

AGENDA ITEM SUMMARY

DATE: 11/24/08 DEPARTMENT: PW/Parks DEPT. HEAD SIGNATURE: 

**SUBJECT:** Motion to authorize the Mayor to sign the Tree City USA Application

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

**BACKGROUND/SUMMARY OF ALTERNATIVES CONSIDERED:**

With the proclamation for Arbor Day 2008 we have met the criteria to be a Tree City USA. This is to authorize the mayor to sign the application (attached).

**FISCAL IMPACT / PROJECT FINANCIAL ANALYSIS:** Caselle # \_\_\_\_\_  
Budget Line Item # \_\_\_\_\_ YTD Line Item Balance \$ \_\_\_\_\_  
Estimated Hours Spent to Date: \_\_\_\_\_ Estimated Completion Date: \_\_\_\_\_  
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  
Copies (all info.): \_\_\_\_\_  
Instrument # \_\_\_\_\_

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



**TREE CITY USA CERTIFICATION**

**INSTRUCTIONS**

**DEADLINE FOR SUBMISSION**

*December 1, 2008*

**SUBMIT APPLICATION & ATTACHMENTS TO:**

**Community Forestry Assistant for your area**

North Idaho		South Idaho
Panhandle Area	Clearwater Area	
<b>Jim Colla</b> Northwest Management Inc. W. 21 Commerce Dr., Ste. G Hayden, Idaho 83835 colla@consulting-foresters.com	<b>Tera King</b> Northwest Management Inc. PO Box 9748 Moscow, Idaho 9748 king@consulting-foresters.com	<b>Gerry Bates</b> 2445 John Adams Parkway Idaho Falls, ID 83401 gabates@cableone.net

Dear Applicant City:

In an effort to simplify the **TREE CITY USA Application** process, we have enclosed step-by-step instructions and worksheets to help you develop the information required. Our hope is that using them will make it easier for you to complete the application for **TREE CITY USA**. Please note, that you must still fill out and sign the official **Tree City USA Application** (which is enclosed).

One of the great strengths of the **TREE CITY USA** program is that it encourages and recognizes long-term commitment to community forestry. After becoming a Tree City, annual recertification provides an opportunity for each **TREE CITY USA** to review its program and to tell the National Arbor Day Foundation and us just how well your city is doing.

Your **Tree City Application** is enclosed. Please send the completed application to the Community Forestry Assistant in your area as early as possible, but not later than December 1, 2008. This will allow us sufficient time to review applications and forward them to the State Forester for his signature by the end of December.

When preparing your application, remember to include information for each of the four standards, as listed on the Tree City Application. I have enclosed a checklist for your use to assure your application contains the necessary attachments.

If you have any questions, please do not hesitate to contact me at 1-800-IDAHO-4-U or [communitytrees@idl.state.id.us](mailto:communitytrees@idl.state.id.us) or the Community Forestry Assistant in your area (as listed above). Thank you for cooperating with the requested December 1st deadline.

Sincerely,

Dave Stephenson  
Community Forestry Coordinator

- Enclosures:**
- Tree City USA Application
  - Tree City USA Application Checklist
  - Standards Worksheets, Guidelines and Samples

# TREE CITY USA Application

Mail completed application with requested attachments to your state forester no later than December 31.  
The TREE CITY USA award is made in recognition of work completed by the city during the calendar year.  
Please provide information for the year ending \_\_\_\_\_.

(Some states require information in addition to that requested on this application. Check with your state forester.)

As Mayor of the city Hailey  
(Title -Mayor or other city official)

I herewith make application for this community to be officially recognized and designated as a Tree City USA for 2008, having achieved the standards set forth by The National Arbor Day Foundation as noted below. (year)

**Standard 1: A Tree Board or Department**

List date of establishment of board, board members, and meeting dates for the past year; or name of city department and manager.

Hailey Tree Committee established October 13, 2008  
Meeting dates for 2008: 10/16, 11/6, 11/20, 12/4

**Standard 2: A Community Tree Ordinance**

Date ordinance established August 11, 2008 (attached)  
Attach ordinance.

**Standard 3: A Community Forestry Program with an Annual Budget of at Least \$2 Per Capita**

Total community forestry expenditures ..... \$ 17,360  
Community population ..... 6200

Attach annual work plan outlining the work carried out during the past year. Attach breakdown of community forestry expenditures.

**Standard 4: An Arbor Day Observance and Proclamation**

Date observance was held November 12, 2008  
Attach program of activities and/or news coverage. Attach Arbor Day proclamation.

Signature	Title	Date

Please type or print the following:

**Mayor or equivalent**

Name: Rick Davis  
Title: Mayor  
Address: 115 S Main St. Ste. H  
City, State, Zip: Hailey ID 83333  
Phone#: 788-4221

**City Forestry Contact**

Name: Tom Hellen  
Title: Public Works Director  
Address: 115 S Main St. Ste. H  
City, State, Zip: Hailey ID 83333  
Phone#: 727-7092

NOTE: Application will not be processed without Attachments.

## Certification

(To Be Completed By The State Forester)

\_\_\_\_\_  
(Community)

The above named community has made formal application to this office. I am pleased to advise you that we reviewed the application and have concluded that, based on the information contained herein, said community is eligible to be recognized and designated as a Tree City USA, for the \_\_\_\_\_ calendar year, having in my opinion met the four standards of achievement in urban forestry.

