AGENDA ITEM SUMMARY

DATE: 5/24/10  DEPARTMENT: Public Works  DEPT. HEAD SIGNATURE: 

SUBJECT:
Request approval for SVMA Celebrate Summer in South Valley Carnival Special Event on 06/03/10.

AUTHORITY: □ ID Code  □ IAR  □ City Ordinance/Code Chapter 12.14
(IFAPPLICABLE)

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: (IFAPPLICABLE)
___ City Attorney  ___ Clerk / Finance Director  ___ Engineer  ___ Building
___ Library  ___ Planning  ___ Fire Dept.
___ Safety Committee  ___ P & Z Commission  ___ Police  ___ Streets
___ Public Works  ___ Parks  ___ Mayor

RECOMMENDATION FROM APPLICABLE DEPARTMENT HEAD:

Special Event Heads approved with only the following comments:
Signs and Banners displayed for more than 72 hrs. require a permit from the Hailey Planning & Zoning Department.
This special event is within the Business (B) zoning district and Arts & Entertainment is a permitted use.

FOLLOW-UP REMARKS:
DECISION

Based on the Application for a Special Event Permit for the SVMA Summer Carnival, 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.
e. The Applicant shall maintain in full force and effect general liability coverage during the Special Event(s) in the amount of $1,000,000, with the City of Hailey as an additional named insured.

Other Condition

a. Signs and Banners displayed for more than 72 hrs. require a permit from the Hailey Planning & Zoning Department.
b. This special event is within the Business (B) zoning district and Arts & Entertainment is a permitted use.

DATED this 24th day of May, 2010.

CITY OF HAILEY

By: ____________________________________________
    Rick Davis, its Mayor

ATTEST:

______________________________________________
    Mary Cone, its City Clerk
SPECIAL EVENT PERMIT APPLICATION

I. EVENT NAME: Summer Carnival

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

☐ Public Property  ☐ Private Property

1st Ave. between Bullion & Carbonate

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.

<table>
<thead>
<tr>
<th>Date(s) of Event</th>
<th>Hours</th>
<th>Estimated # of Attendees</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.3.10</td>
<td>Start Time: 3 pm</td>
<td>End Time: 7 pm</td>
</tr>
<tr>
<td></td>
<td>Start Time:</td>
<td>End Time:</td>
</tr>
<tr>
<td>Date of Set-Up</td>
<td>1 pm</td>
<td>8 pm</td>
</tr>
<tr>
<td>6.3.10</td>
<td>Start Time:</td>
<td>End Time:</td>
</tr>
<tr>
<td>Date of Tear Down</td>
<td>Start Time:</td>
<td>End Time:</td>
</tr>
<tr>
<td>6.3.10</td>
<td>Start Time:</td>
<td>End Time:</td>
</tr>
</tbody>
</table>

IV. FEES

- Special Event Permit Application Fee: $125
- Per Day Park Rental Fee: $200
- Security Deposit: $500
- Tax (on park rental fees only): 6%

TOTAL DUE: $125.00

V. ORGANIZATION INFORMATION

Applicant's Name: South Valley Merchants
Title: 
Mailing Address: 101 E Bullion 1B Hanley
Zip Code: 83333
Street Address: 
City: 
State: 
Day Telephone: 788-7070 Evening Telephone: 788-5136
FAX Number: 788-7079
E-Mail Address: Kagarvin@aol.com

7/15/2009
VI. EVENT INFORMATION

New Event: Yes ☒ No ☐ Annual Event: Yes ☒ No ☐ Years Operating 2005

Event Category: □ Commercial □ Noncommercial

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

Description of Event:

Kick off the summer for kids with games and entertainment

Additional Details:

Close down 1st street from 1pm June 3rd
to 8pm June 3rd. Attached all business
owner who operate on 1st street
with a signature of approval.

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: ___________________________ Agent Name: ___________________________

Address: ___________________________________ Phone: ___________________________

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.

