



September 17, 2013

TO: Board of Mayor and Aldermen

FROM: Eric Stuckey, City Administrator

Special Events Advisory Team

SUBJECT: Turkey Trot Event Application

Purpose

The purpose of this memo is to outline recommendations for the Turkey Trot 5K sponsored by Graceworks Ministries.

Background

Graceworks Ministries has submitted an application for their annual Turkey Trot 5K on November 28th (Thanksgiving Day). The event begins and ends at D1 Sports. Estimated attendance is 3000 participants and 2000 attendees. The route includes the Galleria Blvd, Mallory Lane, and Bakers Bridge. Street closure is from 7 a.m. until 9 a.m.

Recommendation

Staff recommends approval of the event application with the following recommendations:

- Applicant will provide a \$1,000 refundable damage deposit to City prior to event.
- Applicant will provide a Good Neighbor letter which will be distributed to affected neighborhoods.

• Risk Management:

 Applicant has already provided a certificate of insurance naming the City as additional insured.

• Police Department:

 Applicant will hire recommended extra-duty Franklin Police Officers to provide security and traffic control.

• Solid Waste Department:

o Applicant will provide volunteers to clean up during and after event.

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CITY OF FRANKLIN EVENT PERMIT APPLICATION

Application is Due 90 **Days Prior** to Scheduled Event.

Please read application carefully and fully complete each section.

A non-refundable application fee of \$100 is due at time of filing.

Note: Filing this	application does not guarant	ee that your request will be granted.
Please check all that apply:	☐ street closure	□ parade
	e other special event	☐ beer served (separate permit required)
Pease subty the blow.	ng information. For additional spa	ta, use separate sheets of paper and attach to the application.
1) Location reques	sted (if Temporary Street Clo	sure only, list major roads to be closed):
Aspen Grov	Park Liberty Pa	rk Eastern Flank BattleField Park
Federal F	arms Pinkerton	Park A A A A
politicamento de la companya della companya della companya de la companya della c	Park Harlmsda	e Farm Other COL SPRINGS MALMEL
2) Name/purpose of	of event: July JULEY	DUNT - FUNDAMER FOL CARECUSCES
3) Date or dates of	event: FGH NOVPM	44 28, 2015
4) Time of Event:	bare-10am	
5) Time of Street C	losure (If applicable): 84	region in 10 persons
Set-Up Date/Tin	e: NOV 27,2013 BY 1964	Tear-down Date/Time: NW 28 2013 - 64 10 AM
		s (2) will be added after tean-down to allow time for clean-up. Event is a. Read Additional Requirements section for more information.
Name of Applica	ent and Organization Reques	ting Permit:
GRECENSA	EL MINISTES	
		REDIKUN IN 37004
b) Phone: 💯	744-9055 c) Celt: <u>U</u>	15-473-9559 OFEX: 45-794-2174
e) E-mail addres	: ksylvestregra	eworks ministries net
7) Person in charg	e on day of event: <i>Loco</i>	We have
Cell: <u>615-425</u>	- 	ddress: KKfgwm@gwail.com



