MEETING DATE: 6/3/2019

ITEM: 9B

AGENDA ITEM SUMMARY

Subject: Consider requests for street closures for July 3rd kids day parade and for July 4th fireworks

Background Summary:

These two requests are exactly the same as last year. Kids parade will be held July 3rd and they are requesting the following streets closed: Kelly Street from Main to Johnson St, Johnson St from Kelly to Blunt and Blunt St from Johnson to Main and Main St. from Blunt to Kelly.

Requesting to close the Main Street bridge from 2:00 to 11:00 p.m. for the fireworks display.
CHARLES CITY PARADE PERMIT

THE ORGANIZER AND APPLICANT WILL AGREE TO AND ACCEPT RESPONSIBILITY FOR OBSERVING CITY CODE AND OBEYING ALL RULES INCLUDING, BUT NOT LIMITED TO, THOSE SET OUT ON THE SECOND PAGE OF THIS APPLICATION.

1. DATE OF PARADE: 7/3/2019 TIME: 10:30 AM

2. PERSON OR ORGANIZATION SPONSORING PARADE:
   NAME: Sofer Family McDonalds (Emily Garden)
   ADDRESS: 1010 S. Grand Ave. #4
   PHONE #: 641-228-2838
   PERSON IN CHARGE: Emily Garden
   PHONE #: 641-330-5466
   SIGNATURE: [Signature]

3. PARADE IS IN CONJUNCTION WITH (CELEBRATION/FUNCTION/EVENT)
   Kids Days 2019

4. STAGING AREA (WHERE WILL THE PARADE LINE-UP):
   Kelly St. between W. Main & N. Jackson

5. EXACT PARADE ROUTE: North on Main, West on Blunt, South on W. Johnson, East on Kelly

6. NUMBER OF ENTRIES: Various kids, day of registration

7. ANY SPECIAL ENTRY: (Horse teams, over-length vehicles, etc.)
   bank + McDonalds mascot

8. SECURITY RISK ENTRIES (i.e. political figures):

INTERNAL USE:

AUTHORIZATION IS HEREBY: GRANTED ___ DENIED ___ TO THE ABOVE NAMED PERSON OR ORGANIZATION FOR A PARADE ON THE ABOVE DATE AND TIME.

______________________________ ________________________________
MAYOR OR MAYOR PRO TEMP CHIEF OF POLICE
PARADE RULES:

1. THERE WILL BE NO ITEMS THROWN FROM VEHICLES OR FLOATS. SOMEONE ON FOOT AND NEAR THE CROWD SHOULD DISTRIBUTE ALL CANDY, FLYERS, PROMOTIONAL MATERIALS, ETC. NO SQUIRT GUNS, SUPER SOAKERS, AND/OR THE LIKES WILL BE ALLOWED IN THE PARADE.

2. ALL VEHICLES, ANIMALS, FLOATS, SHALL STAY AS CLOSE TO THE CENTER OF THE STREET AS POSSIBLE, INSURING A SAFE DISTANCE BETWEEN THE ENTRY AND THE CROWD.

3. NO ENTRY WILL BE ALLOWED TO PERFORM, EXHIBIT, OR DEMONSTRATE IN A WAY THAT COULD ENDANGER THE CITIZENS OBSERVING THE PARADE.

4. ANY VIOLATION OF CITY CODE 60.08, THESE RULES, STATE CODE OR THE DIRECT ORDER FROM A POLICE OFFICER OR DESIGNEE COULD RESULT IN A WARNING, REMOVAL FROM THE PARADE, OR A CITATION IF APPLICABLE.

CITY CODE 60.08 PARADES REGULATED. No person shall conduct or cause any parade on any street except as provided herein:

1. "Parade" Defined. "Parade" means any march or procession of persons or vehicles organized for marching or moving on the streets in an organized fashion or manner or any march or procession of persons or vehicles represented or advertised to the public as a parade.

