

**City Of Woodland  
City Council Meeting Agenda Summary Sheet**

<b>Agenda Item:</b> Authorize Special Event: VFW Memorial Day and Veteran's Day Ceremonies and Street Closure Permits	<b>Agenda Item #:</b>	<u>( F ) Consent</u>
	<b>For Agenda of:</b>	<u>May 20, 2013</u>
	<b>Department:</b>	<u>Public Works</u>
	<b>Date Submitted:</b>	<u>May 15, 2013</u>

**Cost of Item:** N/A  
**Amount Budgeted:** \_\_\_\_\_  
**Unexpended Balance:** \_\_\_\_\_

<b>BARS #:</b> <b>Description:</b>
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**Department Supervisor Approval:** Bart Stepp, Public Works Director / s / *Bart Stepp*  
**Committee Recommendation:** Public Works Committee, approved 2-0, on May 14, 2013

<b>Agenda Item Supporting Narrative (list attachments, supporting documents):</b> See attached street closure permits.
<b>Summary Statement/Department Recommendation:</b> Public Works recommends approval.



Street Closure Permit

Applicant Name/Contact Person VFW Post 1927 / Jim P PRimmer (COMMANDER)

Event Name MEMORIAL DAY MAY 27, 2013 10AM

Mailing Address PO BOX 366 WOODLAND

Daytime Phone 360-225-5854 Emergency/Cell Phone 360-606-2652

Email Address COMMANDERVFW1927@GMAIL.COM

Type and Purpose of Event MEMORIAL DAY SERVICE AT THE MEMORIAL

Location(s) AT CITY HALL in woodland

Date(s) of Event MAY 27, 2013 10AM

Time of event (include setup & dismantle) 2 HRS

Street(s) to be closed (attach map) DAVIDSON AVE FROM GOVERNMENT TO 2<sup>ND</sup> ST

Detour Rout \_\_\_\_\_

Applicant agrees to notify all affected property owners, service providers, and to also maintain access for emergency vehicles. Applicant agrees to defend, indemnify and save harmless the City, its appointed and elected officers and employees, from and against all loss or expense, including but not limited to judgments, settlements, attorney's fees and costs by reason of any and all claims and demands upon the City, its elected and appointed officials or employees for damages because of personal or bodily injury, including death at any time resulting there from, sustained by any person or persons and on account of damage to property including loss of use there from, arising out of any activity under or in connection with this event, except only such injury as shall have been occasioned by the sole negligence if the City, its appointed or elected officers or employees.

Applicant Signature Jim P Primmer Date 4-30-13

Office Use Only	
Application received: <u>4/30/13</u>	Date approved by City Council: _____
<input type="checkbox"/> Submitted to Public Works	<input type="checkbox"/> Submitted to Police Dept <input type="checkbox"/> Submitted to Clark County Fire
Public Works Approval (initial/date) _____	



Street Closure Permit

Applicant Name/Contact Person VFW POST 1927 / Jim P PRIMMER (COMMANDER)

Event Name VETERANS DAY NOV 11, 2013 10AM

Mailing Address PO Box 366 woodland

Daytime Phone 360-825-5854 Emergency/Cell Phone 360-606-2652

Email Address COMMANDER VFW 1927 @ G-MAIL.COM

Type and Purpose of Event VETERANS DAY SERVICE AT THE MEMORIAL

Location(s) AT CITY HALL IN WOODLAND

Date(s) of Event NOV 11 2013 10AM

Time of event (include setup & dismantle) 2 HRS

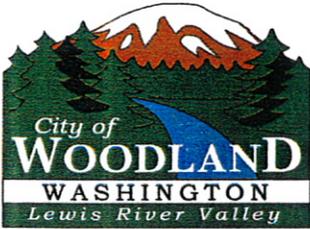
Street(s) to be closed (attach map) DAVIDSON AVENUE FROM GOENIG ST TO 2<sup>ND</sup> ST

Detour Rout \_\_\_\_\_

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<input type="checkbox"/> Submitted to Public Works	<input type="checkbox"/> Submitted to Police Dept <input type="checkbox"/> Submitted to Clark County Fire
Public Works Approval (initial/date) _____	



# SPECIAL EVENTS AGREEMENT

For Office Use Only:	
	(Usage Date)
Fee:	\$ _____
Deposit:	\$ _____
Total Due:	\$ _____

Applicant Name: JIM P PRIMMER (COMMANDER) Phone Number: 360-225-5854  
 Organization / Business: 645 FORBES VFW POST 1927 Fax Number: 360-225-5143  
 Mailing Address: PO BOX 366 Email: COMMANDERVFW1927@GMAIL.COM  
WOODLAND, WA. 98674

Are you a recognized Non-profit Organization?  Yes  No If yes, please attach a copy of your Non-profit 501-3 (c) with this form for eligibility.