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<tr>
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<tr>
<td></td>
<td></td>
<td>Street Closures &amp; Access / Parade</td>
<td></td>
<td></td>
<td>Alcohol Served (Free of Charge) (name of provider)</td>
</tr>
<tr>
<td></td>
<td>✔</td>
<td>Detailed map listing areas of closure, parade route is required. An ITD permit is required for Main Street.</td>
<td></td>
<td>✔</td>
<td>Alcohol Sold Requires Alcohol Beverage Catering Permit (Hailey Code 3.13)</td>
</tr>
<tr>
<td>✔</td>
<td></td>
<td>Street Closures &amp; Access / Parade require your Event Coordinator to notify all affected businesses, churches schools and neighborhoods</td>
<td></td>
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<td>Food/Beverages will be served (List Caterers):</td>
</tr>
<tr>
<td>✔</td>
<td>#</td>
<td>Canopies/Tents/Membranes/Temporary Structures (Number &amp; Size(s)) City of Hailey Fire Department, Fire Code Enforcement</td>
<td></td>
<td></td>
<td>Vendors Items sold/solicitation</td>
</tr>
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<td>✔</td>
<td></td>
<td>Medical Services (Circle) First Aid and/or EMS Services Who is providing services?</td>
<td></td>
<td></td>
<td>Booths: Profit / Non-Profit</td>
</tr>
<tr>
<td>✔</td>
<td></td>
<td>Security (detail who, number of officers, times. Attach plan)</td>
<td></td>
<td>#</td>
<td>Lighting plan: attach plan</td>
</tr>
<tr>
<td></td>
<td>✔</td>
<td>Traffic Control / Shuttle Buses (Number of buses / locations / hours of operation, attach plan)</td>
<td></td>
<td>✔</td>
<td>Lighting plan: attach plan</td>
</tr>
<tr>
<td>✔</td>
<td>#</td>
<td>Electricity / Generators (Size Attach detailed electrical plan.)</td>
<td></td>
<td></td>
<td>Activities / Entertainment (Agenda) Other equipment or entertainment</td>
</tr>
<tr>
<td>✔</td>
<td></td>
<td>Water Drinking / Washing (circle)</td>
<td></td>
<td></td>
<td>Signs or Banners: sign permit may be required by the City Planning and Zoning Department</td>
</tr>
<tr>
<td>✔</td>
<td></td>
<td>Gray Water Barrel / Grease Barrel (circle / detail # and locations)</td>
<td></td>
<td></td>
<td>Stages (Number and Size(s))</td>
</tr>
<tr>
<td>✔</td>
<td></td>
<td>Sanitation - Trash bins, Dumpsters, Recycle (circle / detail # and locations)</td>
<td></td>
<td>#</td>
<td>EVENT estimated attendance</td>
</tr>
<tr>
<td>✔</td>
<td>#</td>
<td>Porta Toilets / Wash Stations (Quantity ADA Regular)</td>
<td></td>
<td></td>
<td>Number of staff working event</td>
</tr>
<tr>
<td></td>
<td>✔</td>
<td>#</td>
<td>Number of volunteers working</td>
<td></td>
<td></td>
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</table>

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: [Signature]

Date: 7/15/2009

EVENT estimated attendance: 610

Number of staff working event: 0

Number of volunteers working: 20
On June 3rd 2010 from 1 pm to 8 pm 1st Street from Bullion to Carbonate to Celebrate the Start of Summer in Hailey. Please sign below that you agree to the Closing of 1st Street on June 3rd.

<table>
<thead>
<tr>
<th>Business Name</th>
<th>Name</th>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hennessy Company</td>
<td>David Hennessy</td>
<td>Del.</td>
</tr>
<tr>
<td>SPA Becca</td>
<td>CourierAyden</td>
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</tr>
<tr>
<td>The Nature Conserva</td>
<td>Nanie Lurie</td>
<td>Mike</td>
</tr>
<tr>
<td>Pressage</td>
<td></td>
<td></td>
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<tr>
<td>Euc Center</td>
<td>CParmer</td>
<td></td>
</tr>
<tr>
<td>Arena Mtn</td>
<td>BIG WOOD MARTIN RUT CLARK</td>
<td></td>
</tr>
<tr>
<td>Harrison Conservancy</td>
<td>Kathy Harrison</td>
<td></td>
</tr>
<tr>
<td>Garden Space Design</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Africa</td>
<td>Ariel Cabrera</td>
<td></td>
</tr>
<tr>
<td>Savar</td>
<td>Kristin Minnig</td>
<td></td>
</tr>
<tr>
<td>Campbell Consulting</td>
<td>Sarah Buhl</td>
<td>Sarah Boson</td>
</tr>
<tr>
<td>Cowboy</td>
<td></td>
<td>Chris King</td>
</tr>
<tr>
<td>Zions Bank</td>
<td>Brian Alley</td>
<td>Brian Alley</td>
</tr>
</tbody>
</table>
On June 3\textsuperscript{rd} 2010 from 1 pm to 8 pm 1\textsuperscript{st} Street from Bullion to Carbonate to Celebrate the Start of Summer in Hailey. Please sign below that you agree to the Closing of 1\textsuperscript{st} Street on June 3\textsuperscript{rd}.

<table>
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<tr>
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<th>Name</th>
<th>Signature</th>
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</thead>
<tbody>
<tr>
<td>Kids Kampus</td>
<td>Alma Stokvis</td>
<td>Stokvis</td>
</tr>
<tr>
<td>Bob Fm Canyon</td>
<td>Candy Ivie</td>
<td>Ivie</td>
</tr>
</tbody>
</table>
CERTIFICATE OF INSURANCE

PRODUCER AND THE NAME INSURED
P.O. Box 469
Sandy, UT 84091-0469
800-321-1495

INSURED
Annon Party Express Inc
PO Box 745
Meridian, ID 83680

COVERAGES
The policies of insurance listed below have been issued to the insured named above for the policy 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.

<table>
<thead>
<tr>
<th>TYPE OF INSURANCE</th>
<th>POLICY NUMBER</th>
<th>POLICY EFFECTIVE DATE</th>
<th>POLICY EXPIRATION DATE</th>
<th>LIMITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commercial Liability</td>
<td>LAPS279/09/070021</td>
<td>7/14/2008</td>
<td>7/14/2010</td>
<td>$100,000 Per Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$1,000,000 Per Accident</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$2,000,000 Policy Aggregate</td>
</tr>
</tbody>
</table>

Commercial Auto Liability
- Any Auto
- All Owned Autos
- Scheduled Autos
- Hired Autos
- Non-Owned Autos
- O.T.R.P.D.