Signed \_\_\_\_\_  
State Forester Date

**Person in State Forester's Office who should receive recognition material:**

Name: \_\_\_\_\_ UPS Address: \_\_\_\_\_  
Title: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_  
Agency: \_\_\_\_\_ Phone#: \_\_\_\_\_



**FOR APPLICATION OR RECERTIFICATION**

**STANDARDS #1 & 2 WORKSHEET**

**STANDARD #1~ TREE BOARD OR DEPARTMENT**

A Tree Board (Committee or Commission) is the group of citizens charged by ordinance to develop and administer a tree management program, for trees on public property, in their community. Instead of having such a Board, some communities have a department, such as a City Forestry Department that fulfills this role.

**For Standard #1 please indicate (here or on application):**

**If Tree Board is responsible for program:**

**Date Tree Board was established (if first-time applicant):**

**October 13, 2008**

**Names of 2008 Tree Board Members:**

Denise Ford

Jim Rineholt

Sallie Hanson

Bill Josey

Jen Smith

**Dates the Board has met in 2008:**

10/16; 11/6; 11/20; 12/4

**If Department is responsible for program:**

**Date Department was established (if first-time applicant):**

N/A

**Name of Department:**

**Name & Title of person holding position in 2008:**

**STANDARD #2 ~ A COMMUNITY TREE ORDINANCE**

Communities are required to have passed a **Tree Ordinance** and to submit a copy of that ordinance with the TCUSA application. First-time applicants should also indicate the date the ordinance was established. Those applying for recertification **DO NOT** need to attach an ordinance unless it has changed.

**For Standard #2 please check appropriate boxes on application and attach copy of ordinance, if required**



**FOR APPLICATION OR RECERTIFICATION**

**STANDARD #3 WORKSHEET**

**STANDARD #3~ A Community Forestry Program with an Annual Budget of at Least \$2 Per Capita**

This standard requires the community show they have a community forestry program that expends at least \$2 per capita. To do so, communities must attach their program's 2008 work plan, accomplishment report, and detailed budget that documents fulfillment of the budget requirements.

A list of qualifying expenditures and a list of value standards for volunteers can be found on page 8.

**For Standard #3 please indicate (on application):**

- 1. Total Community Forestry Expenditures \$17,360
- 2. Community Population 6200

**Tree City USA Standard #3 Financial Worksheet**

Community: Hailey Year: 2008

**To calculate your community tree program expenditures, complete the financial worksheet below. All cash and in-kind expenditures for public tree care may be included.**

**1. Tree Planting and Initial Care**

Include cost of tree purchases, labor (salaries, benefits & volunteer time), equipment for planting, planting materials, stakes, wrapping, watering, mulching, and competition control, etc.

\$2,000

**2. Community Forest Management**

Include pruning, public education, professional training, memberships, salaries/benefits, volunteer time, street and park tree inventory, pest management, fertilization, watering, etc.

\$7,100

**3. Tree Removals**

Include cost of saws and equipment, supplies, and labor (salaries/benefits and volunteer time.

\$2,000

**4. Volunteer Time**

Value of volunteer labor and other contributions from civic organizations that has not already been included in above categories. (See page 8 for volunteer labor rates.)

\$1,260

**5. Administrative Expenses**

Include salaries/benefits, volunteer time and all other costs of activities (not documented elsewhere) such as contract management, grant administration, supervision and other forestry program management activities.

\$4,000

**Tree City USA Standard 3 Financial Worksheet (Cont'd)**

**6. Utility Expenses**

- a) Line clearance per se is not tree maintenance. Utility trimming expenses are allowed only if the utility is a partner in the city's tree program and has implemented a tree planting program and complies with ANSI A300 pruning standards.

6a. Enter amount here: \$ \_\_\_\_\_

- b) The maximum allowed for utility expenses is \$1 per capita.

**Enter the smaller amount—either 6a or the population of your city.**

\$0 \_\_\_\_\_

**7. Undefined Costs**

- a) Costs not already mentioned, such as storm cleanup, brush pick-up from non-public properties, chipping of brush from non-public properties, etc.

**Briefly describe:**

7a) Enter amount here: \$1,000 \_\_\_\_\_

- b) The maximum allowed for these other activities is \$.50 per capita.

**Enter the smaller number—7a or the city population times .5.**

\$1,000 \_\_\_\_\_

**8. Other**

Include any expenses not already mentioned.

**Briefly describe:**

\$ \_\_\_\_\_

**TOTAL COMMUNITY FORESTRY EXPENDITURES**

*(Add budget figures in above right column together)*

\$17,360 \_\_\_\_\_

**COMMUNITY POPULATION**

6200 \_\_\_\_\_

**(To qualify for Tree City USA, total expenditures must be at least twice population. Transfer these two numbers to Standard #3 on application and include this sheet with application.)**

**Signed** \_\_\_\_\_ **Date** \_\_\_\_\_

**Title** \_\_\_\_\_



**STANDARD #3 WORKSHEET  
(Cont'd)**

**Tree City USA Standard #3 Annual Work Plan 2008**

An annual work plan outlining the community forestry work that was to be carried out during the year 2008 needs to be provided. The worksheet below contains a column for every month (January—December); within each column there are four dots which represent each of the weeks within the month. Consider using a copy of this form to plan next year's activities.

**For each activity, place an "x" on top of the dots for each week of the year your community planned to be involved in that activity (each dot represents one week)**

**EXAMPLE**

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
<b>I. Annual planning &amp; review session</b>												
a. Prioritize work to be done	xxxx	....	....	....	x. x.	....	....	....	....	....	....	xxxx
b. Organize activities, people, dates	x...	....	x...	....	xx..	....	x...	....	x...	....	....	x x..

