

City Clerk
City Hall, 215 SE 7<sup>th</sup> Street, Room 166
Topeka, KS 66603
www.topeka.ora

Brenda Younger, M.M.C. 785-368-3940 Email: cclerk@topeka.org

## Special Event Permit Application

Submit this application, including all supporting documentation and the appropriate fee (\$50.00 for special events or \$25.00 for block parties) to: City of Topeka City Clerk's Office; 215 SE 7<sup>th</sup> Street, Room 166; Topeka, Kansas 66603. For assistance call **785/368-3940** during business hours.

General Event Information Please Print
Name of Event: Topeka Irish Fest and 5K Run
Event Date(s)*: September 18, 2021  *NOTE: If this Application is submitted more than six months prior to the scheduled event, the Cit may not be aware of potential street closures/traffic issues associated with yet-to-be-scheduled construction project.
EVENT Start Time: 9/18/21 9:00 am/pm EVENT End Time: 9/18/21 6:00 am/pm
<b>SET UP</b> Start Time: 9/17/21 5:00 am/pm <b>TEAR DOWN</b> End Time: 9/18/21 9:00 am/pm
Full and complete description of event:  Contained festival featuring a 2.5K run, live music, inflatables, food and alcoholic beverages.
Location(s) / Route (if applicable) – Please attach a map <u>AND</u> describe the route, showing the Start and Finish areas:  Festival - north lanes of SW 8th Street between Jackson and Harrison. Run - extends from 6th to 10th Street between Harrison and Jackson, including Capitol grounds.
Staging Area (if applicable) – Please provide a full and complete description:  N/A
Will electrical outlets be needed for equipment used during event?  Yes  No Please list location(s) of electrical outlets  Assumption Church, Mater Dei Parish
Disbandment Area (if applicable) – Please provide a full and complete description:
N/A

Rain Date?	Yes	No
	If yes, then d	ate(s):
Fundraiser?	Yes	No
	If yes, then b	eneficiary: Mater Dei Parish
Registration/E	ntry Fee?	Yes No
		If yes, then amount: Festival \$0/Run \$25
Noise Exception	n?	Yes
		If yes, then Council District No.

### PLEASE CHECK ALL THAT APPLY TO YOUR EVENT:

Type of Event	Event Details	<b>Equipment at Event</b>
Festival	Alcohol Served	Amplified Speaking and/or Music ~Hours: 9am to 6pm
Parade	Alcohol Sales	Portable Restrooms (see attachment for recommended Standards)
Block Party/Picnic and/or Neighborhood Procession	Mobile Food Vendors:  ~How many?	Stage/Props/Production
Sporting Event or Competition	X Transient or Sidewalk Vendors:	Electrical Outlets Needed  Dumpsters/Receptacles
Concert	~How many? 10  Open to the Public	Other:
Other:	Animals	

Organization/Sponsor & its Authorized Represent	<u>rative</u> Please Print
Mater Dei Derich and Cab	o al
Name of Organization/Sponsor: Mater Dei Parish and Scho	
Address: 911 SW Clay, Topeka Stat	
Business Phone: Fax:	
Web Address of Organization/Sponsor:	
Name of Authorized Representative: Sarah Breymeyer	
Address: 5825 SE 77th Street, Berryton State	e: KS Zip: 66409
Home Phone: Work Phone:	Cell Phone: 785-230-7032
Email: sbreym1@hallmark.com	
Primary On-Site Contact Person Please Print	
Name: Dan Spindler	
Home Phone: Work Phone:	Cell Phone: 785-806-5429
Email: janddspindler@att.net	
*NOTE: The authorized representative must be an in- authority to sign this application and any subsequent docu- primary on-site contact person must be an individual effective (1) information to City personnel and (2) direct during preparation for, as well as during the course of, the	ments on behalf of said entity. The who can provide appropriate and ction to event staff and volunteers
Public Safety Considerations Please Print	
Will the organizer/sponsor ensure that fire hydrants remain un	nobstructed? Yes No
Will the organizer/sponsor supply a First-Aid Station for the e	event? Yes No
If yes, then: Type: RN Location: Or	n-Site
Will the organizer/sponsor engage private security to work the	ne event?Yes No
If yes, then identify the provider: Tim McCaff	rey
*NOTE: Various City departments will conduct a full republic safety perspective and staff will provide associated Type III barricades are the minimum traffic control development, more advanced barricades may be required dependent of the control of that some type of barricade(s) will most likely be required for the control of the contr	requirements in a timely manner. ice required for all street closures. Iding upon the particular facts and the organizer/sponsor to understand

