



HISTORIC
FRANKLIN
TENNESSEE

OFFICE USE ONLY:
Permit No

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: _____

2) Name/purpose of event: Middle TN Ride for Kids

3) Date or dates of event: 5/18/2014

4) Time of Event: 7:00 am - 1:30 pm

5) Time of Street Closure (if applicable): _____

Set-Up Date/Time: _____ Tear-down Date/Time: _____

*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:

PEDEIATRIC BRAIN TUMOR FOUNDATION

a) Address: 352 Ridgefield Cir Asheville, NC 28806

b) Phone: 828-685-6891 c) Cell: 828-280-0630 d) Fax: 828-685-6894

e) E-mail address: JHARVEY@RideforKids.org

7) Person in charge on day of event: MAX Pilschlerfeld

Cell: 828-242-8729 E-mail address: mmuhlenfeld@RideforKids.org



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

Name: OTIS Bishop Cell: 615-417-6847 E-mail address: otis@bishopplacement.com

Name: CATEY HEAVINING Cell: 678-576-9893 E-mail address: MTNRIDE@SSEYARD.COM

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

Metastatic Brain Tumor Event. Riders and Local Brain Tumor Survivors and their families gather to have a family friendly excursion on the hills. This is a public spirited event to raise funds and awareness to one of the deadliest forms of childhood cancer.

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:

350 - 400

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: _____) Asheville, NC.

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. No - Free will Donations are accepted.

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? 100% of funds raised will go Directly to the Pediatric Brain Tumor Foundation.

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



- 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.)?
Announcements and background music.
- 22) What type of sound amplification will be provided (DJ, Band, etc.)? Please list all that apply.
DJ provides amp and speakers.
- 23) During what time period is sound amplification requested? 8:00 AM - 1:00 PM.
- 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.
- 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. LOCAL EVENT VOLUNTEERS
- 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 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.*

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 Acts 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.



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**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: *Donald W. [Signature]* CFO/Sec Date: 12/6/13
 (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 615-550-6606.

 *
 * **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

Local Volunteer Ride for Kids Task Force Leaders;

Catey Henning

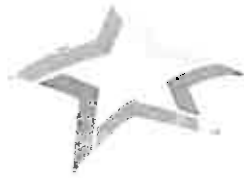
5207 Bob Wilkes Rd.
Springfield, TN 37172
C: (615) 433-4103 (C)
mtnrider55@yahoo.com (C)

Otis & Tina Bishop

1112 Ithaca St.
Murfreesboro, TN 37130-9515
H: (615) 367-6177
C: (615) 417-6847 (O)
C: (615) 714-8064 (T)
E: tina@bishopplacement.com
E: otis@bishopplacement.com

Jack & Anita Wheeler (R)

1984 Burke Hollow Rd.
Nolensville, TN 37135
H: (615) 804-9342
C: (615) 943-4327 (J)
C: (615) 804-9342 (A)
W: (615) 627-4646x306 (J)
W: (615) 627-4648x304 (A)
E: jack@mtrnashville.com (J)
E: anita@mtrnashville.com (A)



**Pediatric Brain Tumor
Foundation**

Executive Officers and Board of Directors

Executive Officers

Chris Hoefflin, Chair
President, Hoefflin Enterprises, Inc.
Santa Clarita, CA
chris@hoefflin.net
661-250-4525

Robin Boettcher, President
President/CEO, PBTF
Asheville, NC
rboettcher@curethekids.org
828-242-0074

Glenn Wilcox, V. President
President/CEO, Wilcox World Travel & Tours
Asheville, NC
gwwilcox@wilcoxtravel.com
828-253-1003

Don Goden, Secretary
Chief Financial Officer, PBTF
Asheville, NC
dgoden@curethekids.org
828-665-6891 x314

Jack McGinnis, Treasurer
Senior Partner, Brooks, McGinnis & Company,
LLC
Roswell, GA
jmcginnis@brooksmcginnis.com
404-531-4940

Board of Directors

Neil Bookman
Realtor, Keller William Real Estate
Blue Bell, PA
neilbookman@kw.com
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Wayne Toyota
Senior Manager, Advertising & Press, American Honda
Motor Co.
Torrance, CA
wayne_toyota@ahm.honda.com
310-418-0373

*Executive Committee member



Department of the Treasury
Internal Revenue Service

P.O. Box 2508
Cincinnati OH 45201

In reply refer to: 0248206044
Aug. 27, 2010 LTR 4168C E0
58-1966822 000000 00

00016520
BODC: TE

PEDIATRIC BRAIN TUMOR FOUNDATION
OF THE UNITED STATES INC
302 RIDGEFIELD CT
ASHEVILLE NC 28806-2210

017905

Employer Identification Number: 58-1966822
Person to Contact: Ms. Smith
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Aug. 18, 2010, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in August 1992.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