Garage Coverage
- G.K.L.L.
- Drive Away
- D.O.C.
- Cargo
- On Hook
- Contractual Liability
- Wrongful Repossession

Excess Liability
- Claims Made

OTHER

DESCRIPTION OF OPERATIONS, LOCATIONS, VEHICLES, EXCLUSIONS, ADDENDUMS, ENDORSEMENTS, SPECIAL PROVISION
Coverage is limited to only insured activities or operations on the Participant Member Declaration Certificate or as may be separately endorsed. Excludes Inland Marine Liability, Amusement - Sumo Suits, Amusement - Carnival Games & DJ/Karaoke, Amusement - Non Supervized - Scheduled Interactive & Inflatable Game Rental, Amusement - Supervised - Scheduled Interactive & Inflatable Game Rental, Climbing Wall - Portable, Amusement - Scheduled Inflatable/Interactive, Amusement Devices - Gyro/Obliterator -

CERTIFICATE HOLDER
City of Hailey Chamber of Commerce
P.O. Box 100
Hailey, ID 83333
Kim

ADDITIONAL INSURED

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 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 OF THE PURCHASING GROUP

- 47 -
The Sawtooth Rangers request approval for the following Special Events: "The Rodeo Park Fund Raisers" (Events will be held at the Rodeo Grounds)

- May 15, 2010 – Antique Tractor Pull (approved administratively by Mary Cone, 05/12/10)
- May 22 & 23, 2010 - Team Roping and Team Sorting Competition (approved administratively by Mary Cone, 05/12/10)
- June 5, 2010 - BBQ Cook-off
- June 12, 2010 - Band Fest

All profits net expenses for these special events will be donated directly to the Hailey Rodeo Park project fund. Due to this fundraising for the City, park use and special event application fees do not apply.

RECOMMENDATION FROM APPLICABLE DEPARTMENT HEAD:

The Special Event Department heads approved with the following comments:

- Signs and Banners displayed for more than 72 hrs. require a permit from the Hailey Planning & Zoning Department.
- This special event is within the Limited Business (LB) zoning district and Arts, Entertainment, and recreation uses is a permitted use.
- Please contact Mariel Platt, 788-9815 ext 24 if lighting will be used for any of these events.
- For safety purposes, the building and fire departments will require a pre-inspection of the section of bleachers that are proposed to be used for the event. Any unstable or broken boards will have to be replaced prior to the event. The applicant must call and set up a meeting for all party's to meet on site to discuss this issue.
- Per fire code, please have all cooking devices set up outside the arena ten feet away from the structure.
- The Emergency Medical Services require you to have an ambulance for all rodeo sport events. The formula to determine how many is as follows:
  - 0 to 999 attendees requires 0 EMT’s
  - 1000 to 1250 requires 2 EMT’s
  - And one EMT for each additional 250 attendees
DECISION

Based on the Application for a Special Event Permit for The Rodeo Park Fund Raisers, 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.
e. The Applicant shall maintain in full force and effect general liability coverage during the Special Event(s) in the amount of $1,000,000, with the City of Hailey as an additional named insured.

Other Conditions

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   - And one EMT for each additional 250 attendees

DATED this 24th day of May, 2010.

CITY OF HAILEY

By:__________________________
   Rick Davis, its Mayor

ATTEST:

__________________________
   Mary Cone, its City Clerk
SPECIAL EVENT PERMIT APPLICATION

I. EVENT NAME: (4) Tractor Pull / Open Expo / Team Racing - Sorting Competition / BBQ Cook-off with Cowboy Poetry / Band Fest

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

☐ Public Property  ☐ Private Property

Rodeo Grounds

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.

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<td>End Time:</td>
</tr>
<tr>
<td></td>
<td>One Hour Interval:</td>
<td>All Day:</td>
</tr>
<tr>
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<td>End Time:</td>
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IV. FEES Please waive all
Special Event Permit Application Fee $125 ☐ $125
Per Day Park Rental Fee $200 ☐ $200
Security Deposit $500 ☐ $500
Tax (on park rental fees only) 6% ☐ 6%

TOTAL DUE
Additional Deposit Required ☐

V. ORGANIZATION INFORMATION

Applicant's Name: Sawtooth Rangers #6714 Title:
Mailing Address: 60 Lama Hazelton P.O. Box 3794 Hailey Zip Code: 83333
Street Address: City: State:
Day Telephone: 208-770-6674 Evening Telephone: 208-778-1612
FAX Number: 208-778-1643 E-Mail Address: lorna@pea-k-sales.com

7/15/2009
VI. EVENT INFORMATION

New Event: Yes [x] No [ ] Annual Event: Yes [ ] No [x] Years Operating [ ]

Event Category: □ Commercial □ Noncommercial

Estimate of Gross Ticket Sales & Revenues (commercial event only): [ ]

Description of Event: [ ]

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: [ ]

Agent Name: [ ]

Address: [ ] Phone: [ ]

HOLD HARMLESS CLAUSE

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(Attach any additional pages as needed)
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Event Organizer's Signature: ____________________________ Date: 3/15/10

7/15/2009
Event #1  Antique Tractor Pull  May-15th  1:00 pm to 6:00 pm

Open to public spectators
No charge admission

Food Concession
Beer and Wine will be sold

Volunteers from the Sawtooth Ranger will be on site during the event
Sawtooth Rangers will provide portable toilets, trash removal and clean up.