**Please complete the worksheet below (or provide the information in a different format) and include it with your application for Standard #3.**

Community: \_\_\_\_\_ Year: \_\_\_\_\_

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
<b>I. Annual planning &amp; review session</b>												
a. Prioritize work to be done	....	....	...x	....	....	....	....	....	....	x...	....	....
b. Organize activities, people,	....	....	...x	x...	x...	....	....	....	...x	.x...	....	....
c. Budget planning /hearings	....	....	....	....	....	....	....	...x	.xxxx	....	....	....
<b>2. Tree planting</b>												
a. Survey potential planting sites	....	....	....	....	....	....	....	....	....	....	.x..	....
b. Specify locations, species, cultivars	....	....	....	....	....	....	....	....	....	....	.x..	....
c. Notify adjacent property owners	....	....	....	....	....	....	....	....	....	....	....	....
d. Announce & hold public hearings	....	....	....	....	....	....	....	....	....	....	....	....
e. Create bid specifications/ solicit bids	....	....	....	....	....	....	....	....	....	....	....	....
f. Order trees	....	....	....	....	....	....	....	....	....	....	.x..	....
g. Receive, inspect, store trees	....	....	....	....	....	....	....	....	....	....	.x..	....
h. Plant trees, prune & stake	....	....	....	....	....	....	....	....	....	....	.x..	....
i. Water as needed	....	....	....	....	....	....	....	....	....	....	.x..	....
<b>3. Tree pruning</b>												
a. Survey trees, decide which to prune	....	....	...x	x...	....	....	....	....	...x	x...	....	....

b.	Schedule crew, equipment, supplies	....	....	...X	X...	....	....	....	....	...X	X...	....	....
c.	Schedule contract tree crews	....	....	....	....	....	...X	X...	....	....	....	....	....
d.	Supervise pruning & disposal of brush	....	....	...X	X...	....	....	....	....	...X	X...	....	....
<b>4. Tree removals</b>													
a.	Survey trees, decide on removals	....	....	....	....	...X	X...	....	....	....	....	....	....
b.	Notify adjacent property owners	....	....	....	....	....	....	....	....	....	....	....	....
c.	Announce & hold public hearings	....	....	....	....	....	....	....	....	....	....	....	....
d.	Schedule crew, equipment, supplies	....	....	....	....	....	..XX.	....	....	....	....	....	....
e.	Schedule contract tree crews	....	....	....	....	....	..XX.	....	....	....	....	....	....
f.	Stump grinding, reseeding.	....	....	....	....	....	....	....	....	....	....	....	....
<b>5. Public relations</b>													
a.	Report to municipal officials	....	....	....	....	....	....	....	....	...X	XXXX	XXXX	X...
b.	News releases	....	....	....	....	....	....	....	....	....	....	..X.	X...
c.	News & TV coverage of events	....	....	....	....	....	....	....	....	....	....	....	....
d.	Submit Tree City USA application	....	....	....	....	....	....	....	....	....	....	...X	....
e.	Plan, hold, publicize Arbor Day celebration	....	....	....	....	....	....	....	....	....	....	..XXX	....
<b>6. Tree care tasks</b>													
a.	Evaluate/schedule/repair irrigation system	....	....	....	....	...X	XX..	....	....	....	....	....	....
b.	Water most vulnerable trees during droughts	....	....	....	....	....	....	....	....	....	....	....	....
c.	Fertilize deficient trees	....	....	....	....	....	....	....	....	....	....	....	....
d.	Control diseases & insects impacting tree health	....	....	....	....	...X	...X	...X	...X	...X	....	....	....
e.	Remove stakes/tree wrap	....	....	....	....	....	....	....	....	....	....	....	....
f.	Clean up storm breakage	....	....	...X	X...	....	....	....	....	...X	..X..	....	....
g.	Mulch trees	....	....	....	....	....	....	....	....	....	....	....	....
h.	Control weeds	....	....	....	....	....	....	....	....	....	....	....	....
<b>7. Other tasks</b>													
a.	Conduct youth education	....	....	....	....	....	....	....	....	....	....	..X.	....
b.	Develop urban forestry grant projects	....	....	....	....	....	....	....	....	....	....	....	....
c.	Complete urban forestry grant applications	....	....	....	....	....	....	....	....	....	....	....	....
d.	Educational opportunities for tree commission	....	....	....	....	....	....	....	....	....	....	...X	..X..
e.	Training & safety education of tree workers	....	....	....	....	....	....	....	....	....	....	....	....





FOR APPLICATION OR RECERTIFICATION

STANDARD #3 WORKSHEET (Cont'd)

Tree City USA Standard #3 Accomplishment Report for 2008

While the work plan is what your city set out to do for the year, the accomplishment report is an opportunity to state what you were actually able to achieve and to quantify the progress that was made. Please check all of the "accomplishments" that apply, add any not listed, and indicate quantities where appropriate. This Accomplishment Report also needs to be included with your application.

Please check all that apply and indicate quantities where appropriate.