#### Traffic/Parking/Access/Notification Please Print

**ADMINISTRATIVE REGULATIONS** may be applied during the process of reviewing and approving special event applications. Regulations that will be considered include (1) Reducing Length of Street Closure (2) Using Alternative Streets (3) Notice to Surrounding Property Owners and (4) Consideration of Noise

Will streets, sidewalks and/or intersections need to be closed for your event?

No

\*NOTE: It is imperative that applicants are mindful of the manner in which notification is provided to residents and/or business owners/tenants who live and work within the surrounding area, including the timeliness of such notification, as these individuals will be affected in one way or another by the sponsor's event.

If yes, please list all known streets, sidewalks and/or intersections that you are requesting to close in conjunction with your event. (\*Attach a complete site plan in accordance with TMC Section 12.70.050(b)(8))

SW 8th Street between SW Jackson and SW Harrison (excluding the south most single lane),

as well as SW 8th Street north to alley on SW VanBuren

2.5K will have temporary closures at 6th and 10th street,

Date(s) of street, sidewalk and/or intersection closures: September 17-18, 2021

Time(s) of street, sidewalk and/or intersection closures:

Set Up: From <u>5:00</u> to <u>10:00</u> am pm

Tear Down: From 6:00 to 9:00 am/pm

Explain the specific method(s) by which you will notify residents and/or businesses that will be affected by the street, sidewalk and/or intersection closures, including notification dates:

Downtown & NOTO Arts District Event Notification Requirements: Any applicant who intends to hold an event downtown or in NOTO shall use the contact information provided by the City Clerk's office upon request by the applicant. Once notification has been completed, the applicant shall execute a Statement indicating that all owners within the affected area were notified at least ten days prior to the event and shall provide such Statement to the City Clerk 48-hours prior to the event

Notification by flyer 2 weeks prior to event.

ALL APPLICANTS SHALL CONTACT A TRAFFIC CONTROL COMPANY FOR ALL TRAFFIC CONTROL DEVICES, APPLICANT SHALL HAVE THE COMPANY CALL TRAFFIC ENGINEERING AT LEAST 3 DAYS PRIOR TO EVENT AND CONFIRM ORDER HAS BEEN PLACED. IF YOU ARE SUPPLYING YOUR OWN BARRICADES YOU SHALL SEND THE NCHRP 350 OR MASH COMPLIANT CERTIFICATE TO CITY OF TOPEKA TRAFFIC ENGINEERING WITH A PHOTO OF THE DEVICES NO LATER THAN 10 DAYS PRIOR TO YOUR EVENT. FAILURE TO ORDER OR USE UNAPPROVED TRAFFIC CONTROL WILL RESULT IN EVENT CANCELLATION.

Traffic Control Company Contact Numbers:

C-HAWKK - 1-785-542-1800 MATHER - 1-785-478-3780 TCS - 1-785-448-0402 CTCR - 1-785-232-8360

\*NOTE: The special event organizer/sponsor is responsible for providing notice of street closures to all affected residents and/or businesses at least ten days prior to the event. If the City receives complaints related to lack of notice and deems that the notice provided was not appropriate given the particular facts and circumstances involved, approval of special event permits may be withheld in the future.

Will sidewalk, transient or mobile food vendors be participating in your event?