Will use Concessions at
rodeo grounds
## 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.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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Event Organizer’s Signature: [Signature] Date: 7/15/2009

7/15/2009
Event # 2  Sawtooth Showdown  
Team Roping Event  May 22  10:00 am to dusk  
Team Sorting Event  May 23  10:00 am to dusk  

Open to public spectators  
No charge admission  

Livestock will be provided by Matt Asiveto  

Food Concession  
Beer and Wine will be sold  

Volunteers from the Sawtooth Ranger will be on site during the event  
Sawtooth Rangers will provide portable toilets, trash removal and clean up.  
Insurance provided by the Sawtooth Rangers
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.

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Event Organizer’s Signature: [Signature]  Date: 3/15/10

7/15/2009

-57-
Event #3  BBQ Cook Off and Cowboy Entertainment  

June 5th

Open to public spectators
Admission:  $5.00 entrance adult  $7.00 child
$5.00 to taste

Entry fee for cook off is $25. per category  $75. max
Arena to be open by 8 am for setup  close by 6 pm

All recipes to be prepared on site and will be judged by local chefs from the WR Valley
and tasters will vote as well. Prizes, trophies and ribbons will be awarded

Cowboy Entertainment:  Ernie Sites, Stan Tixier, Robin Arnold, Brian Dillworth, Gordon
Peterson, Sam De Leeuw, and possibly others. Music provided by Saddle Strings.
Possible dance floor with instruction on western dance.

Vendor Booths to be set up on the exterior of the Arena (see arena chart)

Raffle will be held through out the day

Food Concession
Beer and Wine will be sold

Volunteers from the Sawtooth Ranger will be on site during the event
Sawtooth Rangers will provide portable toilets, trash removal and clean up.
# SPECIAL EVENT ACTIVITIES & CITY SERVICES REQUESTED

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<td>Gray Water Barrel / Grease Barrel (circle /detail # and locations)</td>
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<td>Stages (Number and Size(s) 1 or 2)</td>
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<td>Barricades. How many identify locations and attach logistics map</td>
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Event Organizer's Signature: [Signature] for the Smiths
Date: 3/15/10

7/15/2009

- 60 -
Event #4  Band Fest With Muzzie Braun  June 12th

Open to public spectators
Admission: $10.00 adult  $ 5.00 child under 10

Music to start @ 11 am and will continue until 9:30 pm

Current Band List:

Muzzie Braun, Ernie Sites, Live Nudes, Kim Stocking Band, Hood Wink, Bruce Inness, Up a Creek, Piers Lamb, Andrew Allburgher, Damphools more to come.

Sound to be handled by Craig Campbell. Flatbed Trailers will be used for the stages.

Food Concession
Beer and Wine will be sold

Volunteers from the Sawtooth Ranger will be on site during the event
Sawtooth Rangers will provide portable toilets, trash removal and clean up.


**ACORD CERTIFICATE OF LIABILITY INSURANCE**

**PRODUCER:**
Lester Kalmanson Agency, Inc.
235 South Maitland Avenue
Maitland, FL 32794-0008
Phone (407) 645-6000

**INSURED:**
National Horsemen's Association and/or its member club,
Sawtooth Rangers Riding Club
P.O. Box 74
Bellevue, ID 83313

**INSURER:** Underwriters at Lloyds, London CLCMO9242

**COVERAGE:**

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. Association shared aggregate limits shown may have been or could be reduced by prior claims.

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<th>NER</th>
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**AUTOMOBILE LIABILITY:**

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**GARAGE LIABILITY:**

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**EXCESS LIABILITY:**

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**WORKERS COMPENSATION AND EMPLOYERS LIABILITY:**

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"Spectator Liability Coverage for Horse Club Activities of Sawtooth Rangers Riding Club"

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENTS/FOR AL PROVISIONS**

Team Roping Competition
Hailey, Idaho
May 22 & 23, 2010

**CANCELLATION**

Event #: 2
Team Roping Competition

**ACORD 28-S (7/97)**
Trina Isaacs

From: Lorna Hazelton [lorna@peak-sales.com]
Sent: Thursday, March 18, 2010 7:12 AM
To: Trina Isaacs
Morning Trina

For our special permit application

All funds (net of expenses) raised by the Sawtooth Rangers at the 4 special events listed below will be donated to the Hailey Rodeo Park.

1: May 8\textsuperscript{th} and 9\textsuperscript{th} - Open Expo

2: May 22\textsuperscript{nd} and 23\textsuperscript{rd} - Team Roping and Team Sorting Competition

3: June 5\textsuperscript{th} - BBQ Cookoff

4: June 12\textsuperscript{th} - Band Fest

Thanks

Lorna Hazelton
For the Sawtooth Rangers Riding Club
AGENDA ITEM SUMMARY

DATE: 5/24/10   DEPARTMENT: PW   DEPT. HEAD SIGNATURE: 

SUBJECT: Motion to declare two trailers on 731 River St N as surplus property and authorize the mayor to sign the General Release form for removal of the trailers.

