

OFFICE USE ONLY
Permit No.

ITEM #30
BOMA
06/10/14



HISTORIC
FRANKLIN
TENNESSEE

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:
- | | |
|--|--|
| <input checked="" type="checkbox"/> street closure | <input type="checkbox"/> parade |
| <input type="checkbox"/> other special event | <input type="checkbox"/> beer served (<i>separate permit required</i>) |

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: <u>Healthways in Cool Springs</u> |

2) Name/purpose of event: Best Buddies 5K

3) Date or dates of event: August 23, 2014

4) Time of Event: 5K run and walk fundraiser

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

Set-Up Date/Time: 6:00 am Tear-down Date/Time: 9:00 am

*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:

Start 2 Finish and Best Buddies of Tennessee

a) Address: 1712 Hillsboro Rd Franklin TN 37069

b) Phone: 803-5936 ↔ c) Cell: 567 6671 d) Fax: _____

e) E-mail address: kat@s2fnashville.com

7) Person in charge on day of event: Katherine Williams

Cell: 803 5936 E-mail address: Kat@s2fnashville.com



HISTORIC
FRANKLIN
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- 8) Name and Cell Number of at least two others available on day of event:
Name: Margaret Marchetti Cell: 504-6713 E-mail address: margaretmarchetti@bestbuddies.org
Name: Anneliese Barron Cell: 483-3177 E-mail address: anneliese.barron@bestbuddies.org
- 9) DETAILED description of event (use additional sheets):
5K run and walk to raise funds and awareness of Best Buddies of Tennessee. The run/walk will start and ~~end~~ finish at Heathways in Cool Springs. The set up and post race will be in the parking lot.
This is the 6th year.
- 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:
800 - 1,000
- 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. OK
- 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, 20-\$30 per runner
- 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?
Best Buddies of Tennessee
- 19) Will parking in the area of the event need to be restricted or prohibited? Circle Yes or No.



HISTORIC
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TENNESSEE

- 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
- 22) What type of sound amplification will be provided (DJ, Band, etc.)? Please list all that apply.
DJ | Announcer and music / Radio
- 23) During what time period is sound amplification requested? 6:00 - 8:00
- 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. Yes 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. OK - will provide 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.) yes, will provide 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.
free post race food. Volunteers | start & finish will oversee
- 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.



HISTORIC
FRANKLIN
TENNESSEE

- 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:

private tap at Heathways

- 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.* ok

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: *Katherine Williams* Date: *March 26 2014*
(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

Best Buddies 5K Franklin, TN

Start/Finish/Mile Descriptions

START On Carothers Pkwy, 37'9" past storm inlet on right, before Cool Springs Blvd.

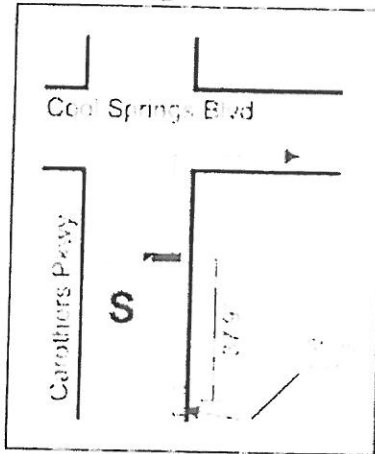
MILE 1 On Cool Springs Blvd, 52'6" before inlet on right, at TVA power line crossing.

MILE 2 On McEwen Dr, 1'7" past second light pole on right, before Resource Pkwy.

