurance Company: Swett & Crawford Agent Name: Hub International Phone: 788-7488

**HOLD HARMLESS CLAUSE**

Permittee (organization/applicant) shall indemnify and hold harmless the City of Hailey, its agents, its employees and authorized volunteers from and against all claims, damages, losses and expenses, including attorney's fees, arising out of the permitted activity or the conduct of Permittee's operation of the event if such claim (1) is attributable to personal injury, bodily injury, disease or death, or to injury to or destruction of property, including the loss of use there from, and (2) is not caused by any negligent act or omission of willful misconduct of the City of Hailey or its employees acting within the scope of their employment.

**SPECIAL EVENT ACTIVITIES & CITY SERVICES REQUESTED**

Your Event Organizer is responsible for providing a complete list of event activities including a list of suppliers providing services. An event logistics map is required, detailing the location for all road closures, event set up, canopies, stages, vendors, booths, and any other major services or activities planned.

Yes	No	Check all Planned Activities	Yes	No	Check all Planned Activities
X		<b>Street Closures &amp; Access / Parade (if yes)</b> • Street Closure for Special Event Application and detailed map listing areas of closure, parade route is required. <i>An ITD permit is required for Main Street.</i> • Your Event Coordinator is required to have the Notification Certification completed by all affected businesses, churches, schools and neighborhoods.			<b>Alcohol Served (Free of Charge) (name of provider)</b>  <b>Alcohol Sold</b> Requires Alcohol Beverage Catering Permit (Hailey Code 5.13)
#	8	<b>Canopies/Tents/Membranes/Temporary Structures (Number &amp; Size(s))</b> City of Hailey Fire Department, Fire Code Enforcement may require a permit for tents, canopies, membrane, or temporary structures over 200 sq. ft.			<b>Food/Beverages will be served (List Caterers):</b>
#		<b>Security (detail who, number of officers, times. Attach plan)</b>  <b>Medical Services</b> (Circle) First Aid and/or EMS Services *Determination of EMS services is dependent on event size and type. Who is providing this service: _____			<b>Vendors items sold/ solicitation</b>
		<b>Traffic Control / Shuttle Buses</b> (Number of buses / locations / hours of operation, attach plan.)	#		<b>Booths: Profit / Non-Profit</b>
#		<b>Electricity / Generators (Size _____)</b> Attach detailed electrical plan.			<b>Activities / Entertainment (Agenda)</b> Other equipment or entertainment
		<b>Lighting plan: attach plan</b>			<b>Signs or Banners: sign permit may be required by the City Planning and Zoning Department</b>
		<b>Gray Water Barrel / Grease Barrel</b> (circle /detail # and locations)			<b>Stages (Number and Size(s) _____)</b>
		<b>Sanitation -Trash bins, Dumpsters, Recycle</b> (circle /detail # and locations)	#		<b>Barricades. How many identify locations and attach logistics map</b>
#		<b>Porta Toilets / Wash Stations</b> (Quantity ADA Regular _____)	#		<b>EVENT estimated attendance: _____</b> Number of staff working event: _____ Number of volunteers working event: _____
		<b>Water Drinking / Washing (circle)</b>			<b>Amplified Sound Permit-the allowable sound decibel level - (90) dB maximum</b>

I hereby certify that I have read and will abide by the laws, rules and regulations set forth by the City of Hailey, Blaine County, and the State of Idaho, and in signing this application, I hereby agree that I and the organization I represent, shall hold the City of Hailey and all of its agents or employees free and blameless from any claim, liability or damage which may arise from use of City facilities or equipment, whether or not the City of Hailey, its agents or employees are jointly negligent. I further agree to promptly reimburse the City of Hailey and all of its agents for any clean up loss or damage to City property resulting from this use, as well as permitting, staffing, equipment use/rental, property use/rental, clean up, inspections involving the use of public property, public employees or public equipment for the Special Event. In the event the deposit exceeds the actual charges, the City Clerk shall refund the balance to the applicant.