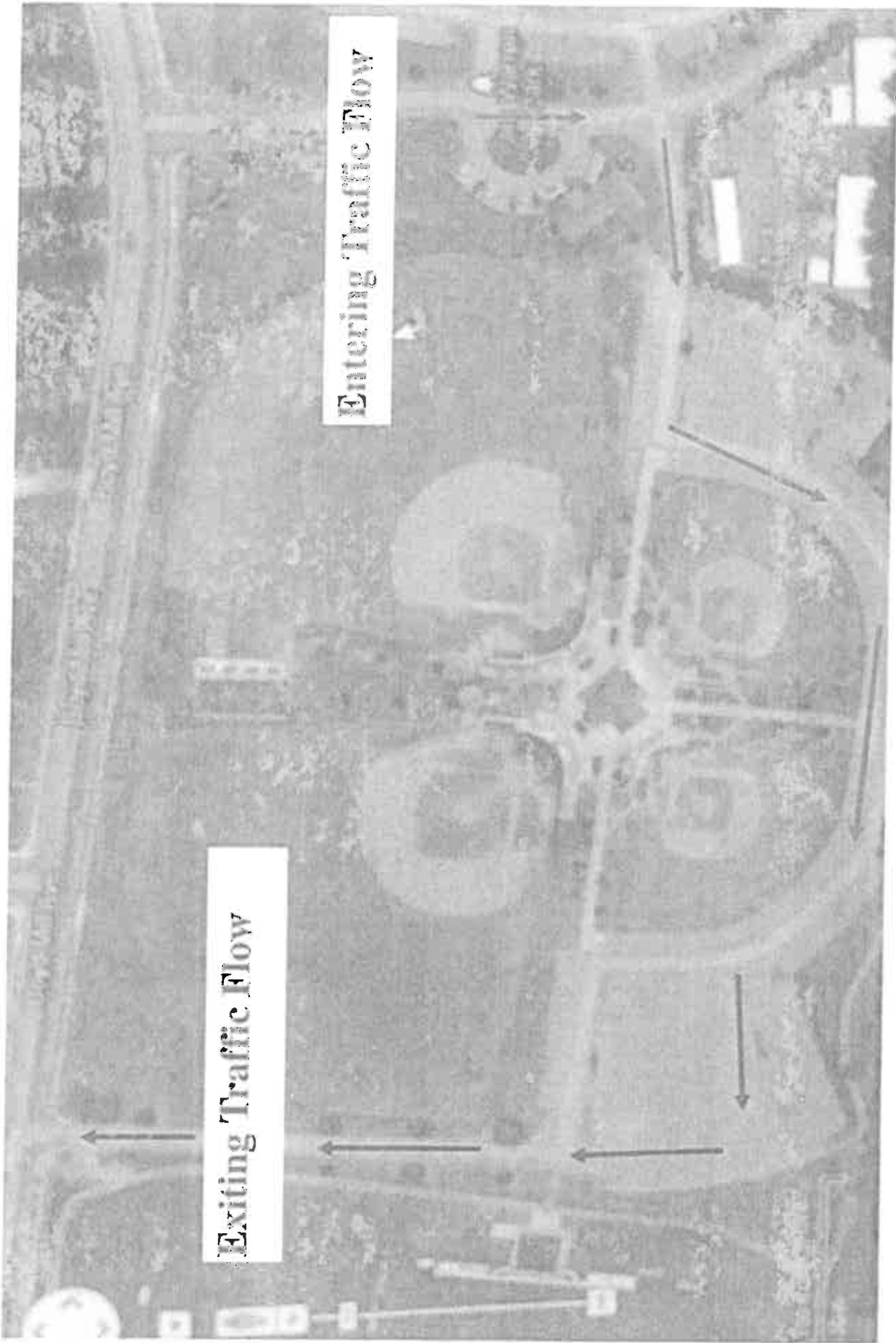
Michele M. Sullivan, Oper. Mgr.
Accounts Management Operations I