AUTHORITY:  □ ID Code ________  □ IAR ________  □ City Ordinance/Code ________
(IFAPPLICABLE)

BACKGROUND/SUMMARY OF ALTERNATIVES CONSIDERED:

This city property requires a cleaning of material that city personnel do not have the time to accomplish in the immediate future. Removal of this trailer will be of benefit to the city in making this property clean for the proposed housing project with BCHA. This item was pulled from the May 10 council meeting to clarify that there were two trailers and two separate individuals desired them.

FISCAL IMPACT / PROJECT FINANCIAL ANALYSIS: Caselle #________
Budget Line Item #________ YTD Line Item Balance $________
Estimated Hours Spent to Date: ________ Estimated Completion Date:_______
Staff Contact: __________ Phone #: 788-9830 Ext. 14
Comments:

ACKNOWLEDGEMENT BY OTHER AFFECTED CITY DEPARTMENTS: (IFAPPLICABLE)

________ City Attorney __________ Clerk / Finance Director __________ Engineer __________ Building
________ Library __________ Planning __________ Fire Dept. __________
________ Safety Committee __________ P & Z Commission __________ Police __________
________ Streets __________ Public Works, Parks __________ Mayor __________

RECOMMENDATION FROM APPLICABLE DEPARTMENT HEAD:

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)

Draft 12-30-03

- 65 -
GENERAL RELEASE

1. This is a General Release ("Release") given this ____ day of May, 2010, by and between Robert Andreason ("Releasor") and the City of Hailey ("Hailey").

2. Hailey owns real property located at 731 River Street, Hailey, Idaho ("River Street Property"), and a trailer is located on the River Street Property. Hailey does not believe the trailer has any value to the city and in exchange for the removal of the trailer, Hailey is willing to transfer the trailer to Releasor, subject to the terms and conditions of this Release.

3. This Release, as to the subjects to which it applies, constitutes a general release as to such subjects and the parties.

4. This Release shall inure to the benefit of and be binding upon the parties hereto and their successors, assigns and agents.

5. In exchange of the trailer and other good and valuable consideration, Releasor agrees to indemnify and hold Hailey harmless, and release and forever discharge Hailey, its legal representatives, agents, assigns and insurers, none of whom admit any liability, from any and all claims, demands, damages, attorney fees, costs, actions, causes of action or lawsuits of any kind or nature whatsoever, known or unknown, which each has had or may have, or may in the future discover, relating to each and every aspect of the condition of the trailer (e.g., lack of structural integrity, lack of title or asbestos) and the removal of the trailer, or any matters connected thereto, no matter how remotely.

6. Releasor shall remove the trailer and all trailer parts on or before the 7th day of June, 2010, without any damage to the River Street Property or to the adjacent right-of-way improvements, such the curb, gutter and sidewalk.

GENERAL RELEASE/1
7. This Release by the parties shall not constitute any admission on their part as to any liability or responsibility, or any admission concerning the same, as to any of the subjects of this Release.

8. The parties hereby declare that the terms of this Release have been completely read and are fully understood and voluntarily accepted and that they had independent legal advice in this matter or elected to proceed herewith without the same, and that they enter into this Release without any coercion, threats or duress.

9. This document may be signed in multiple originals, and all such signed documents shall constitute one and the same document. Facsimile signatures shall be as valid as original signatures. This document shall be interpreted under the laws of the State of Idaho.

"Releasor"

______________________________
Robert Andreason

"HAILEY"

By  
______________________________
Richard L. Davis, Mayor

Attest:

______________________________
Mary Cone, Clerk
GENERAL RELEASE

1. This is a General Release ("Release") given this ____ day of May, 2010, by and between Robert Colvin ("Releasor") and the City of Hailey ("Hailey").

2. Hailey owns real property located at 731 River Street, Hailey, Idaho ("River Street Property"), and a trailer is located on the River Street Property. Hailey does not believe the trailer has any value to the city and in exchange for the removal of the trailer, Hailey is willing to transfer the trailer to Releasor, subject to the terms and conditions of this Release.

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5. In exchange of the trailer and other good and valuable consideration, Releasor agrees to indemnify and hold Hailey harmless, and release and forever discharge Hailey, its legal representatives, agents, assigns and insurers, none of whom admit any liability, from any and all claims, demands, damages, attorney fees, costs, actions, causes of action or lawsuits of any kind or nature whatsoever, known or unknown, which each has had or may have, or may in the future discover, relating to each and every aspect of the condition of the trailer (e.g., lack of structural integrity, lack of title or asbestos) and the removal of the trailer, or any matters connected thereto, no matter how remotely.

6. Releasor shall remove the trailer and all trailer parts on or before the 7th day of June, 2010, without any damage to the River Street Property or to the adjacent right-of-way improvements, such as the curb, gutter, and sidewalk.
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9. This document may be signed in multiple originals, and all such signed documents shall constitute one and the same document. Facsimile signatures shall be as valid as original signatures. This document shall be interpreted under the laws of the State of Idaho.

"Releasor"

______________________________
Robert Colvin

"HAILEY"

By ________________________________
Richard L. Davis, Mayor

Attest:

______________________________
Mary Cone, Clerk

GENERAL RELEASE/2
AGENDA ITEM SUMMARY

DATE: 5/24/10  DEPARTMENT: PW  DEPT. HEAD SIGNATURE: 

SUBJECT: Motion to authorize the Mayor to sign the FEMA Community Acknowledgement Form for the Sweetwater Development to apply for a Fill Permit from FEMA for work in the floodplain along Shenandoah Dr and Countryside Dr.