If yes, please initial below to indicate that you have read and fully understand the requirements contained in TMC Section 12.70.060, which provide that the applicant: (i) submit the names of all sponsor-approved vendors to the city clerk at least forty-eight (48) hours prior to the event; (ii) ensure that each vendor receives written notification of their having been approved to participate; and (iii) ensure that each vendor displays such written notification in a prominent place (clearly visible to the public) during the time they are present at the event.

Have you obtained the consent of each business owner to a sidewalk vendor operating in front of or adjacent to their businesses (if sidewalk vendors will be part of the event)? Yes No

\*NOTE: City ordinance requires the special event organizer/sponsor to secure this consent prior to allowing a sidewalk vendor to operate in front of or adjacent to any business.

### Clean up Please Print

Explain the specific methods by which you will clean up after your event, including your plan for removing all debris and disposing of all refuse:

Volunteer staff is prepared to clean up the site to its original state.

Clean-Up personnel provided by: Mater Dei Parish

\*NOTE: The special event organizer/sponsor will be required to provide a deposit, (in an amount to be determined by designated City personnel depending upon the scale of the event). The purpose of the deposit is to ensure that normal traffic flow and access is restored to the area in a prompt manner and that the site(s) is returned to its former condition (normal wear and tear excepted). If not, the deposit will be forfeited and approval of special event permits may be withheld in the future. (1) All debris must be removed from the street(s) and/or right-of-way within thirty minutes after the ending time noted on the event permit; and (2) All other associated clean-up must be completed within 12 hours after the ending time noted on the event permit.

### Insurance

A special event applicant is required to provide an original Certificate of Liability Insurance evidencing an insurance policy from an insurance company authorized to do business in the State of Kansas, which provides general liability coverage for any "special event" (as defined in TMC Section 12.70.010) in an amount not less than \$500,000 combined single limit per occurrence for bodily injury and property damage and which names the City of Topeka as an Additional Insured with the same coverage as the Insured, without restrictions.

Notwithstanding the above, a block party applicant may opt instead to execute an indemnity/hold harmless agreement, in a form approved by the City, which would indemnify and hold the City harmless against all claims, damages or causes of action arising from the event (see TMC Section 12.70.080).

### Applicant's Statement of Agreement:

The information that I have provided herein is correct to the best of my information, knowledge and belief. I have read, understand and agree to abide by the rules and regulations included in this application and the Topeka Municipal Code, (including my obligations under the "Process and Instructions" section of this application). I further understand that any permit that may be granted is not transferable and is revocable at any time at the absolute discretion of the City of Topeka.

I hereby affirm that the above information is true and fully understand that the issuance of a Special Event Permit is entirely contingent upon satisfactory compliance with all associated conditions and requirements.

I, the undersigned, agree to abide by the provisions in this application and the instructions attached hereto.

Sarah Breymeyer		
PRINTED NAME of authorized representative/applicant		
Sarah Breymeyer	6/10/21	
SIGNATURE of authorized representative/applicant	Date	

Please mail or deliver this completed application, along with any additional documentation required, to:

City Clerk's Office 215 SE 7<sup>th</sup> Street, Room 166 Topeka, KS 66603

## OFFICIAL USE ONLY

City Clerk's Office
Date Application Received: 6/17/2021 By: K. BOANER
Date Application Received: W/17   2021 By: K. Bogner  Date Non-Refundable Special Event Application Fee Received: W/17   2021
Fee Received By: KBOANEN Fee Amount: \$50.00
Cash ( ) Credit ( ) Check (1)/No. 2039 Receipt # 00728

### City of Topeka Department Contacts & Authorization

Below is a list of city representatives available for questions or concerns about your event.