Please mark the facilities desired, times, and dates of use.

### Terms and Dates of Use

Usage Date(s): MAY 27 + NOV 11, 2013 Day(s) of Week: 1  
 Arrival Time: 10 AM Departure Time: 12 PM  
 Day-of Contact Person: JIM P PRIMMER (COMMANDER)  
 Phone Number: 360-606-2652

Type of Activity:

- Parade  Street Closure  Street Sale  Athletic Run/Walk  Park Event  
 Other MEMORIAL AREA

Usage Area:

- Horseshoe Lake Shelter  Large Field  
 Beach Front  Hoffman Plaza  
 Use of Lake Other: MEMORIAL DAY SERVICE  
 Mini Shelter Other: VETERANS DAY SERVICE

Gate Open  yes  no

Please list any Street Closures: DAVIDSON ST  
 Expected number of participants: 15 TO 20  
 Expected number of spectators: 30 TO 40

Office Use Only:	Amount Paid \$ _____	Key#/Color: _____
Approved o Denied o Woodland Park Board: _____	Date: _____	Date: _____
Approved o Denied o Woodland City Council: _____	Receipt No. _____	Date Returned: _____
	Comments: _____	Refund Ck#/Date: _____

**Please use checklist to ensure we have all the details we need to process your request.**

- Detailed timeline of event activities beginning with setup and ending with cleanup
- Proposed site plan (see list of plan requirements below)
- Insurance naming the city as additional insured for event dates if the event is held on city property
- Dance Permit if there is to be music (recorded or live). Please see fee schedule listed on the Dance Permit
- Extra porta-potties for groups larger than 100
- Notification to neighbors and/or businesses of event if necessary
- Evacuation Plan (if applicable)
- Medical/Emergency response plan (if applicable)
- First Aid/Medical Services provided by \_\_\_\_\_
- Temporary structure and vehicle access will comply with current fire code and WAC 51.54, International Fire Code Chapter 345.24  yes  no
- Provisions made for:
  - Parking
  - Litter
  - Security
- Will Police/Security be required?  yes  no

**Site plan requirements**

- Proposed road closure points and any roadway or driveway obstructions
- Temporary fencing
- Access Points
- Parking identified for special event use
- Location of tents, booths, temporary structures, amusement rides, etc.
- Dimensions of drive isles and vehicle access
- Cooking, open flames, fireworks and other heat sources
- Fire extinguishers ( if applicable)

**Please Read Carefully**

- All events must go through City Council and possibly Park Board. **Please submit event application 2 months prior to event to ensure that a timely approval.**
- Start and finish at stated time
- Adult supervision is required at ALL TIMES
- Please give 24-hour notice of cancellation
- Use only facilities listed on application
- No tobacco, smoking, or alcohol beverages
- Premises must be cleaned and vacated by 10 pm
- Obtain key (if needed) from the City Hall Annex during business hours for the tap water in the Horseshoe Lake Shelter.
- Deposit will be refunded 10 to 14 days following your event
- User is responsible for damages and clean-up
- Failure to observe rules and regulations of the City may result in loss of usage privileges
- Any emergency situation or bad weather may cause cancellation of facilities without notification.

**NOTICE: Deposits will be non-refundable if city employee is called out to unlock, clean up, etc.**

**Agreement** The undersigned hereby makes application to the City of Woodland for use of city facilities described above and certifies that the information given in this application is correct. The undersigned further states that he/she has the authority to make this application for the applicant and agrees that the applicant will observe all rules and regulations of Woodland Municipal Code and policies of the city in which the facilities are requested.

Applicant agrees that City of Woodland and City of Woodland agents, employees, and directors shall not be liable for any damage to person or property by reason of the negligent acts of Applicant, its agents, employees, invitees, or subcontractors. Applicant agrees to protect indemnify for costs, legal and other expenses, and hold harmless City of Woodland and its officers, employees, directors and agents from claims, liabilities, or suits arising out of injury to person or property from negligent acts of Applicant, its agent, employees, invitees, or subcontractors.

Applicant's Signature: Jim C Brimmer Date: 3-18-13