5)	Name and Cell Number of at least two others available on day of event:
	Name: KRKT SYNGTOR Cell: 115-473-959 E-mail address: Ksylvester Q grece works
	Name: TIND GOWITH Cell: US-838-802 E-mail address: tolordice grecerorks
	DETAILED description of event (use additional sheets): 5K + 1K Family Run BOVEFITTING CANCELLOUS
	MCHORED & DI FRUITY
10)	ENCLOSE A DETAILED MAP of event site, detailing any temporary or permanent structures, street closures, parking, etc. If applicable, list the location, blocks, streets, and/or intersections in which such event will occur. For large-scale events, map should be obtained from the City's GIS division.
11)	An estimated number of participants and an estimated number of attendees expected to attend during the course of the event:
	3000 PARTCHING + 2000 ATTOMORES = 5000 FORAK
12)	Please attach a list containing the names, addresses, and phone numbers of the Chairperson of the organization and all other persons involved in the management or control of organization and/or committee.
13)	Is your organization based in Williamson County? Circle Year or No
	(if no, please state where:)
14)	is your organization authorized to do business in Tennessee? Circle Yes or No
	Is your organization a tax-exempt organization as described by the Internal Revenue Code Section 501(c)(3) or a not-for-profit organization? Circle Yes or No. If yes, please attach copy of iRS tax exemption letter providing proof of status.
16)	Will you charge an admission/participation fee (including vendors)? If yes, please specify how much per person/vendor
17)	Will any charity, gratuity, or offers be solicited or accepted during the event? Circle (es or No
	Is this event a fundraiser? Circle (es) or No. If yes, what organization will be benefactor of event? What percentage of funds will they receive?
191	Will parking in the area of the event need to be restricted or prohibited? Circle Yes or Ro
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20)	Will any sound amplification equipment be used during the event? Circle Yes or No. 15 R A please skip to Question #22.
21)	For what purpose will sound amplification be used (i.e. announcements, entertainment, etc.)?
22)	What type of sound amplification will be provided (DJ, Band, etc.)? Please list all that apply.
23)	During what time period is sound amplification requested? ///
* 4)	If for entertainment, give details of entertainment being provided (i.e. number of musicians, type of music, amp wattage, etc.).
	Will any stages, amusement attractions, or amusement rides, including inflatables, be erected for the event? Circle Yes or No. If yes, Applicant must give specific details as to the location and type of games/activities, i.e. inflatables, Horseshoes, relay races, etc. along with the name of the company providing the stages and/or activities. Applicant must also include a copy of that company's insurance certificate indicating coverage and listing the City of Franklin as additional insured. ***For stages, tents, inflatables, etc. constructed on site prior to the event, that date must be included on Certificate of Insurance provided to the City of Franklin. Stages MUST be removed from site at end of event. ***Rented inflatables/interactives that are set-up and manned by applicant must be included specifically in applicant's Certificate of Insurance.
	What, if any, vendors will be present at event? (i.e medical related, shirts, arts, etc.) Please provide detailed list. Use additional sheets.
27)	Will food, beverages, or merchandise be sold or given away? Circle Yes or No. If yes, clean-up is required. Please provide name of clean-up provider, contact, and phone number of person on-site during event. See Question #28
	Events under 200 participants require a \$250 refundable security deposit at the time of approval. For events over 200, a \$1000 security deposit is required upon approval. If clean-up is not done properly, the organization requesting the permit will be fined (See Attachment A). Applicant's event coordinator or representative and a City of Franklin representative will conduct a Pre-Event meeting prior to event date for Pre-Event Check List Site Review. At the end of the event, a Post-Event Check List shall be completed by the Applicant's event coordinator, or representative, and a City of Franklin representative to re-assess the site for trash and damage, and to secure with caution tape and signage (provided by event group) any tents left for removal. Damage deposit will be refunded after a satisfactory Post Event Check List has been completed and signed off on by both the City of Franklin and organization requesting event.



29) "NOTE Events that include deep frying cooking oil operations are required to have a grease pit on-site and contract with a grease waste hauser to handle the grease waste and removal of the grease pit. A copy of this agreement shall be filed along with this application. The primary event sponsor is required to remove all cooking grease from the site immediately after the event. It legal dumping of cooking grease will be prosecuted. Please read Additional Requirements section of this application for more information.

30)	Will y	MON	require	8 1	iempora	ry w	ater	tap?	Circle	Yes	OUND!	M)	ves, plea	ise ils	t exact	location	18
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- 31) Will alcohol, beer, and/or wine be given away or sold? Circle Yes or No. If yes, a permit from the relevant board is required. Please read Additional Requirements Section of this application for more information.
- 32) Will your event include tents or other temporary structures, propane use, or open flames? Circle yes or ⊕ Events using tents of size 20 x 10 or larger require permitting from Franklin Fire Department. Safety measures must be provided on all tents, especially those set-up prior to the actual event. Tents should be taken down the date the event has ended. Please read Additional Requirements section of this application for more information.
- Attach Good Neighbor Letter and Mailing List used. Please read Additional Requirements section
 of this application for more information.