2014 Middle TN Ride for Kids® Route

Starting Point – Jim Warren Park, 705 Boyd Mill Avenue, Franklin Tennessee

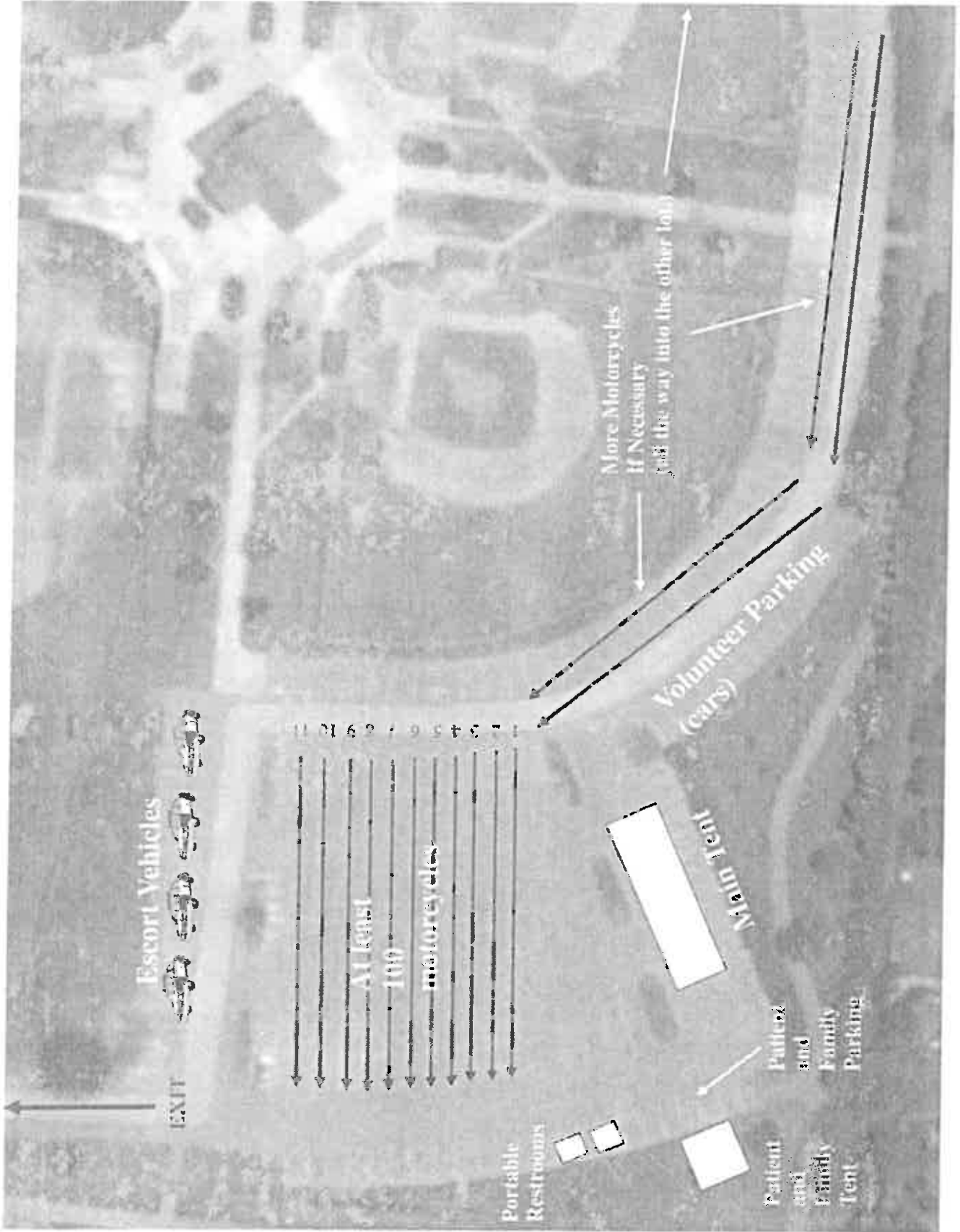
1. Exit Jim Warren Park turning Left (West) on Boyd Mill Avenue, for 0.6 miles
2. At Downs Blvd, turn Left (south) onto Downs Blvd. for 1.2 miles
3. At W. Main St, turn Right (south-west) onto SR-246 (west main) for 4.9 miles
4. At Bear Creek Rd. turn Right (west) and continue on Bear Creek Rd for 5.0 miles
5. At Robinson Rd, Thompson Station, turn Right onto Robinson Rd. for .2 miles
6. At Leipers Creek Rd, turn Left (south) onto SR-46 Leipers Creek Rd) for 2 miles, continue thru intersection (south) on Leipers Creek Rd for 7.0 miles
7. At SR-7, Santa Fe, TN, turn Right (west) onto SR-7 (Leipers creek rd) for 1.8 miles
8. At Natchez Trace Pkwy entrance ramp, turn Right for 0.1 mile (About MM # 416)
9. At Natchez Trace Pkwy, Santa FE, TN turn Left (north/east) onto Natchez Trace Pkwy for 21.8 miles
10. Take Natchez Trace Pkwy exit to SR-96 for 0.6 miles
11. At SR-96, Franklin, TN turn right (east) onto SR-96 for 7.8 miles
12. At Boyd Mill Avenue turn Right for 0.3 miles
13. At Jim Warren Park, turn Left into park.

