



HISTORIC  
FRANKLIN  
TENNESSEE

ITEM #5  
WRKS  
06/24/14

## MEMORANDUM

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June 12, 2014

**TO:** Board of Mayor and Aldermen

**FROM:** Eric Stuckey, City Administrator  
Special Events Advisory Team

**SUBJECT:** Franklin 4 the Cure Event Application

### Purpose

The purpose of this memo is to outline recommendations for the Race 4 the Cure 5K in Westhaven scheduled for September 20, 2014.

### Background

The Westhaven Foundation has requested street closures for the Franklin 4 the Cure 5K run in Westhaven. This is an annual event with 100 percent of the proceeds benefitting the Monroe Carrell Jr. Children's Hospital at Vanderbilt. Estimated attendance is 750.

### Recommendation

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

- Applicant has provided a \$1,000 refundable damage deposit.
- Applicant will provide a Good Neighbor letter which will be distributed to affected neighborhoods.
- **Revenue Management:**
  - Applicant will need to obtain special event beer permit from Beer Board.
- **Risk Management:**
  - Applicant will provide certificate of insurance naming the City as additional insured.
- **Police Department:**
  - The Police Department will recommend 5 Officers, 2 Bike Officers & 1 Supervisor (total of 8) to secure the route for this event. If there is a kid's area, 1 additional officer will be recommended to cover this area during the event.
  - Applicant will hire the recommended number of extra-duty Franklin Police Officers to open/close streets and to provide security and traffic control.
- **Sanitation and Environmental Services Department:**
  - Applicant will utilize volunteers to provide trash/garbage pick-up.
  - Department will provide 15-20 rollout containers and recycle bins, if needed. The containers will be delivered the day before the event.





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

Name: Nicole Cunningham Cell: 584-0485 E-mail address: hailysmomet@hotmail.com

Name: Doug Stacey Cell: 533-3358 E-mail address: dougstacey@lsipros.com

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

5K through community (see map)  
Sponsor tables, music on Front Street after race  
See attached schedule of events

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:

750 participants / attendees

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. Race registration \$25 for adults \$15 for children

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%

Monroe Carrell Jr. Children's Hospital at Vanderbilt

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 music during / after event.
- 22) What type of sound amplification will be provided (DJ, Band, etc.)? Please list all that apply.  
MC and Acoustic Music
- 23) During what time period is sound amplification requested? 7:30 am - 10:00 am
- 24) If for entertainment, give details of entertainment being provided (i.e. number of musicians, type of music, amp wattage, etc.).  
No Band
- 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. Vanderbilt Paramedics & Sponsors
- 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.  
Volunteer Committee will clean up
- 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:

No

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. Only small canopy tents*

33) Attach Good Neighbor Letter and Mailing List used. *Please read Additional Requirements section of this application for more information. Letter will be emailed to all Westhaven homeowners, renters, and Town Center business owners.*

**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:

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: Ag Law, Treasure of Westhaven Foundation Date: 4.24.14  
 (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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### **Franklin 4 the Cure Event Description**

This event is scheduled for Saturday, September 13, 2014 in the Westhaven Community.

The event schedule is as follows:

6:30 am- Participants will check in and register

7:30 am – 5K Begins

8:15 am- 5k Ends

8:15 – 10:00 am- Music, children's activities, pancake breakfast, etc. on Front Street

Proceeds from the event benefit Monroe Carell Jr. Children's Hospital at Vanderbilt.



Draft of Good Neighbor Letter for Franklin 4 the Cure

(Insert Date)

Dear neighbor of Westhaven,

I wanted to let you know about an event called Franklin 4 the Cure, which is taking place in Westhaven on Saturday, September 13, 2014 from 7:30am until 10:00am. This is an annual event that includes a 5K run/walk through the community (map of route is attached).

We request that residents who live on the race route refrain from parking cars on the street that morning. Also, the roads will be blocked off during the actual race but will open up as the participants move through the course.

