




HISTORIC
FRANKLIN
TENNESSEE

MEMORANDUM

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:***
 - 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 guarantee that your request will be granted.

Please check
all that apply:

☐ street closure

☐ parade

☒ other special event

☐ beer served (separate permit required)

Please supply the following information. For additional space, use separate sheets of paper and attach to the application.

- 1) Location requested (If Temporary Street Closure only, list major roads to be closed):

_____ Aspen Grove Park

_____ Liberty Park

_____ Eastern Flank Battlefield Park

_____ Fieldstone Farms

_____ Pinkerton Park

_____ Jim Warren Park

_____ Harlinsdale Farm

Other: COOL SPRINGS NAIL SALON

- 2) Name/purpose of event: 2013 TURKEY DROT - FUNDRAISER FOR GRACEWORKS

- 3) Date or dates of event: FRI NOVEMBER 28, 2013

- 4) Time of Event: 8am - 10am

- 5) Time of Street Closure (if applicable): 8am - 10am

Set-Up Date/Time: NOV. 27, 2013 BY 10AM Tear-down Date/Time: NOV. 28, 2013 - BY 10AM

*Note: Two (2) hours will be added before set-up time and two hours (2) will be added after tear-down to allow time for clean-up. Event is responsible for payment of Franklin Police Officers during this time. Read Additional Requirements section for more information.

- 6) Name of Applicant and Organization Requesting Permit:

GRACEWORKS MINISTRIES

a) Address: 104 SOUTHWEST PKWY FRANKLIN, TN 37064

b) Phone: 615-794-9055 c) Cell: 615-473-9559 d) Fax: 615-794-2124

e) E-mail address: ksylvester@graceworksministries.net

- 7) Person in charge on day of event: KORRINE FURR

Cell: 615-425-6212 E-mail address: kkfgrwm@gmail.com



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- 8) Name and Cell Number of at least two others available on day of event:

Name: KRIST SYMONS Cell: 615-473-9599 E-mail address: ksylvester@graceworksinwv.com

Name: TINA EDWARDS Cell: 615-838-9312 E-mail address: tedwards@graceworksinwv.com

- 9) DETAILED description of event (use additional sheets):

5K + 1K FAMILY RUN BENEFITTING GRACEWORKS
ANCHORED @ D1 FACILITY

- 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.* YES

- 11) An estimated number of participants and an estimated number of attendees expected to attend during the course of the event:

3000 PARTICIPANTS + 2000 ATTENDEES = 5000 TOTAL

- 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 Yes or No

(if no, please state where: _____)

- 14) Is your organization authorized to do business in Tennessee? Circle Yes or No

- 15) 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. YES

- 17) Will any charity, gratuity, or offers be solicited or accepted during the event? Circle Yes or No

- 18) Is this event a fundraiser? Circle Yes or No. If yes, what organization will be benefactor of event? What percentage of funds will they receive? GRACEWORKS MINISTRIES

- 19) Will parking in the area of the event need to be restricted or prohibited? Circle Yes or No



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- 20) Will any sound amplification equipment be used during the event? Circle Yes or No. If no, please skip to Question #22.
- 21) For what purpose will sound amplification be used (i.e. announcements, entertainment, etc.)?
N/A
- 22) What type of sound amplification will be provided (DJ, Band, etc.)? Please list all that apply.
N/A
- 23) During what time period is sound amplification requested? N/A
- 24) If for entertainment, give details of entertainment being provided (i.e. number of musicians, type of music, amp wattage, etc.). N/A
- 25) 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.
- 26) What, if any, vendors will be present at event? (i.e. medical related, shirts, arts, etc.) Please provide detailed list. Use additional sheets. N/A
- 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.
- 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.



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- 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 hauler 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. Illegal dumping of cooking grease will be prosecuted. *Please read Additional Requirements section of this application for more information.*
- 30) Will you require a temporary water tap? Circle Yes or No. If yes, please list exact locations:

- 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 No. 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.*
- 33) Attach Good Neighbor Letter and Mailing List used. *Please read Additional Requirements section of this application for more information.*

BUSINESSES EFFECTED HAVE BEEN NOTIFIED BY
LANDLORD - COOL SPRINGS MAPLE

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 participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance."

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

Rodney Escobar
Risk Manager
City of Franklin
109 Third Avenue South
Franklin, Tennessee 37064
615.791.3277

The City of Franklin is committed to providing reasonable access and accommodations upon request for people with disabilities. Please call the Risk Management Department at (615)791-3277 for specific requests.



RESTORED
FRANKLIN
UNIVERSITY

**PLEASE READ ATTACHMENTS BEFORE SIGNING
APPLICATION.**

- 1) I/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) I/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: Justin S. Stuckey, Development Director Date: 8/1/13
(Signature and title - must be officer of organization)

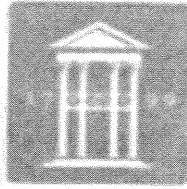
Approved by the Board of Mayor and Aldermen on _____, 20____

Dr. Ken Moore, Mayor

Eric S. Stuckey, City Administrator

If you have questions concerning your request, please call 615-550-8606.

