



MEMORANDUM

November 3, 2010

TO: Board of Mayor & Aldermen

FROM: Eric Stuckey, City Administrator
Special Events Advisory Team

SUBJECT: Christmas Parade Event Application

Purpose

The purpose of this memo is to outline recommendations for the Christmas Parade.

Background

The Kiwanis Christmas Club has submitted an application for their Annual Christmas Parade. Estimated attendance is 2,000 – 5,000. The parade begins at 2 PM on Saturday, December 4th.

Recommendation

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

- Applicant will provide a \$1000 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 will provide certificate of insurance naming the City as additional insured.
- Any accidents or injuries occurring during the event should be reported to City representatives immediately.
- Event organizers will notify all participants that, for safety reasons, candy cannot be thrown from floats.

Police Department:

- Applicant will hire sixteen (16) extra-duty Franklin Police Officers to provide security and crowd control.

Solid Waste Department:

- Department will provide roll-out containers along the parade route.
- Applicant will provide volunteers to do clean-up after the event.

Parks Department:

- Applicant will work with Department to determine locations and rules/regulations for staging areas at Jim Warren Park.

OFFICE USE ONLY:
Permit No:

received
9-20-2010



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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.

- 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: ✓ see attached sheets
- Name/purpose of event:** Annual Cool Springs Christmas Parade
Kiwanis
- Date or dates of event:** December 4, 2010
- Time of Event:** 2:00 p.m. - 3:30 p.m.
- Time of Street Closure (if applicable):** 2:30 p.m. - 3:30 p.m.
not in streets

Set-Up Date/Time: 12:00 **Tear-down Date/Time:** N/A
- Name of Applicant and Organization Requesting Permit:**
Gary Huffman / Cool Springs Kiwanis Club

a) **Address:** P.O. Box

b) **Phone:** _____ c) **Cell:** 347-4251 d) **Fax:** _____

e) **E-mail address:** gary1@franklinTN.gov
- Person in charge on day of event:** Gary Huffman

Cell: 347-4251 **E-mail address:** gary1@franklinTN.gov



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

Name: Dennis Anglin Cell: 790-5708 E-mail address: _____

Name: Andrea Latham Cell: 748-2542 E-mail address: andrea.latham@regions.com

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

Christmas Parade with approximately 100
entries of floats, bands, floats, walkers,
vehicles, and some animals. 1 1/2 hour
movement through downtown Franklin

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:

2,000 participants and an estimated crowd of
10,000 people

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. NO

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? _____

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

main street only - public space
for



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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. Yes
- 21) For what purpose will sound amplification be used (i.e. announcements, entertainment, etc.)?
Entertainment - christmas music on floats
- 22) What type of sound amplification will be provided (DJ, Band, etc.)? Please list all that apply.
music boxes on floats
- 23) During what time period is sound amplification requested? 2:00 pm - 3:30 pm
- 24) If for entertainment, give details of entertainment being provided (i.e. number of musicians, type of music, amp wattage, etc.). Recorded music; 600 marching band members; acoustic music
- 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. None
- 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. Cool Springs Kiwanis Club
- 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.*

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: *Sam Luffman for Tony Graves* ^{“president”} Date: 9/10/10
 (Signature and title – must be officer of organization)

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

 John C. Schroer, 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) *
 *

Internal Revenue Service
District Director

501(c)(3)

Department of the Treasury

Date: JUN 18 1985

Employer Identification Number:
58-1530820

Internal Revenue Code
Section 501(c)(4)

Accounting Period Ending:

September 30

Form 990 Required: Yes No

Person to Contact:

Cheryl Mahle/sae
Contact Telephone Number:

(404) 221-4516

File Folder Number:
580062875

Kiwanis Club of Franklin Community
Service Foundation
P.O. Box 112
Franklin, TN 37064

Dear Applicant:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from Federal income tax under the provisions of the Internal Revenue Code section indicated above.

Unless specifically excepted, you are liable for taxes under the Federal Insurance Contributions Act (social security taxes) for each employee to whom you pay \$100 or more during a calendar year. And, unless excepted, you are also liable for tax under the Federal Unemployment Tax Act for each employee to whom you pay \$50 or more during a calendar quarter if, during the current or preceding calendar year, you had one or more employees at any time in each of 20 calendar weeks or you paid wages of \$1,500 or more in any calendar quarter. If you have any questions about excise, employment or other Federal taxes, please address them to this office.

If your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status. Also, you should inform us of all changes in your name or address.