AUTHORITY: ☐ ID Code __________  ☐ IAR __________  ☐ City Ordinance/Code __________
(IFAPPLICABLE)

BACKGROUND/SUMMARY OF ALTERNATIVES CONSIDERED:

Hailey City Ordinance allows fill within a floodplain up to the designated Base Flood Elevation (BFE) with the requirements that it not raise the BFE and there is no loss of floodwater storage. Brockway Engineering is performing the engineering work to meet these criteria and obtain the FEMA approval.

FISCAL IMPACT / PROJECT FINANCIAL ANALYSIS: Caselle #

<table>
<thead>
<tr>
<th>Budget Line Item #</th>
<th>YTD Line Item Balance $</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Estimated Hours Spent to Date:</th>
<th>Estimated Completion Date:</th>
</tr>
</thead>
</table>

Staff Contact: Tom Hellen  Phone #: 788-9830 Ext 14

Comments:

ACKNOWLEDGEMENT BY OTHER AFFECTED CITY DEPARTMENTS: (IF APPLICABLE)

☐ City Attorney  ☐ Clerk / Finance Director  ☐ Engineer  ☐ Building
☐ Library  ☐ Planning  ☐ Fire Dept.  ☐
☐ Safety Committee  ☐ P & Z Commission  ☐ Police  ☐
☐ Streets  ☐ Public Works, Parks  ☐ Mayor  ☐

RECOMMENDATION FROM APPLICABLE DEPARTMENT HEAD:

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  *Additional/Exceptional Originals to:
Copies (all info.):
Instrument #

Copies (AIS only)

Draft 12-30-03
PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average 1.38 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing, reviewing, and submitting the form. You are not required to respond to this collection of information unless a valid OMB control number appears in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing this burden to: Information Collections Management, U.S. Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington DC 20472, Paperwork Reduction Project (1660-0015). Submission of the form is required to obtain or retain benefits under the National Flood Insurance Program. Please do not send your completed survey to the above address.

This form must be completed for requests involving the existing or proposed placement of fill (complete Section A) OR to provide acknowledgment of this request to remove a property from the SFHA which was previously located within the regulatory floodway (complete Section B).

This form must be completed and signed by the official responsible for floodplain management in the community. The six digit NFIP community number and the subject property address must appear in the spaces provided below. Incomplete submissions may result in processing delays.

Community Number: 160022 Property Name or Address: Shenandoah and Countryside, Hailey, ID 83333

A. REQUESTS INVOLVING THE PLACEMENT OF FILL

As the community official responsible for floodplain management, I hereby acknowledge that we have received and reviewed this Letter of Map Revision Based on Fill (LOMR-F) or Conditional LOMR-F request. Based upon the community’s review, we find the completed or proposed project meets or is designed to meet all of the community floodplain management requirements, including the requirement that no fill be placed in the regulatory floodway, and that all necessary Federal, State, and local permits have been, or in the case of a Conditional LOMR-F, will be obtained. In addition, we have determined that the land and any existing or proposed structures to be removed from the SFHA are or will be reasonably safe from flooding as defined in 44CFR 65.2(c), and that we have available upon request by DSH-FEMA, all analyses and documentation used to make this determination. For LOMR-F requests, we understand that this request is being forwarded to DSH-FEMA for a possible map revision. For LOMR-F or Conditional LOMR-F requests that have the potential to impact an endangered species, documentation will be submitted to show that we have complied with Sections 9 and 10 of the Endangered Species Act (ESA). Section 9 of the ESA prohibits anyone from “taking” or harming an endangered species. If an action might harm an endangered species, a permit is required from U.S. Fish and Wildlife Service or National Marine Fisheries Service under Section 10 of the ESA. For actions authorized, funded, or being carried out by Federal or State agencies, documentation from the agency showing its compliance with Section 7(a)(2) of the ESA will be submitted.

Community Comments: NONE

Community Official’s Name and Title: (Please Print or Type) RICK DAVIS, MAYOR Telephone No.: (208) 788-4221

Community Name: City of Hailey, Idaho

Community Official’s Signature: (required) Date:

B. PROPERTY LOCATED WITHIN THE REGULATORY FLOODWAY

As the community official responsible for floodplain management, I hereby acknowledge that we have received and reviewed this request for a LOMA. We understand that this request is being forwarded to DSH-FEMA to determine if this property has been inadvertently included in the regulatory floodway. We acknowledge that no fill on this property has been or will be placed within the designated regulatory floodway. We find that the completed or proposed project meets or is designed to meet all of the community floodplain management requirements.

Community Comments: Project is not located within a regulatory floodway

Community Official’s Name and Title: (Please Print or Type) RICK DAVIS, MAYOR Telephone No.: (208) 788-4221

Community Name: City of Hailey, Idaho

Community Official’s Signature (required): Date:
This form may be completed by the property owner, property owner's agent, licensed land surveyor, or registered professional engineer to support a request for a Letter of Map Amendment (LOMA), Conditional Letter of Map Amendment (CLOMA), Letter of Map Revision Based on Fill (LOMR-F), or Conditional Letter of Map Revision Based on Fill (CLOMR-F) for existing or proposed, single or multiple lots/structures. In order to process your request, all information on this form must be completed in its entirety. Incomplete submissions may result in processing delays. Please check the item below that describes your request:

☐ LOMA  A letter from DHS-FEMA stating that an existing structure or parcel of land that has not been elevated by fill (natural grade) would not be inundated by the base flood.