Community: Hailey

Year: 2008

<u>Accomplishment</u>	
1. Adopted or Revised Community Tree Ordinance	8/08
2. Number of Trees Planted	1
3. Number of Dead/Dying Trees Removed	5
4. Number of Pruned/Trimmed Trees	200
5. Held Arbor Day Celebration	11/12
6. Program Planning (Tree Committee Meetings)	4
7. Distributed Educational Publications	3
	(quantity)

<u>Accomplishment</u>	
8. Attended Educational/Training Programs (specify type and quantity)	
Jen Smith; PNW Chapter Conference	10/08
Bill Josey; PNW Chapter conference	10/08
Street Dept. pruning training	5/08
9. Other: (Specify activity and quantity if appropriate)	

## TREE CITY USA QUALIFYING EXPENDITURES

**The following expenses for public tree care (street, park, cemetery) may be counted towards the \$2 per capita requirement of Standard 3.**

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>√ Administrative time</li> <li>√ Arbor Day program</li> <li>√ Chipping (maximum of \$0.50 per capita)</li> <li>√ Computer inventory software</li> <li>√ Contract work</li> <li>√ Equipment maintenance</li> <li>√ Equipment purchases (large equipment can be depreciated over life span)</li> <li>√ Equipment rental (chipper, bucket truck, stump grinder)</li> <li>√ Fertilizing</li> <li>√ Insect &amp; disease control on trees</li> <li>√ Insurance</li> <li>√ Memberships in and donations to tree organizations</li> <li>√ Mulching</li> <li>√ Pick-up and/or chipping of tree trimmings from private properties (maximum of \$0.50 per capita)</li> <li>√ Prizes for Arbor Day contests</li> <li>√ Tree pruning costs (excluding utility pruning)</li> <li>√ Public education materials—brochures, newsletters, etc.</li> <li>√ Staff salaries and benefits (or portion thereof) to accomplish the tasks listed on this page (subject to noted limits)</li> </ul> | <ul style="list-style-type: none"> <li>√ Stump removal</li> <li>√ Survey or inventory expenses</li> <li>√ Tree board salary (most are volunteer, some are paid)</li> <li>√ Tree care conferences and workshops attended by community workers and/or volunteers</li> <li>√ Tree purchases and planting</li> <li>√ Tree removal (excluding utility removals)</li> <li>√ Utility pruning and removals (maximum of \$1 per capita)</li> <li>√ Watering</li> <li>√ Volunteer labor/time (see table below for rates)</li> <li>√ Value of donated materials (including trees)</li> </ul> <p><b>(Grant money expended for any of these items may be counted.)</b></p> |
|---|---|

### **Items not eligible toward Tree City USA**

- ⊗ Lawn mowing
- ⊗ Leaf pick-up
- ⊗ Tree work on non-public property
- ⊗ Weed and brush control not related to planting areas (i.e. right-of-ways, etc.)

### **Determining Value of Donated Services**

**Labor Rates**—Individuals performing tasks normally paid for, their actual rate of pay may be used.

#### **Managerial, Administrative & Clerical Support Services**

- Grant Project Manager/Coordinator \$15.00/ hr
- Tree Committee Meetings (project planning, etc.) / Secretaries/Bookkeepers \$10.00/hr (per member)

#### **Professional Services**

- Engineers & Lawyers \$40.00/hr
- Consultants (Computer Programming, Urban Forestry, Landscape Design, Urban Planning, Marketing/Sales) \$25.00/ hr

#### **Forestry Related Project Services**

- Volunteers under age 16 \$5.15/hr
- Volunteers age 16 and older \$8.00/hr

**Equipment Rates**— If city has a rate schedule for its equipment, those figures can be used instead.

- Chainsaw \$35/day
- Trencher (for irrigation installation) / Truck Drivers/Heavy Equip. Operators \$15/hr
- Backhoe/Loader \$25/hr
- Gravel/Hoist & Water Truck \$50/day
- Pickup \$30/day
- Brush Chipper/Tree Spade/Stump Grinder Contractor rate

FOR APPLICATION OR RECERTIFICATION



TREE CITY USA.

STANDARD # 4

STANDARD #4~ AN ARBOR DAY OBSERVANCE & PROCLAMATION

This standard requires that you observe and proclaim Arbor Day in your community and show documentation.

For Standard #4:

Please:

- 1. Indicate (on application) date Arbor Day was observed 11/12/08
- 2. Attach a copy of your community's Arbor Day Proclamation for 2008.
- 3. Attach documentation that describes event (include items such as agenda, description of event/activities, press coverage and any other information that illustrates how your Arbor Day event was planned and/or carried out).



TREE CITY USA.

FOR APPLICATION OR RECERTIFICATION

SIGNATURE & CITY INFORMATION

The application needs to be signed (on the line just below standard #4) by the person making the application. Also, fully complete the sections providing information regarding your community's Mayor (or equivalent) and the City Forestry Contact. That contact can be the parks supervisor, city maintenance person, public works director, city manager, volunteer, city forester, etc.



TREE CITY USA.

FOR APPLICATION OR RECERTIFICATION

SUBMIT FORMS TO

This year the Community Forestry Assistant in your area will be processing your application instead of IDL's Community Forestry Coordinator. So please submit completed application & forms, by **December 1, 2008** to the Assistant in your area. Also, contact them for any questions you might have regarding your application.

North Idaho		South Idaho
Panhandle Area	Clearwater Area	
<b>Jim Colla</b> Northwest Management Inc. W. 21 Commerce Dr., Ste. G Hayden, Idaho 83835 colla@consulting-foresters.com	<b>Tera King</b> Northwest Management Inc. PO Box 9748 Moscow, Idaho 9748 king@consulting-foresters.com	<b>Gerry Bates</b> 2445 John Adams Parkway Idaho Falls, ID 83401 208-522-5964 gabates@cableone.net



TREE CITY USA.