Event Organizer's Signature: Sam Cronis Date: 6/13/12



## STREET CLOSURE FOR SPECIAL EVENT

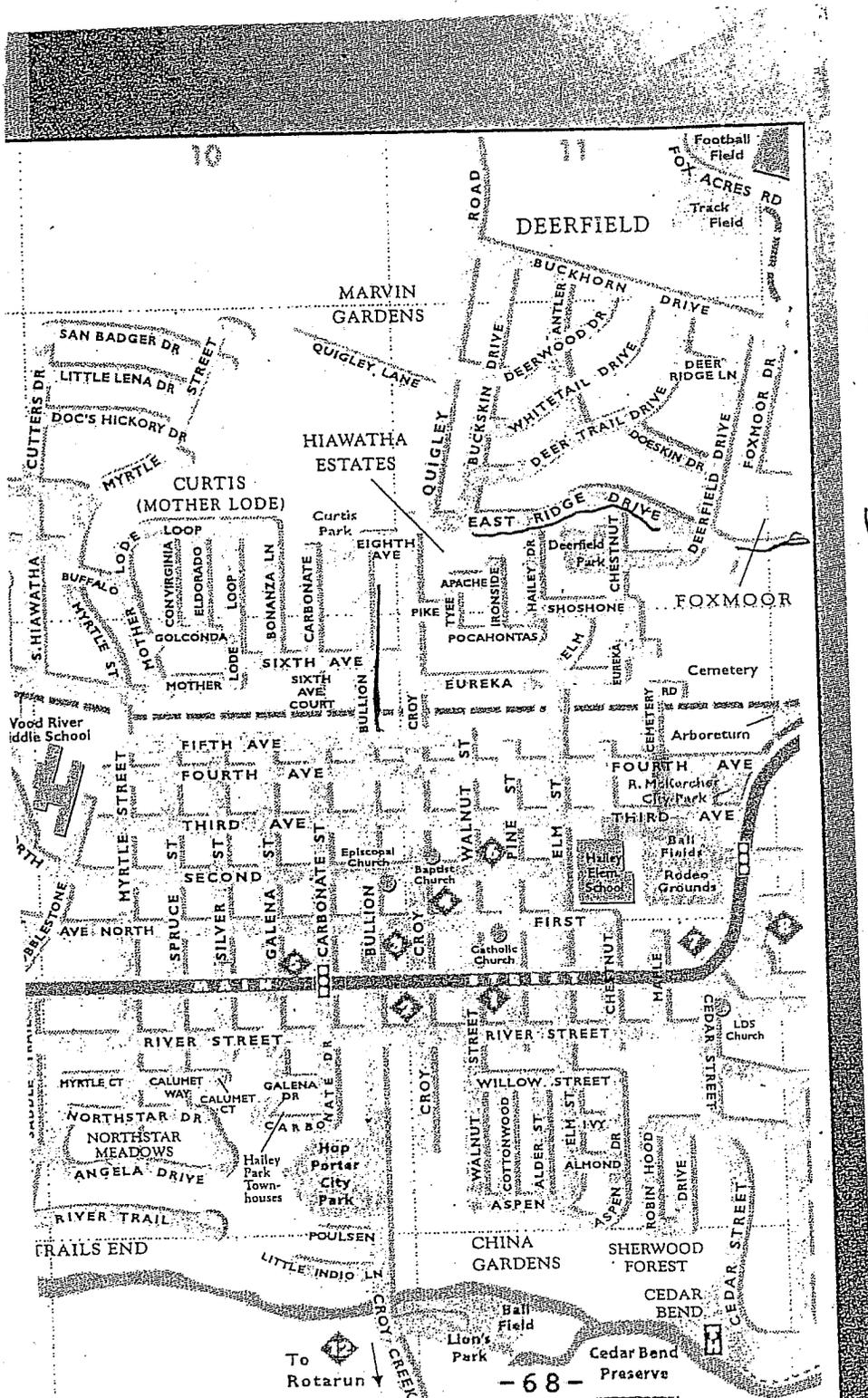
EVENT NAME: Road Runner 5K Fun Run  
 The above listed event received a street closure permit for a community event.

STREET CLOSURE DATES: Sept 15th

Route/street closure is map is attached.

Names of streets to be closed (attach further closures on a separate sheet if needed)		
<del>3rd Ave S.</del>	Between (street) <u>Cedar St</u>	And (street) <u>Front of 721 3rd Ave S.</u>
<u>Cedar</u>	Between (street) <u>3rd</u>	And (street) <u>4th</u>
	Between (street)	And (street)
Time of Street Closure	Start: <u>9am</u>	End: <u>2pm</u>
Participant type and number of entries of each type (check all that apply):		
<input checked="" type="checkbox"/> Participants/Spectators _____ <input type="checkbox"/> Animals _____ <input type="checkbox"/> Vehicles _____ <input type="checkbox"/> Floats _____ <input type="checkbox"/> Busses _____ <input type="checkbox"/> Bikes _____		





Armory ~~Cedar~~  
 - Cedar st  
 - Sr. Connection  
 We would close  
 Cedar st.  
 in front of the  
 Armory

Area we would like to close for BBA Craft + food booths