Ending Point - Jim Warren Park, 705 Boyd Mill Avenue, Franklin Tennessee



Exiting Traffic Flow

Entering Traffic Flow



Tre Hargett, Secretary of State
State of Tennessee



Division of Charitable Solicitations and Gaming
312 Rosa L. Parks Avenue, 8th Floor
Nashville, Tennessee 37243-0305

Brent Culberson
Director

615-741-2555
Brent.Culberson@tn.gov

July 16, 2013

Donald Goden, CFO
Pediatric Brain Tumor Foundation of the United States, Inc.
302 Ridgely Court
Asheville, NC 28806

RE: **APPROVAL** - Registration to Solicit Funds for Charitable Purposes
Pediatric Brain Tumor Foundation of the United States, Inc. - CO3308
Registration Expiration Date: **June 30, 2014**

Dear Donald Goder:

Pursuant to Tenn. Code Ann. § 48-101-501, *et seq.*, the Division of Charitable Solicitations and Gaming has reviewed your submitted application and is pleased to announce your organization's registration to solicit contributions has been approved.

With this approval, your organization has new responsibilities for maintaining statutory compliance, including submission of the proper documents and required fees on an annual basis. The required filings include:

- Completed *Application to Renew Registration* form
- Completed *Summary of Financial Activities* form
- IRS determination letter granting tax-exempt status, if not previously filed
- IRS Form 990, Form 990EZ, or 990N for the most recently completed accounting year, if the organization qualifies as tax-exempt
- An audited financial statement if the organization grossed more than \$500,000 in revenue
- Any amendments to the organization's governing documents

The *Application to Renew Registration* and *Summary of Financial Activities* forms are available on our website at www.tn.gov/sos/charity. Additionally, the "CO" number listed above will serve as your organization's identification number specific to this division and should be included on all correspondence.

Please also be advised that if the organization's application or other provided information includes false, misleading or deceptive statements, appropriate action will be taken. Pursuant to the Tennessee Charitable Solicitations Act, a civil penalty of up to five thousand dollars (\$5,000) may be assessed for any violation.

Thank you for registering your organization and please do not hesitate to contact us with any questions.

Sincerely,

Brent Culberson, Director
Division of Charitable Solicitations and Gaming

FA:JC:CO3308




HISTORIC
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TENNESSEE

Item # 05
Worksession
01/28/2014

MEMORANDUM

January 16, 2014

TO: Board of Mayor and Aldermen

FROM: Eric Stuckey, City Administrator 
Special Events Advisory Team

SUBJECT: Ride for Kids (May 18, 2014)

Purpose

The purpose of this memorandum is to outline recommendations for the Ride for Kids event on May 18, 2014.

Background

The Ride for Kids is a motorcycle event benefiting the Pediatric Brain Tumor Foundation. Organizers would like to request the use of Jim Warren Park for the event on Sunday, May 19th. Estimated attendance is 400. Riders gather and register at Jim Warren Park between 7 a.m. and 9:45 a.m. The ride leaves at 10 a.m. and returns around 11:15 a.m. The only portions of the ride in the City limits of Franklin are Boyd Mill Avenue; Downs Blvd; and West Main Street.

Recommendation

Staff recommends approval with the following conditions:

- Applicant will provide a \$1,000 refundable damage deposit to City prior to event.

Risk Management:

- Applicant will provide certificate of insurance naming the City as additional insured.

Police Department:

- Applicant will hire three (3) extra-duty officers.
- Applicant will work with the Williamson County Sheriff's Office for assistance outside the City limits.

Parks Department:

- Amplification/sound system usage between 8 a.m. and 1 p.m. Speakers must face parking lot to the north.
- Tents may be erected on Friday and must come down by the following Monday. Insurance Certificate should reflect this.
- Tents may not be "staked" in parking lot but weighted with water barrels.
- Parks staff will be onsite during the event at a cost to applicant of \$25 per hour (from 7 a.m. – 12 Noon).
- All other coordinating regarding the Ride will be done with the Programming Division at the Parks Department, including a pre-event meeting onsite and any possible fees required with the event.