ITEM #24
BOMA
07/08/14

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 ap	plication does not quarante	ee that your request will be granted.
	Please check all that apply:	☐ street closure	□ parade
	an triat apply.	☑ other special event	□ beer served (separate permit required)
Ple	ase supply the following	nformation For additional space	e, use separate sheets of paper and attach to the application
1)	Location requeste	d (if Temporary Street Clos	ure only, list major roads to be closed):
	Aspen Grove P		Park
	Jim Warren Pa	rkHarlinsdale	Farm Other: Cool Springs More Ands
2)	Name/purpose of e	event: 2014 TURKEY D	LOT BONEFITTING GRACEWORKS
3)	Date or dates of ev	ent: November 27	, 2014
4)	Time of Event:	6 pm - 10pm	
5)	Time of Street Clos	sure <i>(if applicable)</i> :&_	m-10am
	Set-Up Date/Time:	NOV. 26, 2014 84 10PM	1 Tear-down Date/Time: Nov. 27, 2014 64 10 mm
			(2) will be added after tear-down to allow time for clean-up. Event is Read Additional Requirements section for more information.
6)	Name of Applicant	and Organization Requesti	ng Permit:
	Gen	ELACKS MINISMIC	5
	a) Address:/0°	1 SOUTHERST PKWY	FRANKLIN, TN 37064
	b) Phone: <u>615-79</u>	74 -9055 c) Cell: <u>6/5</u>	-423-4559 d) Fax: 615-794-2174
	e) E-mail address:	Ksylvester @ grace	worksministries, net
7)	Person in charge o	n day of event: <u> Conn</u>	IND FUOVA
	Cell: 615-425	-6312 E-mail ad	dress: <u>kkfqwm@qmail.com</u>

	HISTORIC
8)	Name and Cell Number of at least two others available on day of event: FRANKLIN TENNESSEE
	Name: Koleri Sulverte Cell: 1/5-43-9599 F-mail address: Vollvester Gorgon ortes
	Name: Tina Evinos Cell: US-838-9332 E-mail address: fedurals @ gracewarks ministrics net
9)	DETAILED description of event (use additional sheets): 5K + K FAMYY RUN BENEFITTING GRACEWORKS ANCHORED AT DI FOCUTY
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 PRATICIPANTS + 2000 ATTONDEES = 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 (es 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 (esor 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 Yesor No.
18)	Is this event a fundraiser? Circle (Jesor No. If yes, what organization will be benefactor of event? What percentage of funds will they receive?



Will any sound amplification equipment be used during the event? Circle vesor No. If no, FRANKLII 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?
24)	If for entertainment, give details of entertainment being provided (i.e. number of musicians, type of music, amp wattage, etc.).
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.
	4B- IN HOUSE CLEAN-UP @ DI
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

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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.

BUSINESS EFFECTED WILL BE NOTIFIED & CROSTED BY

COOL SPRINGS MAN MANAGEMENT

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 1984 (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.

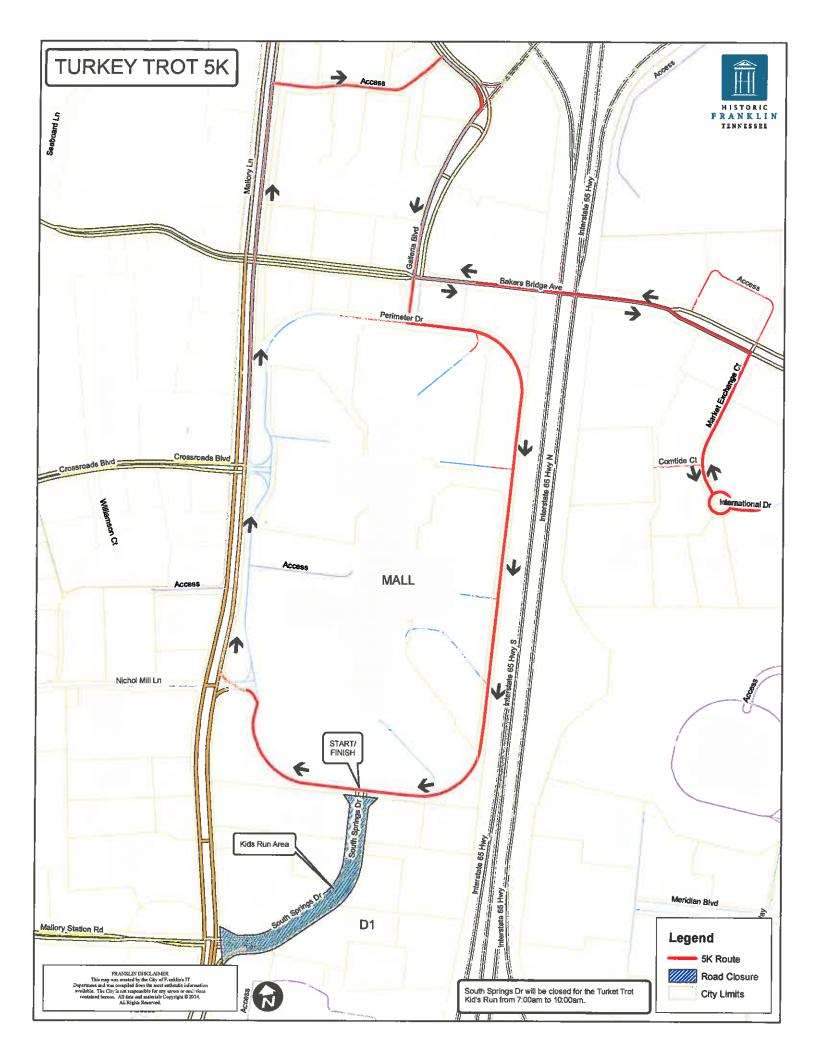


PLEASE READ ATTACHMENTS BEFORE SIGNING APPLICATION.