# FOR APPLICATION OR RECERTIFICATION

## APPLICATION CHECKLIST

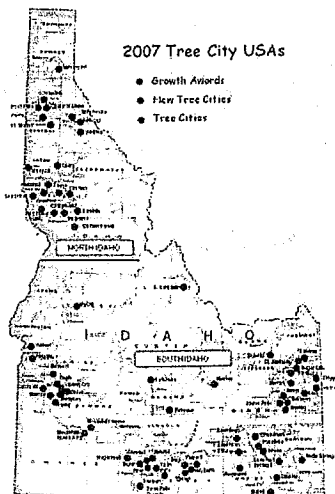
### TREE CITY USA APPLICATIONS

Your Tree City USA certification application or recertification application must include the following items. Note: Completing the preceding forms in this packet, will allow you to easily meet the documentation requirements for the application.

- X Completed application form**
- X Standard 1:** Tree Board or Department information (including Tree Board meeting dates)
- X Standard 2:** Tree Ordinance\*
- X Standard 3:**
  - X Financial Worksheets showing program expenditures/annual budget
  - X 2008 Annual Work Plan
  - X 2008 Program Accomplishments & Breakdown Budget
- X Standard 4:**
  - X Arbor Day proclamation
  - X Arbor Day observance program/agenda and/or news coverage of event

\* If your Tree Ordinance has not been revised since your last Tree City USA application, do not attach another copy. Your tree ordinance is on file in the Coordinator's office. All first-time applicants must include an ordinance with their application.

### COMMUNITY FORESTRY IN IDAHO



#### WHICH COMMUNITY FORESTRY ASSISTANT SERVES YOUR AREA?

**NORTH IDAHO**  
 ~Panhandle Area ~ Jim Colla ~ 208-772-8554  
 ~Clearwater Area ~ Tera King ~ 208-883-4488

**SOUTH IDAHO ~ Gerry Bates ~ 208-522-5964**

**IDL COMMUNITY FORESTRY COORDINATOR**  
 Dave Stephenson 208-666-8621

**AGENDA ITEM SUMMARY**

DATE: 11/10/08 DEPARTMENT: Public Works

DEPT. HEAD SIGNATURE: 

**SUBJECT:**

Requesting approval for the 2009 Northern Rockies Folk Festival Special Event to be held at Hop Porter Park. Event is schedule to take place July 31, 2009 – August 1, 2009.

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

**BACKGROUND/SUMMARY OF ALTERNATIVES CONSIDERED:**

**FISCAL IMPACT / PROJECT FINANCIAL ANALYSIS:**

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)

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

**RECOMMENDATION FROM APPLICABLE DEPARTMENT HEAD:**

Department Heads approved with the following contingencies:

- Applicant will be responsible for repair of any turf and/or sprinkler damage.
- Any special power requirements will need to be approved. Only City-approved electricians will be allowed in the power boxes.
- Dumpsters or trash receptacles will need to be provided.
- Declaration of Insurance coverage needs to be submitted.
- Applicant will need to coordinate special needs through the Public Works Director.
- Restrooms will need to be provided with a minimum of one being ADA accessible. The applicant states 2000 attendees, the proposed 20 restrooms with two being ADA accessible is acceptable.
- Applicant is reminded that they are responsible for providing the necessary cones and barricades for traffic control.

**FOLLOW-UP REMARKS:**

\*



RECEIVED

AUG 19 2008

SPECIAL EVENT PERMIT APPLICATION

I. EVENT NAME: ~~the~~ Northern Rockies Folk Festival 2009

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

Hop Porter City Park

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
FRI 7/31/09	Start Time: 5 pm End Time: 11 pm	One Hour Interval: All Day: 2000
SAT 8/1/09	Start Time: NOON End Time: 11 pm	One Hour Interval: All Day: 2000
Date of Set-Up		
7/30/09	Start Time: 8 am End Time: 8 pm	N/A
Date of Tear Down		
8/2/09	Start Time: 8 am End Time: 1 pm	N/A

IV. FEES

Special Event Permit Application Fee	\$125	<input checked="" type="checkbox"/>	125 -
Per Day Park Rental Fee (Waived for non-profits)	\$500	<input type="checkbox"/>	
Security Deposit	\$500	<input type="checkbox"/>	on file
Tax (on park rental fees only)	6%	<input type="checkbox"/>	
<b>TOTAL DUE</b>			125 -
Additional Deposit Required		<input type="checkbox"/>	deposit is on account

V. ORGANIZATION INFORMATION

Applicant's Name: Melonie Dahl Title: Secretary

Mailing Address: Box 2840, Hanley ID Zip Code: 83333

Street Address: City: State:

Day Telephone: 208 788 - 3997 Evening Telephone: 788 - 3623

FAX Number: 788 - 5991 E-Mail Address: melodie@melodieandlawtrust.org

Applicant Driver's License #: DL FA 1206444  
Sponsoring Organization: Northern Rockies Folk Festival  
Non-Profit:  Yes  No Tax Exempt #: \_\_\_\_\_  
Federal Tax #: 82-0489471 State Tax #: \_\_\_\_\_

**VI. EVENT INFORMATION**

New Event: Yes \_\_\_\_\_ No  Annual Event: Yes  No \_\_\_\_\_ Years Operating 32  
Event Category:  Commercial  Noncommercial  
Estimate of Gross Ticket Sales & Revenues (commercial event only): \_\_\_\_\_  
Description of Event: 2 days of music, family oriented 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: Starkey-Leavitt Agent Name: Debra Green  
Address: 715 Shoreline St., Twin Falls Phone: 208 733-5136