☐ CLOMA  A letter from DHS-FEMA stating that a proposed structure that is not to be elevated by fill (natural grade) would not be inundated by the base flood if built as proposed.

☐ LOMR-F  A letter from DHS-FEMA stating that an existing structure or parcel of land that has been elevated by fill would not be inundated by the base flood.

☒ CLOMR-F  A letter from DHS-FEMA stating that a parcel of land or proposed structure that will be elevated by fill would not be inundated by the base flood if fill is placed on the parcel as proposed or the structure is built as proposed.

Fill is defined as material from any source (including the subject property) placed that raises the ground to or above the Base Flood Elevation (BFE). The common construction practice of removing unsuitable existing material (topsoil) and backfilling with select structural material is not considered the placement of fill if the practice does not alter the existing (natural grade) elevation, which is at or above the BFE. Fill that is placed before the date of the first National Flood Insurance Program (NFIP) map showing the area in a Special Flood Hazard Area (SFHA) is considered natural grade.

Has fill been placed on your property to raise ground that was previously below the BFE?  ☐ Yes  ☒ No  If yes, when was fill placed?  10/2010

Will fill be placed on your property to raise ground that is below the BFE?  ☒ Yes  ☐ No  If yes, when will fill be placed?  10/2010

1. Street Address of the Property (if request is for multiple structures, please attach additional sheet):

Shenandoah and Countryside

2. Legal description of Property (Lot, Block, Subdivision)(complete description as it appears in the Deed is not necessary):

Woodside Sub #5: Lot 1, Lot 2, Parcel B1, and Parcel B2 of Block 16; Parcel F1 of Block 17; Lot 3 and Lot 4 of Block 19

Woodside Sub #6: Lot 1 of Block 22

3. Are you requesting that the SFHA designation be removed from (check one):

☒ the entire legally recorded property?

☐ a portion of land within the bounds of the property? (A certified metes and bounds description and map of the area to be removed, certified by a licensed land surveyor or registered professional engineer, are required. For the preferred format of metes and bounds descriptions, please refer to the MT-1 Form 1 instructions.)

☐ structures on the property? What are the dates of construction?

4. Is this request for a (check one):

☐ single structure

☐ single lot

☒ multiple structures (How many structures are involved in your request? List the number: 6)

☐ multiple lots (How many lots are involved in your request? List the number: 6)
In addition to this form (MT-1 Form 1), ALL requests must include the following:

- Copy of the effective FIRM panel and/or Flood Boundary and Floodway Map (FBFM) (if applicable) on which the property location has been accurately plotted (property inadvertently located in the NFIP regulatory floodway will require Section B of MT-1 Form 3)
- Copy of the Plat Map for the property (with recordation data and stamp of the Recorder’s Office)
- Copy of the property Deed (with recordation data and stamp of the Recorder’s Office), accompanied by a tax assessor’s map or other certified map showing the surveyed location of the property relative to local streets and watercourses
- Form 2 – Elevation Form. If the request is to remove the structure, and an Elevation Certificate has already been completed for this property, it may be submitted in lieu of Form 2. If the request is to remove the entire legally recorded property, or a portion thereof, the lowest lot elevation must be provided on Form 2.

Please include a map scale and North arrow on all maps submitted.

For LOMR-Fs and CLOMR-Fs, the following must be submitted in addition to the items listed above:

- Form 3 – Community Acknowledgment Form

Processing Fee (see instructions for appropriate mailing address; or, visit http://www.fema.gov/plan/prevent/frm_fees.shtml for the most current fee schedule)

Revised fee schedules are published periodically, but no more than once annually, as noted in the Federal Register. Please note: single/multiple lot(s)/structure(s) LOMAs are fee exempt. The current review and processing fees are listed below:

Check the fee that applies to your request:

- $325 (single lot/structure LOMR-F following a CLOMR-F)
- $425 (single lot/structure LOMR-F)
- $500 (single lot/structure CLOMA or CLOMR-F)
- $700 (multiple lot/structure LOMR-F following a CLOMR-F, or multiple lot/structure CLOMA)
- $800 (multiple lot/structure LOMR-F or CLOMR-F)

Please submit the Payment Information Form for remittance of applicable fees. Please make your check or money order payable to: National Flood Insurance Program.

All documents submitted in support of this request are correct to the best of my knowledge. I understand that any false statement may be punishable by fine or imprisonment under Title 18 of the United States Code, Section 1001.

Applicant’s Name: Sweetwater Company LLC

Company:

Mailing Address: c/o James Laski

Daytime Telephone No.: (208) 725-0055

P.O. Box 3310, Ketchum, ID 83340

Fax No.:

E-Mail Address: 

(optional)

Date

Signature of Applicant (required)

If you have any questions concerning DHS-FEMA policy, or the NFIP in general, please contact the FEMA Map Assistance Center toll free at 1-877-FEMA MAP (1-877-336-2627), or visit the Flood Hazard Mapping website at http://www.fema.gov/fhml.
Public reporting burden for this form is estimated to average 1.25 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing, reviewing, and submitting the form. You are not required to respond to this collection of information unless a valid OMB control number appears in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing this burden to: Information Collections Management, U.S. Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington DC 20472, Paperwork Reduction Project (1660-0015). Submission of the form is required to obtain or retain benefits under the National Flood Insurance Program. Please do not send your completed survey to the above address.