2. Permit Required. No parade shall be conducted without first obtaining a written permit from the Mayor or Police Chief not less than four (4) days prior to the date of the parade. Such permit shall state the time and date for the parade to be held and the streets or general route therefor. Such written permit granted to the person organizing or sponsoring the parade shall be permission for all participants therein to parade when such participants have been invited by the permittee to participate therein. No fee shall be required for such permit.

3. Parade Not A Street Obstruction. Any parade for which a permit has been issued as herein required, and the persons lawfully participating therein, shall not be deemed an obstruction of the streets notwithstanding the provisions of any other ordinance to the contrary.

4. Control By Police and Fire Fighters. Persons participating in any parade shall at all times be subject to the lawful orders and directions in the performance of their duties of law enforcement personnel and members of the fire department.

I have read the above rules and will take reasonable steps to ensure that they will be carried out.

PERSON IN CHARGE: Emily Garden DATE: 5-30-19

SIGNATURE: Emily Garden
CHARLES CITY STREET CLOSING REQUEST AND PERMISSION FORM

THE ORGANIZER AND OR APPLICANT WILL AGREE TO AND ACCEPT RESPONSIBILITY OF THIS EVENT.

DATE OF APPLICATION

1. DATE OF CLOSING: July 4, 2019       TIME: 2:00 pm

2. DATE OF REOPENING: July 4, 2019       TIME: 11:00 pm

3. REASON FOR CLOSURE: Fireworks

4. STREET(S) TO BE CLOSED: Court St.       Main St.

5. ALL AFFECTED PROPERTIES HAVE BEEN NOTIFIED? YES X NO

6. PERSON OR ORGANIZATION SPONSORING EVENT: Mark WiKS Charles City Community Revitalization

ADDRESS: 401 N. Main

PHONE # 641-228-4264

PERSON IN CHARGE (IF ORGANIZATION) Tim Hamke

PHONE # 641-426-6816

SIGNATURE:

7. ANY SPECIAL INFORMATION: Rain date is July 5th

8. AUTHORIZATION IS HEREBY: GRANTED _____ DENIED _____ TO THE ABOVE NAMED PERSON OR ORGANIZATION FOR A STREET CLOSURE ON THE ABOVE DATES AND TIME.

CHIEF OF POLICE

9. NOTIFICATION TO:

SUPERINTENDENT OF THE STREET DEPARTMENT

FIRE DEPARTMENT

AMBULANCE
CERTIFICATE OF LIABILITY INSURANCE

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

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

PRODUCER
Britton Gallagher
One Cleveland Center, Floor 30
1375 East 9th Street
Cleveland OH 44114

CONTACT
NAME:

PHONE
(AIC. No./Exp.) 216-658-7100

FAX
(AIC. No.) 216-658-7101

ADDRESS:

EMAIL

INSURER(S) AFFORDING COVERAGE

INSURER A: Everest Indemnity Insurance Co.
10851

INSURER B: Maxum Indemnity Company
26743

INSURER C: Axis Surplus Insurance Company
26620

INSURER D: Everest Denali Insurance Company
16044

INSURER E:

INSURER F:

CERTIFICATE NUMBER: 1913667839

REVISION NUMBER:

COVERAGE

This is to certify that the policies of insurance listed below have been issued to the Insured named above for the policy period indicated. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions and conditions of such policies. Limits shown may have been reduced by paid claims.