Return application to:
City Administrator's Office
City Hall
109 Third Ave South
Franklin, TN 37065
615-791-3217
615-790-0469 (FAX)

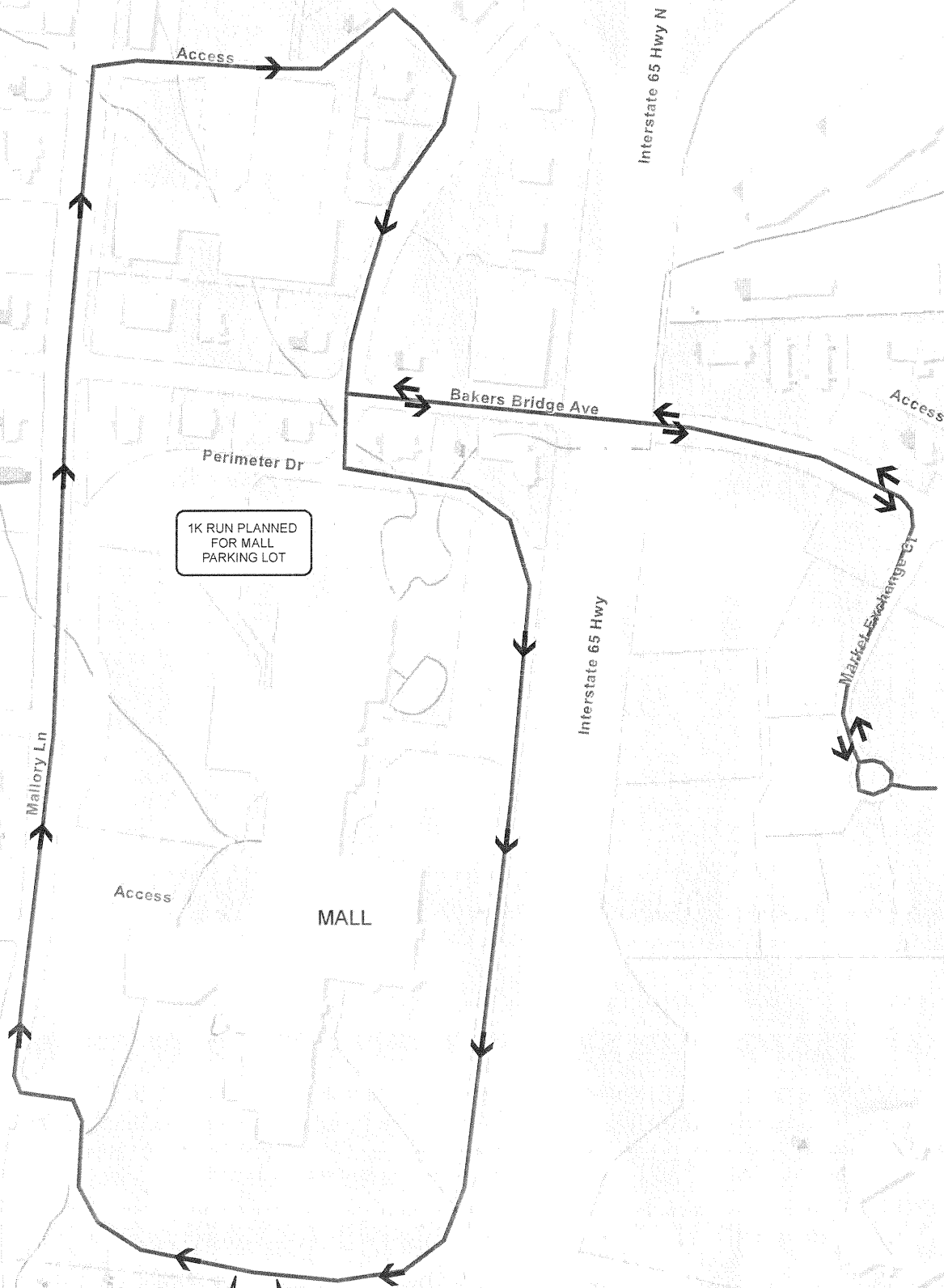


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FOR CITY USE ONLY

Department	Date	Initials	Attach Any Comments
Administration			Comments: _____ Yes _____ No
Business Office			Comments: _____ Yes _____ No
Codes			Comments: _____ Yes _____ No
Engineering			Comments: _____ Yes _____ No
Finance			Comments: _____ Yes _____ No
Fire			Comments: _____ Yes _____ No
Information Technology			Comments: _____ Yes _____ No
Law			Comments: _____ Yes _____ No
Parks			Comments: _____ Yes _____ No
Planning			Comments: _____ Yes _____ No
Police			Comments: _____ Yes _____ No
Risk Manager			Comments: _____ Yes _____ No
Solid Waste			Comments: _____ Yes _____ No
Streets			Comments: _____ Yes _____ No
Water/Wastewater			Comments: _____ Yes _____ No

TURKEY TROT 5K



START FINISH



FRANKLIN DISCLAIMER
 This map was created by the City of Franklin's MIT Department and was compiled from the most authentic information available. The City is not responsible for any errors or omissions contained hereon. All data and materials Copyright © 2011. All Rights Reserved.