City Clerk's Office Contact Information: Kelly Bogner 368-3940, cclerk@topeka.org

Topeka Police Department: Ronnie Connell 368-1589, rconnell@topeka.org

Topeka Fire Department: Todd Harrison, 368-4130, tharrison@topeka.org

Traffic Engineering Division: Kristi Ericksen, 368-3029, kericksen@topeka.org

Street Operations Division: Michael Trower, 368-3920, MTrower@topeka.org

Parking Division: Nicole McDuffee, 368-2584, nmduffee@topeka.org

City Attorney's Office: Mary Feighny, 368-3883, mfeighny@topeka.org

Internal Use Only				
TPD Date:	Comments:			
TFD Date:	Comments:			
Traffic Date:	Comments:			
Street Maintenance Date:	Comments:			
Parking Date:	Comments:			
City Attorney's Office Date:	Comments:			
APPROVAL TO ISSUE EVENT PERMIT: YES NO				
DATE:	BY:			

## **Downtown & NOTO Art District Special Events**

# **Statement of Notification**

Any applicant who intends to hold an event downtown or in NOTO shall use the contact information provided by the City Clerk's office upon request by the applicant.

Please return signed statement to the City Clerk's office at least 48 hours prior to your event.

I hereby affirm that all owners within the affected area we event.	ere notified at least ten days prior to the
Sarah Breymeyer	_
PRINTED NAME of authorized representative/applicant	
Sarah Breymeyer	6/10/21
SIGNATURE of authorized representative/applicant	Date

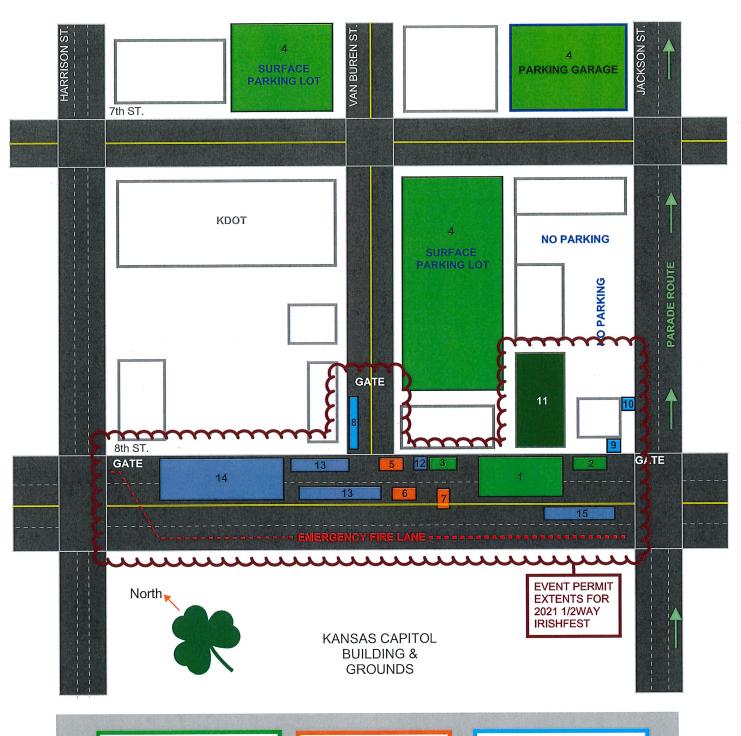
Email: cclerk@topeka.org

Fax: 785-368-3943

Address: City Clerk's Office

215 SE 7th Street, Room 166

Topeka, KS 66603





- 1 EVENT STAGES UNDER TENT
- 2 TRADITIONAL IRISH FOOD
- 3 AMERICAN GRILL
- 4 PARKING LOTS AVAILABLE

#### **BEVERAGES**

- 5 BEER TOKENS
- 6 BEER TENT
- 7 WHISKEY TASTING

#### GENERAL INFORMATION

- 8 RESTROOMS
- 9 FIRST AID TENT
- 10 COREFIRST ATM



11 ASSUMPTION CHURCH

#### AND FOR MORE IRISHFEST FUN

- 12 OFFICIAL IRISHFEST APPAREL
- 13 VENDORS
- 14 KIDS CARNIVAL
- 15 TAILGATE GAMES





Start north on Jackson St., turn east onto 6th St., turn south onto Kansas Ave. Turn west onto 10th St. sidewalk, turn north onto Harrison St. sidewalk Turn east onto 8th St. sidewalk, turn south onto Jackson St. to Finish