<table>
<thead>
<tr>
<th>INSURER</th>
<th>TYPE OF INSURANCE</th>
<th>ADDED SUBSCRIBER</th>
<th>WDC</th>
<th>POLICY NUMBER</th>
<th>POLICY ISSUED</th>
<th>POLICY EXPIRY</th>
<th>LIMITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>GENERAL LIABILITY</td>
<td></td>
<td></td>
<td>SI8ML00060-191</td>
<td>1/15/2019</td>
<td>1/15/2020</td>
<td>EACH OCCURRENCE: $1,000,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>DAMAGE TO RENTED PREMISES (Inc. occurrence): $500,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>MED EXP (Any one person): $</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>PERSONAL &amp; ADV INJURY: $1,000,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>GENERAL AGGREGATE: $2,000,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>PRODUCTS - COMPOD AGG: $2,000,000</td>
</tr>
<tr>
<td>D</td>
<td>AUTOMOBILE LIABILITY</td>
<td></td>
<td></td>
<td>SI8CA00033-191</td>
<td>1/15/2019</td>
<td>1/15/2020</td>
<td>COMBINED SINGLE LIMIT (Per accident): $1,000,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>BODILY INJURY (Per person): $</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>BODILY INJURY (Per accident): $</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>PROPERTY DAMAGE (Per accident): $</td>
</tr>
<tr>
<td>B</td>
<td>UMBRELLA LIABILITY</td>
<td></td>
<td></td>
<td>EXC602811B-04</td>
<td>1/15/2019</td>
<td>1/15/2020</td>
<td>EACH OCCURRENCE: $5,000,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>AGGREGATE: $5,000,000</td>
</tr>
<tr>
<td>C</td>
<td>Excess Liability</td>
<td></td>
<td></td>
<td>P-001-000063943-01</td>
<td>1/15/2019</td>
<td>1/15/2020</td>
<td>Each Occurrence: $4,000,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Aggregate: $4,000,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Total Excess Limits: $2,000,000</td>
</tr>
</tbody>
</table>

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

Additional insured extension of coverage is provided by above referenced General Liability policy where required by written agreement.

FIREWORKS DISPLAY DATE: July 4, 2019

RAIN DATE: July 5, 2019

LOCATION OF EVENT: next to Grace Larson Park on Main Street Bridge

ADD'L INSURED: The City of Charles City, Iowa, its employees, volunteers, officers, elected officials, partners, subsidiaries, divisions & affiliates, event sponsors & landowners as their interest may appear in relation to this event; Floyd County (AHJ)

CERTIFICATE HOLDER

Charles City Community Revitalization
401 North Main
Charles City IA 50616

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

© 1988-2010 ACORD CORPORATION. All rights reserved.
Permit for Fireworks Display

Applicant shall meet all City, State, and Federal rules, regulations and licensing or registrations, including a copy of liability insurance to be allowed to conduct a fireworks display within the city limits of Charles City.

Sponsoring Organization: Charles City Community Reinvestment Contact person: Mark Wicks Phone #: 641-225-4264

Fireworks Company: J&M Displays Inc. Phone #: 319-394-3890

Fireworks Shooter: Tim Laube Phone#: 641-426-6816

Location of display (Provide site plan): Main St. Bridge Grace Larson Park

Date & time of display: July 4, 2019 1000 pm raindate: July 5

Estimated duration of display: 30 mins.

Maximum size of shells/mortars to be used in display: 3"

The applicant after meeting all requirements is given permission to conduct the fireworks display at the location on the time and date as described above. Applicant shall contact the fire department a minimum of 1 hour prior to shoot to allow fire department personnel time to conduct an on-site inspection of display setup.

______________________________  __________________________
Fire Chief signature                  Date

Eric R. Whipple
Fire Chief

____Proof of Insurance  ____Proof of Shooter Certificate  ____Site plan submitted

(641) 257-6313  FAX: (641) 257-1170

704 SOUTH GRAND AVE. CHARLES CITY, IOWA 50616-3731
Tim Laube

Presented to

CERTIFICATE OF COMPLETION

Dated and signed this 24th day of June 2018.

From the date below-mentioned, this certificate will expire 3 years.

This certificate recognizes that the above-named individual completed an on-line J & M Displays, Inc. 6-hour American Pyrotechnics Association (APA) Fireworks Training Program for display operators and 2-year certificates will expire in 3 years.

Tim Laube

Roger Kumberg, Instructor

James J. Olexon, CEO