After the 5K, there will be music, games, and a pancake breakfast on Front Street. A portion of Front Street will be closed to through traffic from 7:00 am until 10:00 am. The event will end at 10:00 am. A cleanup crew will return the event areas back to their original condition.

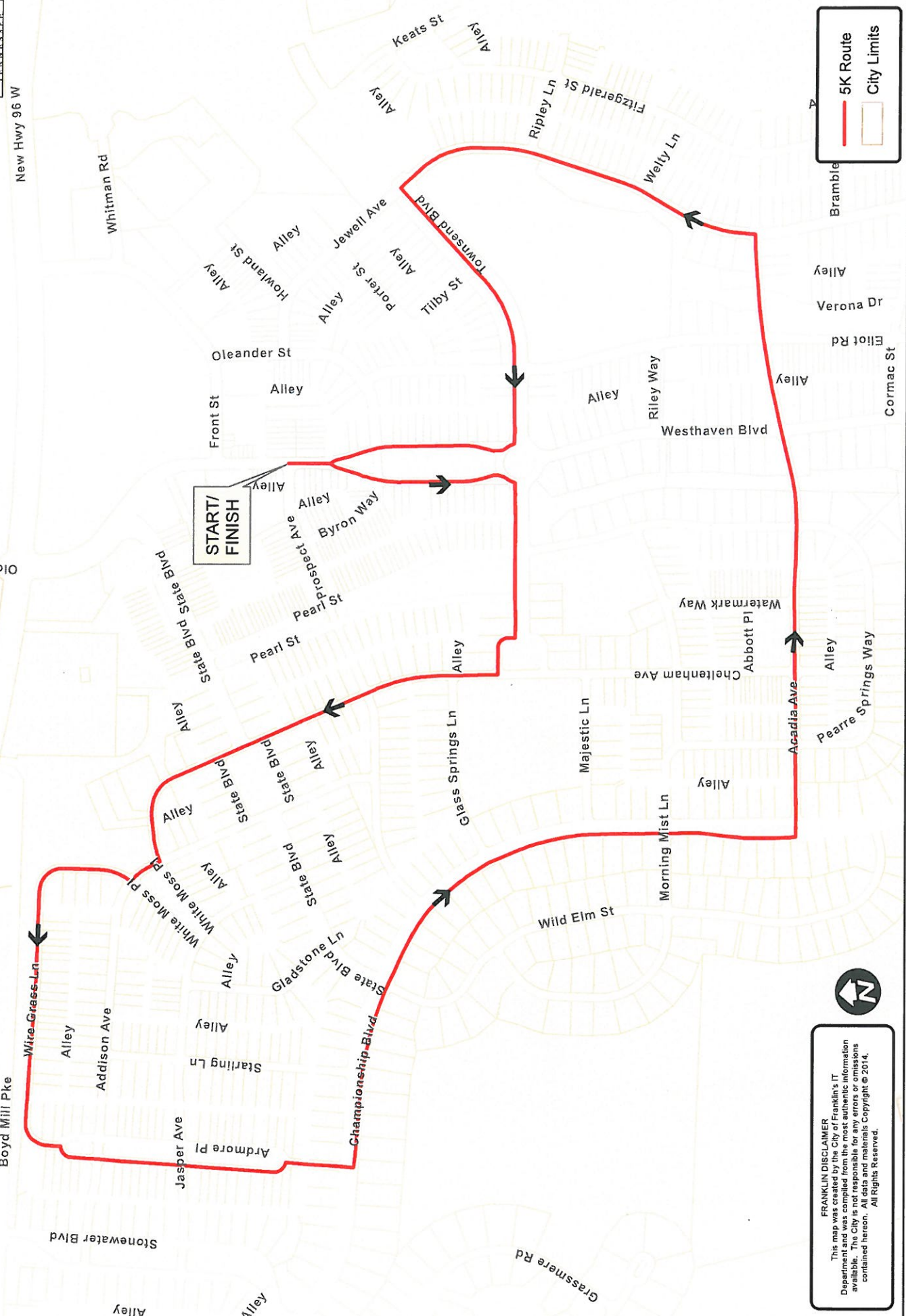
If you have any questions, please feel free to contact Amy Law at 615-791-6740.