DISINCISES EFFECTED HAVE BELL NOTIFIED BY

TITLE VI OF THE 1964 CIVIL RIGHTS ACT

"No person in the United States shall, on the ground of race, color, or national origin be excluded from perticipation in, be derived the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance."

The City of Frankin does not discriminate based on race, color or national origin in federal or state sponsored programs, pursuant to Title VI of the Civy Rights Acts of 1964 (42 U.S.C. 2000d). For more information or to file a spinoteint against the City of Frankin limite VI of the 1964 Civy Rights Act, contact the Title VI Coordinator.

Rodney Escober
Flork Manager
City of Franklin
109 Third Avenue South
Franklin, Termeasee 37064
815,791,3277

The City of Francis is coremitted to providing reasonable access and accommodations upon request for people with disabilities.

Please call the Rex Management Department at (615/791-3277 for specific requests.



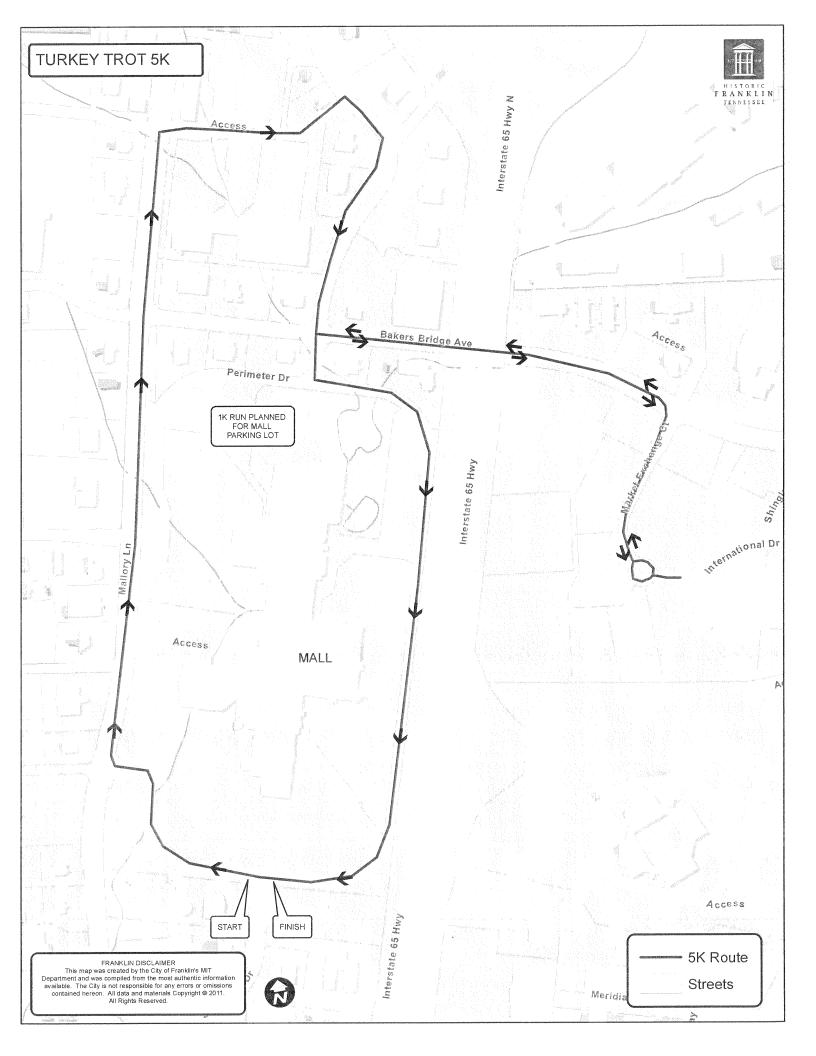
PLEASE READ ATTACHMENTS BEFORE SIGNING APPLICATION.