The block checked at the top of this letter shows whether you must file Form 990, Return of Organization Exempt from Income Tax. If the Yes box is checked, you are only required to file Form 990 if your gross receipts each year are normally more than \$25,000. If a return is required, it must be filed by the 15th day of the fifth month after the end of your annual accounting period. The law provides for a penalty of \$10 a day, up to a maximum of \$5,000, when a return is filed late, unless there is reasonable cause for the delay. This penalty may also be charged if a return is not complete. So, please make sure your return is complete before you file it.

You are not required to file Federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Internal Revenue Code. If you are subject to this tax, you must file an income tax return on Form 990-T, Exempt Organization Business Income Tax Return. In this letter we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in Code section 513.

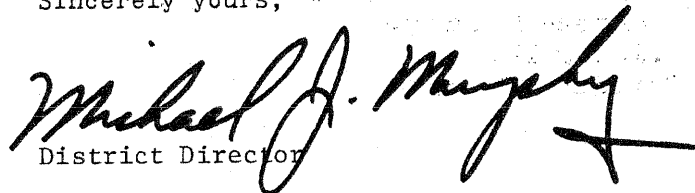
(over)

You need an employer identification number even if you have no employees. If an employer identification number was not entered on your application, a number will be assigned to you and you will be advised of it. Please use that number on all returns you file and in all correspondence with the Internal Revenue Service.

Because this letter could help resolve any questions about your exempt status, you should keep it in your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown in the heading of this letter.

Sincerely yours,


District Director

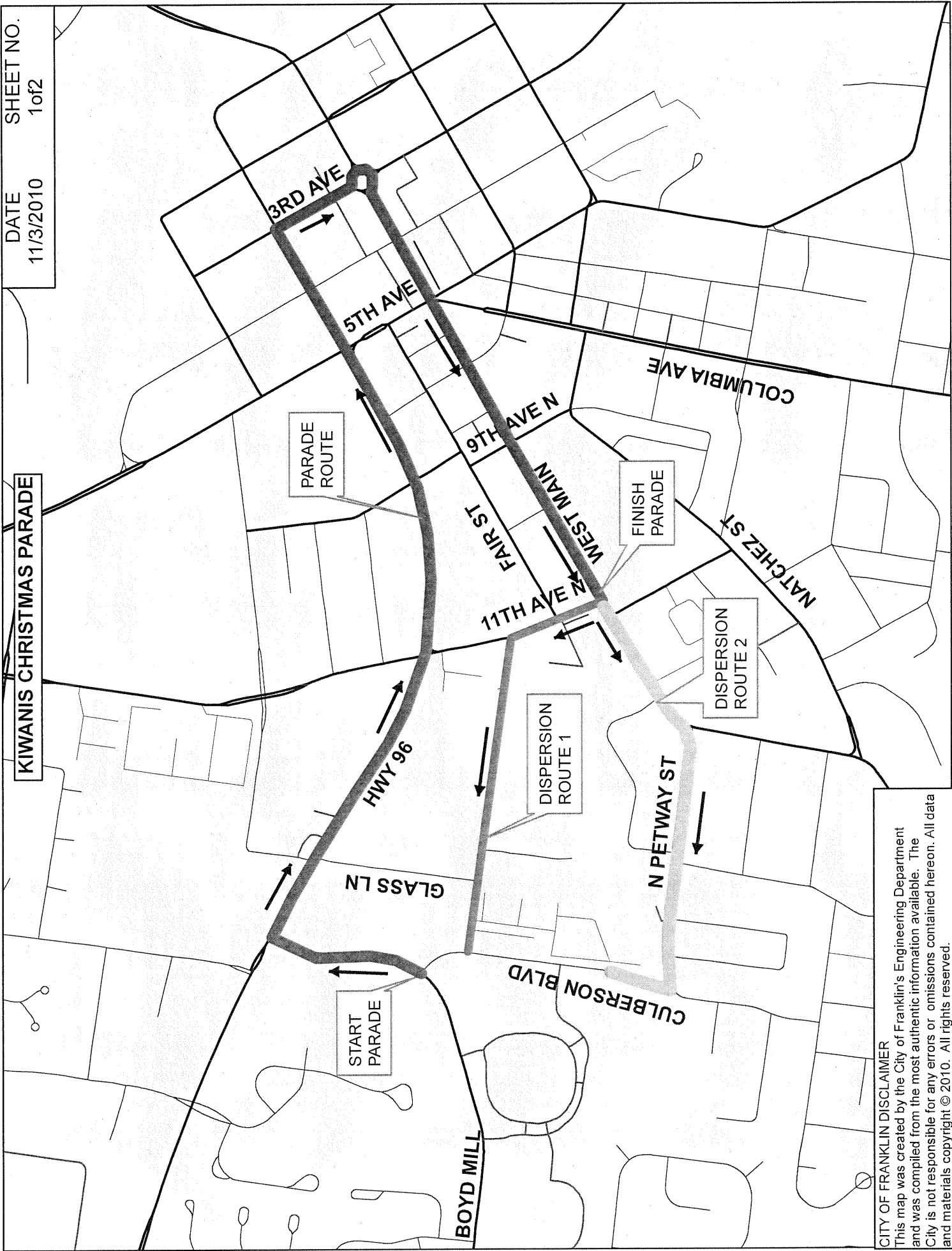
See Attachment

Attachment

Because you are not an organization described in section 170(c) of the Code, donors may not deduct contributions made to you. You should advise your contributors to that effect.