This form must be completed for requests and must be completed and signed by a registered professional engineer or licensed land surveyor. A DHS - FEMA National Flood Insurance Program (NFIP) Elevation Certificate may be submitted in lieu of this form for single structure requests.

For requests to remove a structure on natural grade OR on engineered fill from the Special Flood Hazard Area (SFHA), submit the lowest adjacent grade (the lowest ground touching the structure), including an attached deck or garage. For requests to remove an entire parcel of land from the SFHA, provide the lowest lot elevation; or, if the request involves an area described by metes and bounds, provide the lowest elevation within the metes and bounds description. In order to process your request, all information on this form must be completed in its entirety. Incomplete submissions may result in processing delays.

1. NFIP Community Number: 160022
   Property Name or Address: Shenandoah and Countryside, Hailey, ID 83333

2. Are the elevations listed below based on existing or proposed conditions? (Check one)

3. What is the elevation datum? ☒ NGVD 29 ☐ NAVD 88 ☐ Other (explain) If any of the elevations listed below were computed using a datum different than the datum used for the effective Flood Insurance Rate Map (FIRM) (e.g., NGVD 29 or NAVD 88), what was the conversion factor?

Local Elevation +/- ft. = FIRM Datum

4. Please provide the Latitude and Longitude of the most upstream edge of the structure (in decimal degrees):
   Indicate Datum: □ NAD83 □ NAD27
   Please provide the Latitude and Longitude of the most upstream edge of the property (in decimal degrees):
   Indicate Datum: ☒ NAD83 □ NAD27 43.5024 Lat. -114.2894 Long.

5. For the existing or proposed structures listed below, what are the types of construction? (check all that apply)
   □ crawl space □ slab on grade □ basement/enclosure □ other (explain) N/A - structures not involved in request

6. Has DHS - FEMA identified this area as subject to land subsidence or uplift? (see instructions) ☐ Yes ☒ No
   If yes, what is the date of the current elevating? / (month/year)

<table>
<thead>
<tr>
<th>Lot Number</th>
<th>Block Number</th>
<th>Lowest Lot Elevation*</th>
<th>Lowest Adjacent Grade To Structure</th>
<th>Base Flood Elevation</th>
<th>BFE Source</th>
<th>For DHS - FEMA Use Only</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lot 1</td>
<td>16, Sub #5</td>
<td>n/a</td>
<td>74.5-82.0</td>
<td>FIRM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lot 2</td>
<td>16, Sub #5</td>
<td>n/a</td>
<td>73-74.5</td>
<td>FIRM</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

This certification is to be signed and sealed by a licensed land surveyor, registered professional engineer, or architect authorized by law to certify elevation information. All documents submitted in support of this request are correct to the best of my knowledge. I understand that any false statement may be punishable by fine or imprisonment under Title 18 of the United States Code, Section 1001.

Certifier's Name: Charles G. Brockway
License No.: 9195
Expiration Date: 1/31/2011

Company Name: Brockway Engineering, PLLC
Telephone No.: (208) 736-8543
Fax No.: (208) 736-8506

Signature: Date:

*For requests involving a portion of property, include the lowest ground elevation within the metes and bounds description.

Please note: If the Lowest Adjacent Grade to Structure is the only elevation provided, a determination will be issued for the structure only.

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DHS - FEMA Form 81-87A, DEC 07  Elevation Form  MT-1 Form 2 Page 1 of 2
<table>
<thead>
<tr>
<th>Lot Number</th>
<th>Block Number</th>
<th>Lowest Lot Elevation</th>
<th>Lowest Adjacent Grade To Structure</th>
<th>Base Flood Elevation</th>
<th>BFE Source</th>
<th>For DHS - FEMA Use Only</th>
</tr>
</thead>
<tbody>
<tr>
<td>B (east)</td>
<td>16, Sub #5</td>
<td>n/a</td>
<td>74.5 -75.0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lot 3</td>
<td>19, Sub #5</td>
<td>n/a</td>
<td>71.5-72.5</td>
<td>FIRM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lot 4</td>
<td>19, Sub #5</td>
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<td>70.5-71.5</td>
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<td></td>
</tr>
<tr>
<td>Lot 1</td>
<td>22, Sub #6</td>
<td>n/a</td>
<td>70.0-70.5</td>
<td>FIRM</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

This certification is to be signed and sealed by a licensed land surveyor, registered professional engineer, or architect authorized by law to certify elevation information. All documents submitted in support of this request are correct to the best of my knowledge. I understand that any false statement may be punishable by fine or imprisonment under Title 18 of the United States Code, Section 1001.

Certifier's Name: Charles G. Brockway, Ph.D., P.E.  
License No.: 9195  
Expiration Date: 1/31/2011  
Company Name: Brockway Engineering, PLLC  
Telephone No.: (208) 736-8543  
Fax No.: (208) 736-8506  
Signature:  
Date:  
Seal (optional)