Best regards-

Amy Law  
Director of Community Management  
Southern Land Company



# Race 4 the Cure 5K



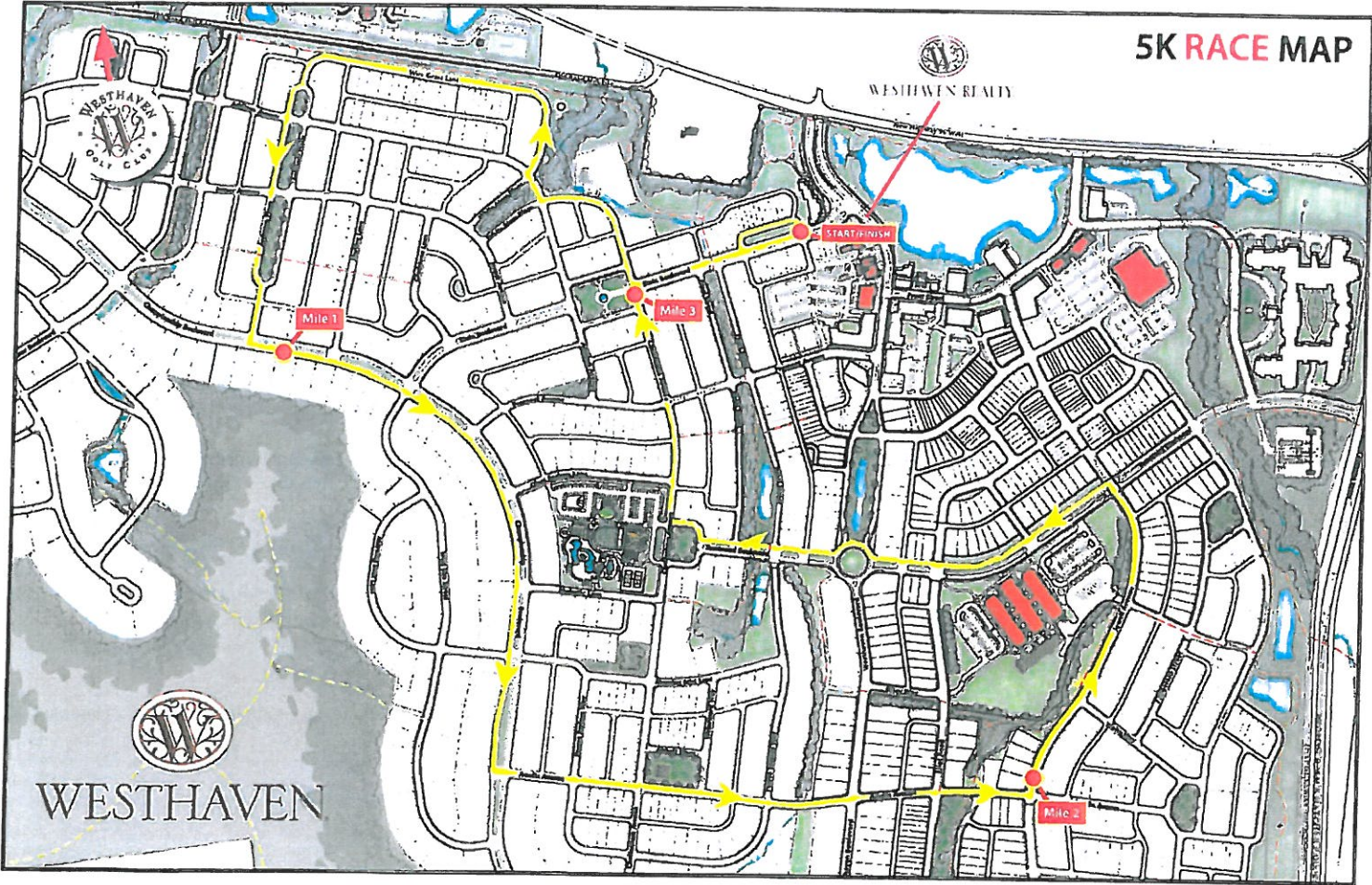
**START/  
FINISH**

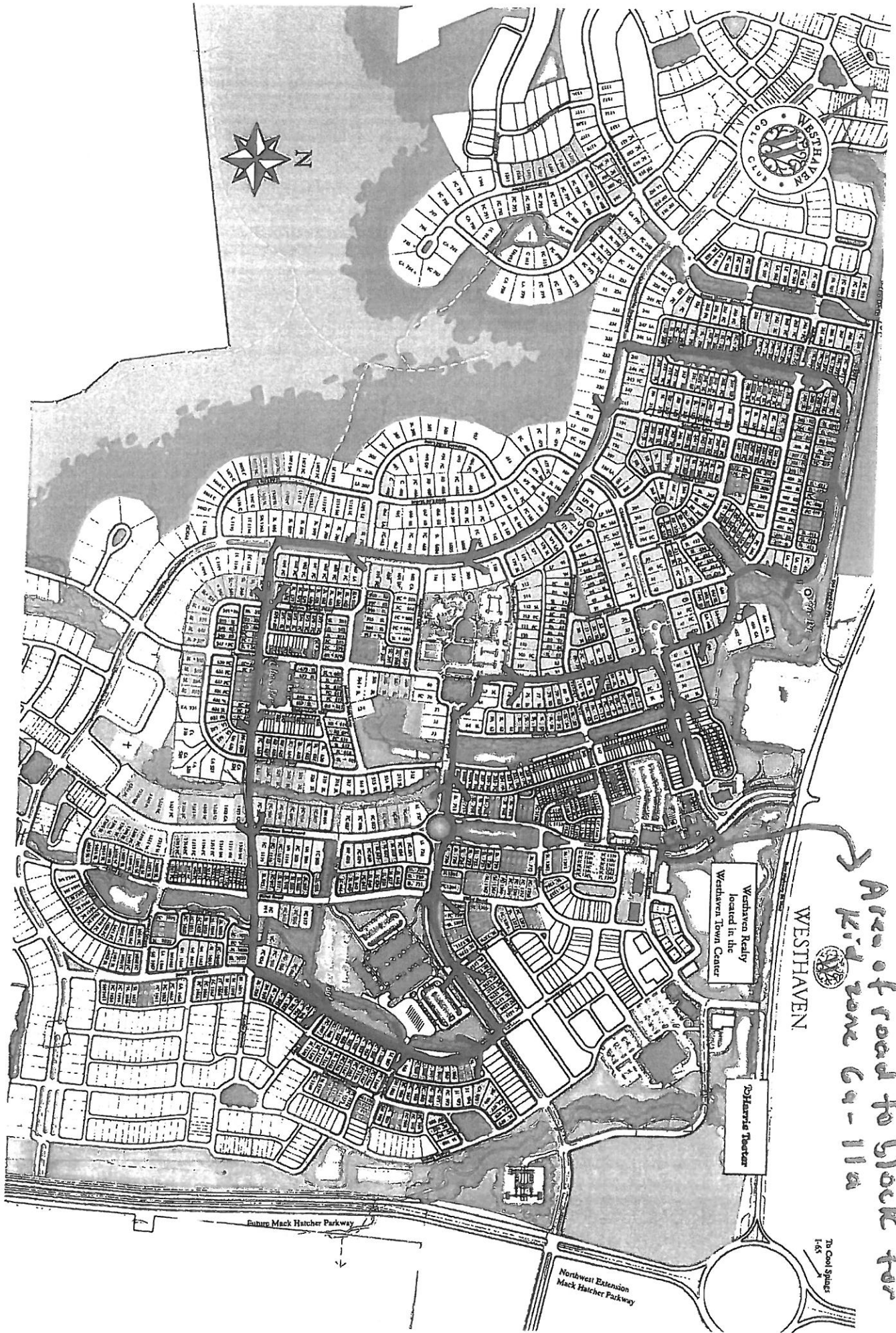
5K Route  
 City Limits



**FRANKLIN DISCLAIMER**  
 This map was created by the City of Franklin's IT Department and was compiled from the most authentic information available. The City is not responsible for any errors or omissions contained herein. All data and materials Copyright © 2014. All Rights Reserved.

5K RACE MAP





Black = SR Route

Area of road to block for  
Pk'd zone Ca-11a

WESTHAVEN

Westhaven Ready  
located in the  
Westhaven Town Center

Doherty's Theater

Future Mack Hatcher Parkway

Northwest Extension  
Mack Hatcher Parkway

The Coal Spines  
L&S

## The Westhaven Foundation Board Members

Mark McCutcheon- President of Westhaven Foundation  
1900 Townsend Boulevard  
Franklin TN 37064  
615-394-7782

Charlie Grimes- Vice President of Westhaven Foundation  
310 Cheltenham Avenue  
Franklin TN 37064  
615-218-1501

Matt Magallanes- Vice President of Westhaven Foundation  
514 Ardmore Place  
Franklin TN 37064  
(615) 483-7547