— 5K Route
 — Streets

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

DEPARTMENT OF THE TREASURY

Date: MAY 20 1999

GRACEWORKS MINISTRIES INC
C/O CHERYL A KING
PO BOX 438
FRANKLIN, TN 37063-0438

Employer Identification Number:
62-1584204

DLN:

17053093815039

Contact Person:

THOMAS E O'BRIEN

ID# 31167

Contact Telephone Number:

(677) 829-5500

Our Letter Dated:

August 1995

Addendum Applies:

No

Dear Applicant:

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 organization 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)(1) 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 you would no longer be classified as a section 509(a)(1) 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

Letter 1050 (DO/CO)

GraceWorks Ministries Board Members 2013 (as of 5-9-13)

1	Name: Nancy Baughman Employer: Retired 4 th Ave. Ch of Ch Ed. Pastor	Title: President Email: nbaughman@earthlink.net	Address: 1001 Evans St. Franklin TN 37064 Telephone: (615) 804-1634	Spouse: Carl
2	Name: Tim Costello Employer: Costello Construction (Owner)	Title: Vice President Email: tkcostello@aol.com	Address: 1694 Old Hixboro Rd Franklin 37069 Telephone: 468-8348	Spouse: Karen
3	Name: Tom Halsey Employer: Retired Nissan Project Manager	Title: Treasurer Email: tomhalsey@earthlink.net	Address: 1650 Lost Hollow Drive Brentwood 37027 Telephone: (615) 376-4176; (615) 424-3607	Spouse: Susan
4	Name: Susan Ellis Employer: Volunteer	Title: Secretary Email: selis000@aol.com	Address: 1338 Holly Hill Dr Franklin 37064 Telephone: 463-9956	Spouse: Richard
5	Name: Kaitlyn Sales Employer: Wal-Mart Superstore Gen. Manager	Title: Retail Operations Email: kelsales376@earthlink.net	Address: 3606 Mulberry Lane Franklin 37067 Telephone: (615) 771-0920 (C) 430-1193	Spouse: Cynthia
6	Name: James Warren Employer: Ellsworth Systems - President	Title: Property Management Email: james@ellsworthsystems.com	Address: 105 Trace End Drive Franklin 37069 Telephone: (615) 377-8266; (615) 476-1110	Spouse: Ellen
7	Name: John Meyer Employer: Retired Hospital Fundraising	Title: Long Term Donor Development Email: jlm117543@aol.com	Address: 236 Karnes Dr Franklin 37064 Telephone: 784-6897	Spouse: Olinda
8	Name: Donna Choate Employer: Retired designer	Title: Retail Relations Email: lch3508@earthlink.net	Address: 4678 Harpeth Poyensville Rd Thompson Station TN 37178 Telephone: (615) 891-3600 (C) 484-5094	Spouse: Kenneth
9	Name: Linda Decker Employer: Retired Financial Adviser	Title: Long Term Client Programming Email: KLL.D@earthlink.net	Address: 283 Noah Dr Franklin 37064 Telephone: (615) 790-6631 (C) 616-7878	Spouse: Gary
10	Name: Art Herron Employer: Retired LifeWay	Title: Church Relations Email: aherron44@earthlink.net	Address: 3806 New Highway 96 W Franklin 37064 Telephone: (C) 403-4854	Spouse: Jane
11	Name: Carolyn Varga-Moore Employer: HCA, Inc.	Title: Legal Advisor Email: cmoore1029@gmail.com	Address: 805 Meadow Ridge Court Nashville 37221 Telephone: (615) 663-6681 (C) 337-4100	Spouse: Bingle
12	Name: Shelley Corbin Horton Employer: Spring Hill Hospital (Owner)	Title: Events and Fundraising Email: shelleycorbin@earthlink.net	Address: 6261 Main Street (Business) Spring Hill TN 37174 Telephone: 615-616-0022	Spouse: William
13	Name: Bob Rudman Employer: Retired marketing	Title: Marketing Email: frudman72@aol.com	Address: 1426 Primrose Lane Franklin TN 37064 Telephone: (615) 591-6619; (C) 476-8102	Spouse: Martha
14	Name: Jay Chapman Employer: Retired Transportation Industry	Title: Client Programming Email: jchapm32@earthlink.net	Address: 384 Noah Dr Franklin 37064 Telephone: 615-243-7796	Spouse: Jim
15	Name: Cheryl Brown Employer: Good Neighbor Foundation	Title: Community Relations Email: cheryl@homecenter.com	Address: 800 Kilburn Court Franklin TN 37067 Telephone: (C) 970-6160	Spouse: Michael