**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
	X	Street Closures & Access / Parade Detailed map listing areas of closure, parade route is required. An ITD permit is required for Main Street.  <i>Table @ Billim &amp; River</i>		X	Alcohol Served (Free of Charge) (name of provider)
				X	Alcohol Sold Requires Alcohol Beverage Catering Permit (Hailey Code 5.13)
		Street Closures & Access /Parade require, your Event Coordinator to notify all affected businesses, churches schools and neighborhoods	X		Food/Beverages will be served (List Caterers):
	X	Canopies/Tents/Membranes/Temporary Structures (Number & Size(s) City of Hailey Fire Department, Fire Code Enforcement	#		Vendors items sold/ solicitation  <i>Non-profit food booths (est. 6)</i>
	X	Medical Services (Circle) First Aid and/or EMS Services  Who is providing services? <i>Volunteers</i>	#		
	X	Security (detail who, number of officers, times. Attach plan) <i>Volunteer staff</i>	#		Booths: Profit/ <u>Non-Profit</u>
	X	Traffic Control / Shuttle Buses (Number of buses / locations / hours of operation, attach plan.) <i>see #1 above</i>	X		Lighting plan: attach plan <i>Stage &amp; security</i>
	X	Electricity / Generators (Size _____) Attach detailed electrical plan. <i>on site</i>	X		Activities / Entertainment (Agenda) Other equipment or entertainment
		<i>area layout same as all years before</i>	X		Signs or Banners: sign permit may be required by the City Planning and Zoning Department
	X	Water Drinking / Washing (circle) <i>on site</i>	X		Stages (Number and Size(s) <i>(60 x 30')</i> )
	X	Gray Water Barrel / Grease Barrel (circle/detail # and locations)	#	X	Barricades. How many <i>20</i> identify locations and attach logistics map
	X	Sanitation -Trash bins, Dumpsters, Recycle (circle/detail # and locations) <i>on site</i>	#		EVENT estimated attendance <i>2000/day</i>
	X	Porta Toilets / Wash Stations (Quantity ADA Regular)  <i>20 2 18</i>	#	X	Number of staff working event <i>14</i>
			#	X	Number of volunteers working <i>52</i>

security & parade w/ canopy table set traffic & bands allowed

→ area layout same as all years before

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: *8/16/08*



**AGENDA ITEM SUMMARY**

**DATE:** 11/19/08 **DEPARTMENT:** Finance & Records **DEPT. HEAD SIGNATURE:**

**SUBJECT:**

Taxi License Renewal

**AUTHORITY:**  ID Code \_\_\_\_\_  IAR \_\_\_\_\_  City Ordinance/Code 5.20  
(IF APPLICABLE)

**BACKGROUND/SUMMARY OF ALTERNATIVES CONSIDERED:**

Annual taxi business license renewals for the following:

Airport Cab  
A-1

City staff and Hailey Police Department have reviewed and approved applications.

**FISCAL IMPACT / PROJECT FINANCIAL ANALYSIS**

Budget Line Item # \_\_\_\_\_ Caselle # \_\_\_\_\_  
YTD Line Item Balance \$ \_\_\_\_\_  
Estimated Hours Spent to Date: \_\_\_\_\_ Estimated Completion Date: \_\_\_\_\_  
Staff Contact: \_\_\_\_\_ Phone # \_\_\_\_\_

**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:**

Approve Airport Cab for 2009 license.

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



# AUTO TRANSPORTATION SERVICE BUSINESS LICENSE APPLICATION

## LICENSE FEES:

New or Renewal \$250.00  
(License application for full year Jan. 01 – Dec.31)

Fingerprint Processing \$34.00  
(If applicable)

TOTAL: 284.00

OFFICE USE ONLY	
NEW	RENEWAL
APPROVED <input checked="" type="checkbox"/>	DENIED <input type="checkbox"/>
POLICE CHECK <input checked="" type="checkbox"/>	

EXPIRES ANNUALLY ON DECEMBER 31<sup>ST</sup>

Business Name: A-1 Sun Valley Tax & Trans / Rocky Mtn Trans

Owner Driver's License Number WY 105478-291 Owner Date of Birth 8/18/64

Number of Vehicles Operated by Business 2

1. Have you within the last three (3) years: been convicted of, or received a withheld judgment, been placed on probation, forfeited a bond for failure to appear for any felony or misdemeanor charge, or have any outstanding warrants? Yes  No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Have you had a similar license revoked, denied or suspended by this city or any other city of this state, or of the United States, within the past three (3) years? Yes  No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_





HAILEY

# AIRPORT CAB COMPANY FARE SCHEDULE

Taxi DOES NOT provide service on unimproved (dirt) roads.

Sun Valley to Ketchum / Sun Valley to Elkhorn

\$10.00 (\$3.00 per additional passenger)

Ketchum to and from Hailey

# of PAX

1	\$25.00
2	\$35.00
3	\$45.00
4	\$55.00
5	\$65.00
6	\$75.00

After midnight - \$30.00 minimum

\$5.00 per additional passenger

### Deliveries

Baggage - picked up at Hailey Airport and delivered is

\$23.00 first bag; \$1.00 each additional bag.

PLUS \$8.00 per extra stop.

Dogs / Cats - \$7.00 per animal

### Airport to Bellevue

\$20.00 (\$5.00 per additional passenger)

Friedman Airport (public or private side) to all points.