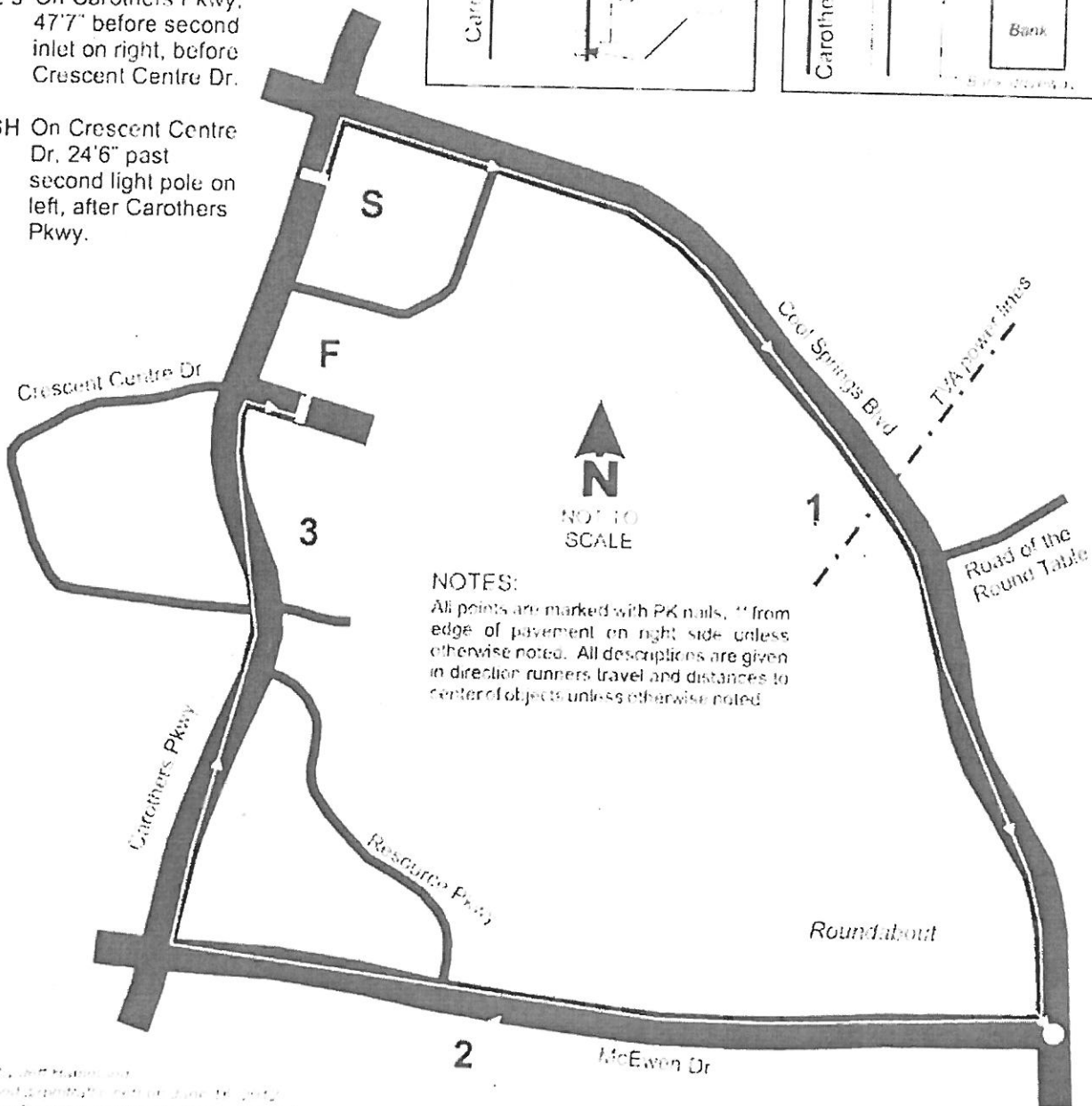
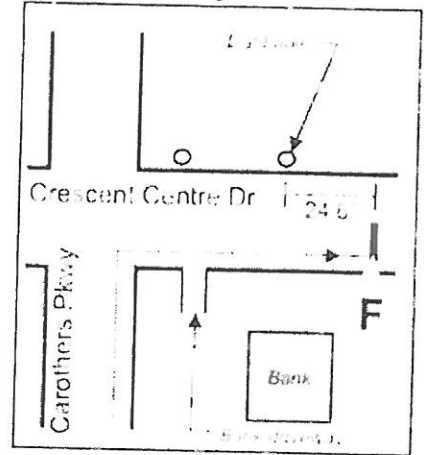
MILE 3 On Carothers Pkwy, 47'7" before second inlet on right, before Crescent Centre Dr.

FINISH On Crescent Centre Dr, 24'6" past second light pole on left, after Carothers Pkwy.

Start Diagram



Finish Diagram



NOTES:
All points are marked with PK nails. " from edge of pavement on right side unless otherwise noted. All descriptions are given in direction runners travel and distances to center of objects unless otherwise noted.