- 1) We agree to abide by all ordinances and regulations of the City of Franklin and all conditions placed upon the event by the City Administrator and the Board of Mayor and Aldermen.
- 2) We do swear or affirm that all of the information given in this application is true and complete...
- 3) I/We do hereby agree to assume the defense of and indemnify and save harmless the City, its aldermen, boards, commissions, officers, employees and agents, from all suits, actions, damages or claims to which the City may be subjected of any kind or nature whatsoever resulting from, caused by, arising out of or as a consequence of such event and the activities permitted in connection there with, and to submit a certificate of insurance prior to the event in an amount acceptable to the City Administrator.
- 4) I/We agree to provide a copy of this signed Event Application to any vendors, planners, and related parties associated with the event to ensure they are familiar with the guidelines set forth herein.
- 5) I/We understand that I/we assume the responsibility of the actions of any vendors, planners, and related parties for this event.
- 6) I/We understand that granting of Special Event Permit does not imply granting of other permit that is separately required.
- 7) The application for an event permit shall be filed not less than 90 days nor more than 364 days prior to the scheduled date of such event. Suggested filing is at least 180 days prior to scheduled event. Events should not be advertised or promoted until an event permit has been obtained from the City. Failure to file in a timely manner may result in denial of a permit.
- 8) The City reserves the right to require one or more City of Franklin police officers or other emergency personnel be present at any and all events that occur within the city limits. Please budget for this request at a rate of \$30 per hour at a minimum of two (2) hours.

BY: Dust Directorbate: 8/1/19	<u></u>
Approved by the Board of Mayor and Aldermen on	Return application to:
Dr. Ken Moore, Mayor	City Administrator's Office City Hali 109 Third Ave South Franklin, TN 37065
Enc S. Stuckey, City Administrator	615-791-3217 615-790-0469 (FAX)
If you have questions concerning your request, please call \$15-550-6606.	



	FOR (TTY USE	ONLY							
Department	Cate	Initials	Attach Any Comments							
Administration			Comments:	Y68	No					
Business Office			Comments:	Yes						
Codes			Commenter	Yes	, lo					
Engineering			Comments	Y @\$	No					
Fnance			Comments	× × × × × × × × × × × × × × × × × × ×	No					
Fre			Comments		No					
Information Technology			Comments		No					
Law			Comments	Yes	163					
Parks			Comments	Yes						
Planning			Comments	Yes	No					
Police			Comments:	703	i de					
Risk Manager			Comments	Yes	No					
Solid Waste			Comments:	¥08	No					
			Connents	Mary Mary Commencer	No					
//ator/Wastewater			Comments	Yes	l V					



DEPARTMENT OF THE TREASURY

INTERNAL REVENUE SERVICE DISTRICT DIRECTOR P O BOX 2508 CINCINNATI, OB 45201

Date: An 20 mg

GRACEWORES MINISTRIES INC C/O CHERYL A KING PO BOX 436 FWANKLIN, TN 27065-0436

Dear Applicants

This modifies our letter of the above date in which we stated that you would be treated as an organization that is not a private foundation until the expiration of your advance ruling period.

Your exempt status under section 501(a) of the Internal Revenue Code as an organisation described in section 501(c)(3) is still in effect. Based on the information you submitted, we have determined that you are not a private foundation within the meaning of section 509(a) of the Code because you are an organization of the type described in section 509(a)(1) and 170(b)(1)(A)(vi).

Grantors and contributors may rely on this determination unless the Internal Revenue Service publishes notice to the contrary. However, if you lose your section 509(a)(l) status, a grantor or contributor may not rely on this determination if he or she was in part responsible for, or was aware of, the act or failure to act, or the substantial or material change on the part of the organization that resulted in your loss of such status, or if he or she acquired knowledge that the Internal Revenue Service had given notice that your would no longer be classified as a section 509(a)(l) organization

If we have indicated in the heading of this letter that an addendum applies, the addendum enclosed is an integral part of this letter.

Because this letter could help resolve any questions about your private foundation status, please keep it in your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown above.

Sincerely yours.

District Director

Grace Works Ministrics Board Members 2013 (as of 59-13)

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