#### Hailey

\$13.00 (\$5.00 per additional passenger)

#### Deer Creek

\$20.00 (\$10.00 per additional passenger)

#### Indian Creek

\$21.00 (\$11.00 per additional passenger)

#### Zinc Spur

\$22.00 (\$11.00 per additional passenger)

#### Starweather & Heatherlands

\$23.00 (\$11.00 per additional passenger)

#### East Fork

\$24.00 (\$13.00 per additional passenger)

1st mile after Ketchum prices:

Gimlet	# of PAX	
Ketchum	1-2	\$25.00 - \$40.00
Elk Horn	3-4	\$53.00 - \$63.00
Sun Valley	5-6	\$73.00 - \$83.00
Saddle Road		

### Elkhorn to / from Warm Springs

\$15.00 (\$3.00 per additional passenger)

Any lift to lift \$15.00

North of Saddle, Adams Gulch, Bigwood Golf

\$27.00 (\$14.00 per additional passenger)

### Hulen Meadows & Lake Creek

\$28.00 (\$14.00 per additional passenger)

### Stone Gate & North Fork

\$30.00 (\$15.00 per additional passenger)

Extra Miles = \$2.00 per mile

FUEL SUR CHARGE = \$4.00 - \$8.00

Waiting Time = \$1.00 per minute after 1st 5 minutes

### Hourly Rate \$72.00

Warm Springs to Hulen Meadows \$13.00

Ketchum to Warm Springs Lifts

\$10.00 minimum • \$3.00 additional passenger

Sun Valley to Warm Springs \$12.00

Ketchum to Elkhorn Village

\$11.00 minimum • \$3.00 per additional passenger

Warm Springs to Elkhorn \$14.00

\$3.00 per additional passenger

Elkhorn to Adam's Gulch \$12.00

\$3.00 per additional passenger

Hailey	# of PAX	Core
1		\$9.00
2		\$11.00
3		\$13.00
4		\$15.00
5		\$17.00

### Hailey to / from Woodside

North \$11.00

Middle \$12.00

South \$13.00

Hailey to Bellevue \$15.00

Board Ranch to Ketchum \$14.00

(\$3.00 per additional passenger)

### Ketchum to...

North Fork	\$18.00
Eagle Creek	\$18.00
Glassford Heights	\$16.00
Lake Creek	\$14.00
Hulen Meadows	\$14.00
Sun Tree Hollow	\$12.00
Red Top Meadows	\$13.00
Cold Springs	\$13.00
Chalet	\$13.00
Gimlet	\$15.00
East Fork	\$18.00
Hidden Hollow	\$18.00
Triumph	\$24.00

(\$5.00 per additional passenger)

### Ketchum to...

Heatherlands	\$19.00
Starweather	\$19.00

\$5.00 per additional passenger

Early Morning bussing = \$40.00

2 - 5 a.m.



**AGENDA ITEM SUMMARY**

**DATE:** 11/24/2008 **DEPARTMENT:** Clerk's Office **DEPT. HEAD SIGNATURE:** Mary Cone

**SUBJECT:**

Contract for Maintenance Agreement with Magic Valley Business Systems for new copier.

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

**BACKGROUND/SUMMARY OF ALTERNATIVES CONSIDERED:**

This new copier replaced the old copier in the City Hall mail room.

**FISCAL IMPACT / PROJECT FINANCIAL ANALYSIS**

Case # \_\_\_\_\_  
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 Attorney	<input checked="" type="checkbox"/> City Clerk	<input type="checkbox"/> Engineer	<input type="checkbox"/> Building
<input type="checkbox"/> Library	<input type="checkbox"/> Planning	<input type="checkbox"/> Fire Dept.	_____
<input type="checkbox"/> Safety Committee	<input type="checkbox"/> P & Z Commission	<input type="checkbox"/> Police	_____
<input type="checkbox"/> Streets	<input type="checkbox"/> Public Works, Parks	<input type="checkbox"/> Mayor	_____

**RECOMMENDATION FROM APPLICABLE DEPARTMENT HEAD:**

The clerk's office recommends authorizing the Mayor to sign this agreement to be signed.

**FOLLOW-UP REMARKS:**

\*

MAGIC • VALLEY



PO Box 1843  
393 EASTLAND DR. S.  
TWIN FALLS, IDAHO 83303-1843  
WWW.MVBS.NET

RECEIVED

NOV 07 2008

MHC

November 5, 2008

City Of Hailey  
115 S Main St Ste#H  
Hailey, ID 83333

Dear Mary,

**MAGIC VALLEY BUSINESS SYSTEMS, INC.** is excited to serve you with our full coverage maintenance program. We are positive that you will find it beneficial to your company's needs.

I have enclosed the new contract for your **SHARP AM-X55** digital copier. The monthly minimum charge for this agreement is \$20.00, which includes 2,249 copies; overages will be billed at .0089 cents per copy. **This maintenance program covers all maintenance, parts, labor, pm kits, drums, fuser and cleaning rollers, black toner, and developer. It does not include any paper products, color units, staple cartridges, labels, transparencies or connectivity issues.**

As part of this agreement, you will be required to provide us with a meter reading. We will fax you a request for a meter reading each month.

Please sign the highlighted areas and return the top copy in the enclosed envelope as soon as possible. Retain the yellow copy for your records. If you have any questions or concerns, please don't hesitate to call me at 734-6181.

Again, thank you for doing business with **MVBS**. We will continue to provide you with our professional service and fast response time.

Sincerely,

Julie Schmahl  
Magic Valley Business Systems

Enclosures



# MAGIC VALLEY BUSINESS SYSTEMS

TWIN FALLS, IDAHO • PHONE 208-734-6181 • WATS 1-800-333-7025

## MAINTENANCE AGREEMENT

BILLING CYCLE  ANNUAL  MONTHLY

EQUIPMENT		METER READING		RENEWAL DATE	MINIMUM CHARGE	ALLOWANCE COPIES	COST PER COPY AMOUNT
MODEL	SERIAL NO.	READING	DATE				
AMX-55	85009353	101	10/16/2008	10/16/2011	\$20.00	2,249	.0089

### BILLING ADDRESS

COMPANY NAME CITY OF HAILEY		
ADDRESS 115 S MAIN ST STE#H		
CITY HAILEY	STATE ID	ZIP 83333
ATTN: MARY	PHONE	

THE ABOVE CHARGES INCLUDE:

ALL MAINTENANCE, PARTS, LABOR, PM KITS, DRUMS  
FUSER & CLEANING ROLLERS, BLACK TONER, &  
DEVELOPER.