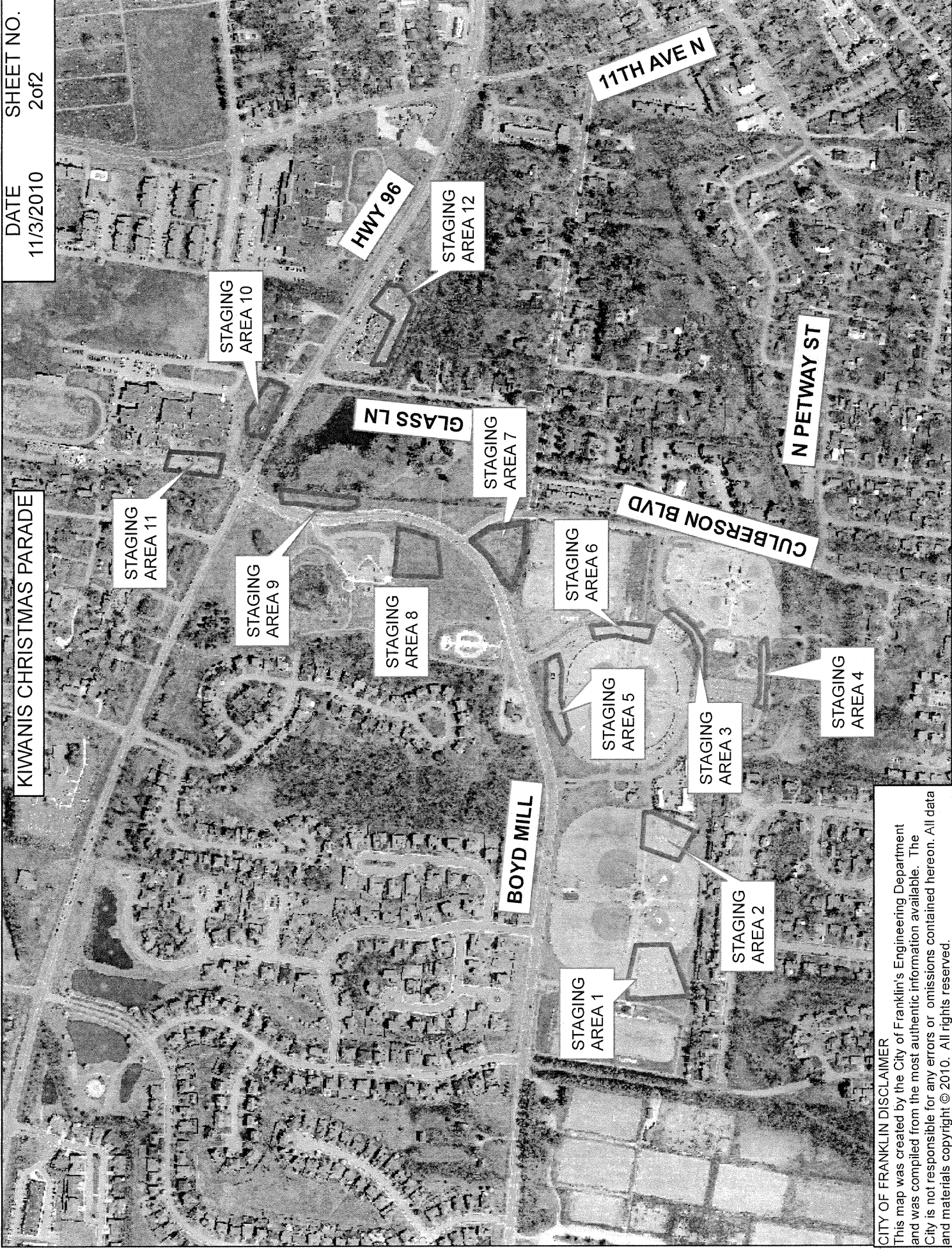
Your exempt status under section 501(c)(4) of the Code is effective for the period beginning January 20, 1983 and ending February 4, 1985. You are recognized exempt under section 501(c)(3) of the Code beginning **February 4, 1985**

KIWANIS CHRISTMAS PARADE



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KIWANIS CHRISTMAS PARADE



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