<DATE>

Dear Neighbor,

We are writing to let you know of an event coming to your neighborhood this fall. We are holding the 6th Annual Best Buddies 5K benefiting Best Buddies Tennessee on Saturday August 23, 2014 in Franklin.

The Best Buddies 5K will begin at 7:30 am at the Healthway/Simplex Building and set up will begin at 4:00 am. The proposed map route is attached to this letter. The runners will have a coned, designated lane to run in and streets will be opened to traffic once the runners have passed. We are looking forward to hosting the 6th Annual Best Buddies 5K in your neighborhood and hope that you will raise the excitement level in your neighborhood by getting involved.

The 6th Annual Best Buddies 5K is being held to raise awareness and provide vital program funding for our organization, Best Buddies of Tennessee. Best Buddies is a 501(c)(3) nonprofit organization that provides Best Buddies is a non-profit organization dedicated to establishing a global volunteer movement to create opportunities for one-to-one friendships for people with intellectual and developmental disabilities (IDD). Our mission is to establish a global volunteer movement that creates opportunities for one-to-one friendships, integrated employment and leadership development for people with intellectual and developmental disabilities. We hope you will get excited and join us in participating on August 23rd.

If you need to contact the event organizer, you may contact Katherine Williams by phone at (615) 567-6671 or by email, kat@s2fnashville. If you would like to contact someone in the Franklin Special Events office regarding the event, you may contact Monique McCullough, by email MONIQUEM@franklintn.gov, or by phone 615-791-3217

We would personally like to thank you in advance for any support that you can provide for the 6th Annual Best Buddies 5K and we hope you will help raise the excitement level about this event in your neighborhood!

Sincerely,

Margaret Marchetti
Lead Program Manager
Best Buddies Tennessee



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
3/27/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Mark Edward Partners LLC 505 Park Ave. New York NY 10022		CONTACT NAME: Barry Zimberg PHONE (A/C. No. Ext.): (212) 355-5005 FAX (A/C. No.): (212) 355-5077 E-MAIL ADDRESS: bjz@markedwardpartners.com	
INSURED Best Buddies International, Inc. 100 Southeast Second Street Suite 2200 Miami FL 33131		INSURER(S) AFFORDING COVERAGE INSURER A: Arch Insurance Company NAIC # 11150 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	

COVERAGES CERTIFICATE NUMBER: CL1412803182 REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY			NCPKG0115104	7/5/2013	7/5/2014	EACH OCCURRENCE: \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						DAMAGE TO RENTED PREMISES (Each Occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Each accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE/OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			N/A			WC STATUTORY LIMITS <input type="checkbox"/> OTHER <input type="checkbox"/> I L EACH ACCIDENT \$ I L DISEASE FA EMPLOYEE \$ I L DISEASE POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

RE: 2014 Best Buddies 5K

The certificate holder is included as an additional insured as their interests may appear.

CERTIFICATE HOLDER

CANCELLATION

City of Franklin 109 Third Avenue South Franklin, TN 37065	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE MEF2/BJZ <i>Mark Edward Partners LLC</i>
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2014 BB5K Committee

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615.604.3510

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ITEM #4
WRKS
05/27/14

MEMORANDUM

May 16, 2014

TO: Board of Mayor and Aldermen

FROM: Eric Stuckey, City Administrator 
Special Events Advisory Team

SUBJECT: Best Buddies 5K Event Application

Purpose

The purpose of this memo is to outline recommendations for approval of the Best Buddies 5K on August 23rd.

Background

Best Buddies is a non-profit organization whose mission is to enhance the lives of people with intellectual disabilities and to provide opportunities for one-to-one friendships and integrated employment. The opening and closing “ceremonies” take place at Healthways. The route includes Cool Springs Blvd, McEwen Drive, and Carothers. The applicant estimates 1,000 attendees. The event has used this same route the past several years. Set-up will take place at 6 a.m., race at 7 a.m. and event concludes by 9 a.m.

Recommendations

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 distribute a Good Neighbor letter to affected neighborhoods.
- **Risk Management:**
 - Applicant will provide certificate of insurance naming the City as additional insured.
- **Police Department:**
 - Applicant will hire nine extra-duty Franklin Police Officers to provide street closures and traffic control during the event.