EMAIL address for meter requests:

FAX NUMBER:

### INSTALLATION ADDRESS

COMPANY NAME SAME		
ADDRESS		
CITY	STATE	ZIP
ATTN:	PHONE	

THE ABOVE CHARGES EXCLUDE:

ALL PAPER PRODUCTS, COLOR UNITS,  
STAPLE CARTRIDGES, LABELS & TRANSPARENCIES.  
ALL CONNECTIVITY ISSUES.

**\*\*Maintenance agreement may be modified or cancelled based on availability of parts & supplies\*\***

This Agreement shall not apply to any repairs made necessary by accident, abuse, neglect, theft, vandalism, improper installation (installation other than set out in the owner's manual), electric power failure, fire, water or other casualty or damage resulting from servicing by personnel other than those of MAGIC VALLEY BUSINESS SYSTEMS.

This is a 3 year agreement, automatically renewable at the end of 3 year(s) under these same terms and conditions. It is agreed between parties that the quoted price on the minimum charge, allowance copies, and the cost per copy amount is guaranteed for the period of 3 year(s), at which time the minimum charge and cost per copy amount will be increased based on prevailing market costs.


This Agreement is conditioned upon the proper installation of the equipment to electrical outlets as outlined in the copy machine service manual, and this Agreement can be terminated by MAGIC VALLEY BUSINESS SYSTEMS (herein after referred to as MVBS), if it is determined by a trained factory technician that the unit is not connected to a dedicated 20 amp power receptacle that meets the uniform building code in force. The equipment must be connected to a surge protector approved and installed by MVBS.

The customer agrees to purchase and MVBS agrees to provide maintenance service for the equipment identified above in accordance with the terms and conditions of this Agreement. No terms or conditions, expressed or implied, are authorized unless they appear on the original of this Agreement, signed by Customer and MVBS Representative.

I understand that I will be charged a billing fee of 1 1/2 % per month (18% annually) for all outstanding balances on my account over 30 days old with MVBS. I further agree that in the event of non-payment of my account, I understand that MVBS could cancel this Agreement and that I shall be responsible for all costs of collection, court costs and reasonable attorney's fees required to collect my account.

THE ADDITIONAL TERMS AND CONDITIONS ON THE REVERSE SIDE HEREOF ARE INCORPORATED IN AND MADE PART OF THIS AGREEMENT. NO CHANGE, ALTERATION OR AMENDMENT OF THESE TERMS OR CONDITIONS OF THIS AGREEMENT ARE AUTHORIZED OR EFFECTIVE UNLESS THEY HAVE BEEN AGREED TO IN WRITING BY AN OFFICER OF MVBS.

### MVBS AUTHORIZATION

MVBS REPRESENTATIVE SIGNATURE 		
PRINTED SIGNATURE NAME Julie Schmahl	DATE 11/5/08	
OFFICE ADDRESS P.O. Box 1843		
CITY Twin Falls	STATE ID	ZIP 83301

### CUSTOMER'S AUTHORIZATION

CUSTOMER NAME	
BY (AUTHORIZED SIGNATURE)	DATE
PRINTED SIGNATURE NAME	TITLE
PURCHASE ORDER NO.	P.O. DATE

MVBS - WHITE CUSTOMER - YELLOW

# MAGIC VALLEY BUSINESS SYSTEMS

TWIN FALLS, IDAHO • PHONE 208-734-6181 • WATS 1-800-333-7025

## MAINTENANCE AGREEMENT

BILLING CYCLE  ANNUAL  MONTHLY

EQUIPMENT		METER READING		RENEWAL DATE	MINIMUM CHARGE	ALLOWANCE COPIES	COST PER COPY AMOUNT
MODEL	SERIAL NO.	READING	DATE				
AMX-55	85009353	101	10/16/2008	10/16/2011	\$20.00	2,249	.0089

### BILLING ADDRESS

COMPANY NAME CITY OF HAILEY		
ADDRESS 115 S MAIN ST STE#H		
CITY HAILEY	STATE ID	ZIP 83333
ATTN: MARY		PHONE

### INSTALLATION ADDRESS

COMPANY NAME SAME		
ADDRESS		
CITY	STATE	ZIP
ATTN:		PHONE

THE ABOVE CHARGES INCLUDE:

ALL MAINTENANCE, PARTS, LABOR, PM KITS, DRUMS  
FUSER & CLEANING ROLLERS, BLACK TONER, &  
DEVELOPER.

EMAIL address for meter requests:

FAX NUMBER:

THE ABOVE CHARGES EXCLUDE:

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### MVBS AUTHORIZATION

MVBS REPRESENTATIVE SIGNATURE <i>Julie Schmahl</i>		
PRINTED SIGNATURE NAME Julie Schmahl		DATE 11/5/08
OFFICE ADDRESS P.O. Box 1843		
CITY Twin Falls	STATE ID	ZIP 83301

### CUSTOMER'S AUTHORIZATION

CUSTOMER NAME	
BY (AUTHORIZED SIGNATURE)	DATE
PRINTED SIGNATURE NAME	TITLE
PURCHASE ORDER NO.	P.O. DATE

MVBS - WHITE CUSTOMER - YELLOW