- 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: Signature and title must be officer of organization) Date: 5/5/	14

Approved by the Board of Mayor and Aldermen on, 20	Return application to:
	City Administrator's Office
Dr. Ken Moore, Mayor	City Hall 109 Third Ave South Franklin, TN 37065
Eric S. Stuckey, City Administrator	* 615-791-3217 * 615-790-0469 (FAX) *
If you have questions concerning your request, please call 615-550-6606.	* * * * * * * * * * * * * * * * * * * *



DEPARTMENT OF THE TREASURY

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

Date: MAY 20 1998

GRACEWORKS MINISTRIES INC C/O CHERYL A KING PO BOX 438 FRANKLIN, TN 37065-0438 Employer Identification Number:
62-1584204
DLN:
17053093815039
Contact Person:
THOMAS E O'BRIEN ID# 31187
Contact Telephone Number:
(877) 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

_	Name: Nancy Baughman	Title: President	Address: 1001 Evans St. Franklin TN 37064	
1	Employer: 4" Ave. Ch of Christ Exe. Minister	Email: nanbaughman@gmall.com	Telephone: (M) 604-1524	Sponso. Con
7	Name: Tim Costello	Title: Vice President	Address:1694 Old Hillsboro Rd Franklin 37069	opodae. call
	Employer: Owner, Costello Construction	Email: itcksc@yahoo.com	Telephone: 456-5349	Spoileo. Kaman
က	Name: Tom Hailey	Title: Secretary/Treasurer	Address: 1550 Lost Hollow Drive Brentwood 22027	chorasi narah
	Employer: Nissan Project Manager, retired	Email: tomhailey@hotmail.com	Telephone: (H) 376-4175: (C) 424-3607	0
4	Name: Mark Leueilen	Title:	Address:	chonse: onsau
	Employer: Financial Advisor, Edward Jones	Email:	Telephone:	Sporing.
જ	Name: Kelvin Sales	Title: Retail Operations	Address: 3600 Mallory Lane Franklin 37067	
	Employer: Wal-Mart Superstore Gen. Manager	Email: kelsales325@bellsouth.net	Telephone: (W) 771-0929 (C) 430-1193	Chouse Constitution
9	Name: James Warren	Title: Property Management	Address: 103 Trace End Drive Franklin 37069	oponaci cyani
	Employer: President, Ellsworth Systems	Email: james@elisworthsystems,com	Telephone: (H) 377-9265; (C) 479-1118	Spolice Files
_	Name: John Meyer	Title: Long Term Donor Development	Address: 236 Karnes Dr Franklin 37064	
	Employer: Hospital Donor Development, retired	Email: jrm17543@att.net	Telephone: 794-6897	Sport of State of Sta
œ	Name: Donna Choate	Title: Retail Relations	Address: 4678 Harneth Peytonsville Rd Thomason Station Th	27420
	Employer: HR Manager, HVL Packaging, retired	Email: kdchoate@yahoo,com	Telephone: (H) 591-3660 (C) 484-5094	Shouse: Kenneth
on .	Name: Linda Decker	Title: Long Term Client Programing		
Ī	Employer: Entrepreneur & Financial Advisor, retired	Email: K4LLD@comcastnet	Telephone: (H) 790-6631 (C) 516-7878	Spouse: Gary
10	Name: Tami Harris	Title;	Address:	
	Employer: Web-Customer Experience Marketing Mgr., Magazines Inc.	Email: tn4ua@yahoo.com	Telephone:	Spouse:
11	Name: Carolyn Verga-Moore	Title: Legal Advisor	Address: 805 Meadow Ridge Court Nashville 37221	
1	Employer: Senior Claims Supervisor, HCA, Inc.	Email: cmoore 1029@gmail.com	Telephone: (H) 662-9651; (C) 337-4100	Spouse: Single
12	Name: Terry Appenzeller	Title:	Address:	5
	Employer: Vice Pres., Strategic Planning & Govt Affairs, AT&T, retired	Email:	Telephone:	Spouse:
ر ا دی	Name: Bob Rudman	Title: Marketing	Address: 1428 Primrose Lane Franklin TN 37064	:
	Employer: Marketing for NBC, Johnson & Johnson, refired	Email: rrudman273@aol.com	Telephone: (H) 591-5819; (C) 476-9102	Spouse: Martha
4	Name: Cheryl Brown	Title: Community Relations	Address: 500 Kilburn Court Franklin 37067	
	Employer: Exec. Director, Good Neighbor Fdtn.	Email: Cheryl@homeowncenter.com	Telephone: (C) 870-6168	Spouse: Michael
15	Name	Title:	Address:	



June 12, 2014

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 27th (Thanksgiving Day). The event begins and ends at D1 Sports. Estimated attendance is 3,000 participants and 2,000 attendees. The route includes the Galleria Blvd, Mallory Lane, and Bakers Bridge. Street closure is from 6 a.m. until 10 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.
- Applicant will coordinate with management of Cool Springs Galleria.

• Risk Management:

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

• Police Department:

- o Applicant will hire 8 Officers plus 1 Supervisor (total of 9) to secure the route.
- o Event participants/spectators should not be allowed to park in the lower level parking lots.
- o No parking in Brew House South lot unless they are remaining for the duration of the event.
- Event coordinator should notify all hotels that will be affected by the route.
- o Event coordinator should discuss and coordinate with Prairie Life Fitness their southern entrance which may not be accessible as an entrance/exit during the hours of the event.

• Sanitation and Environmental Services Department:

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