Dina Kraus- Secretary of Westhaven Foundation  
118 Addison Avenue  
Franklin TN 37064  
615-790-7946

John Fraser- Treasurer of Westhaven Foundation  
1306 State Boulevard  
Franklin TN 37064  
615-790-1866

### Other Board Members

John Griffith  
Daniel Klatt  
Amy Law  
Doug Stacey  
Anne Waters  
Victor White



# TENNESSEE DEPARTMENT OF REVENUE

## Certificate of Exemption

THE WESTHAVEN FOUNDATION, INC.  
401 CHELTENHAM AVE  
FRANKLIN TN 37064-8664



March 16, 2010

Account Type: S&U EXEMPT

Account No.: 780286648

Under the provisions of T.C.A. Section 67-6-322, the organization named above is granted authority from the Tennessee Department of Revenue to make purchases, without payment of the Sales or Use Tax, of tangible personal property or taxable services to be used or consumed by the organization itself or to be given away.

The organization must furnish the suppliers of goods and services with a COPY of this exemption certificate. The lower portion of the certificate must be properly completed. The organization MUST retain the original certificate for copy purposes. The supplier will maintain a file copy as evidence of exemption. Later purchases do not require the submission of additional copies. Invoices must contain the name of the organization and the number given above.

This authority does not extend to purchases made by representatives of the organization when the items purchased or services rendered are paid for with personal funds. It does not extend to items purchased to be resold.

THE ORGANIZATION MUST NOTIFY THE DEPARTMENT IMMEDIATELY IF IT CEASES TO EXIST, MOVES, OR IN ANY WAY CHANGES THE ORGANIZATION FROM ITS PRESENT FORM.

EFFECTIVE DATE February 22, 2010

**Reagan Farr**  
COMMISSIONER OF REVENUE

TO BE COMPLETED BY THE ORGANIZATION (please print)

TO: SUPPLIER'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

I, \_\_\_\_\_ as an authorized representative of the organization named above affirm that the purchases made under this authority will be used and consumed by the organization or will be given away. I further affirm that the organization will not use this authority to purchase items for resale.

Under penalty of perjury, I affirm this to be a true and correct statement.

PRINT NAME OF ORGANIZATION: \_\_\_\_\_

PRINT NAME OF PURCHASER: \_\_\_\_\_

SIGNATURE OF PURCHASER: \_\_\_\_\_