Certificate Holder Archdiocese of Kansas City in Kansas Savior Pastoral Center 12615 Parallel Parkway		confers no	This Certificate is issued as a matter of information only and confers no rights upon the holder of this certificate. This certificate does not amend, extend or alter the coverage afforded below.				
Kansas City, KS 66109			TH SO	Company Affording Coverage THE CATHOLIC MUTUAL RELIEF SOCIETY OF AMERICA 10843 OLD MILL RD OMAHA, NE 68154			
Covered Location Mater Dei Parish 911 SW Clay Topeka, KS 66606							
Covera	ges						
indica certif	nted, notwithstanding a icate may be issued or	any requirement, term	or condition of any cage afforded describ	contract or other doc ed herein is subject t	nmed above for the certification with respect to we to all the terms, exclusion	hich this	
	Type of Coverage Certificate Number		Coverage Effective Date	Coverage Expiration Date	Limits		
	Property				Real & Personal Property		
	Property  D. General Liability				Each Occurrence	500,000	
	D. General Liability				Each Occurrence General Aggregate	500,000	
		8556	7/1/2021	7/1/2022	Each Occurrence General Aggregate Products-Comp/OP Agg	500,000	
	D. General Liability	8556	7/1/2021	7/1/2022	Each Occurrence General Aggregate Products-Comp/OP Agg Personal & Adv Injury	500,000	
	D. General Liability  Occurrence	8556	7/1/2021	7/1/2022	Each Occurrence General Aggregate Products-Comp/OP Agg Personal & Adv Injury Fire Damage (Any one fire)	500,000	
	D. General Liability  Coccurrence  Claims Made	8556	7/1/2021	7/1/2022	Each Occurrence General Aggregate Products-Comp/OP Agg Personal & Adv Injury Fire Damage (Any one fire) Med Exp (Any one person)	500,000	
	D. General Liability  Occurrence	8556	7/1/2021	7/1/2022	Each Occurrence General Aggregate Products-Comp/OP Agg Personal & Adv Injury Fire Damage (Any one fire) Med Exp (Any one person) Each Occurrence	500,000	
	D. General Liability  X Occurrence Claims Made  Excess Liability	8556	7/1/2021	7/1/2022	Each Occurrence General Aggregate Products-Comp/OP Agg Personal & Adv Injury Fire Damage (Any one fire) Med Exp (Any one person)	500,000	
	D. General Liability  Coccurrence  Claims Made	8556	7/1/2021	7/1/2022	Each Occurrence General Aggregate Products-Comp/OP Agg Personal & Adv Injury Fire Damage (Any one fire) Med Exp (Any one person) Each Occurrence Annual Aggregrate	500,000	
	D. General Liability  X Occurrence Claims Made  Excess Liability	8556	7/1/2021	7/1/2022	Each Occurrence General Aggregate Products-Comp/OP Agg Personal & Adv Injury Fire Damage (Any one fire) Med Exp (Any one person) Each Occurrence Annual Aggregrate Each Occurrence	500,000	
	D. General Liability  X Occurrence Claims Made  Excess Liability	8556	7/1/2021	7/1/2022	Each Occurrence General Aggregate Products-Comp/OP Agg Personal & Adv Injury Fire Damage (Any one fire) Med Exp (Any one person) Each Occurrence Annual Aggregrate Each Occurrence Claims Made	500,000	
	D. General Liability  X Occurrence Claims Made  Excess Liability	8556	7/1/2021	7/1/2022	Each Occurrence General Aggregate Products-Comp/OP Agg Personal & Adv Injury Fire Damage (Any one fire) Med Exp (Any one person) Each Occurrence Annual Aggregrate Each Occurrence Claims Made Annual Aggregrate	500,000	

Holder of Certificate

0005005481

Cancellation

Additional Protected Person(s)

City of Topeka, KS Clerk's Office 215 SE 7th Street, Room 166 Topeka, KS 66603 Should any of the above described coverages be cancelled before the expiration date thereof, the issuing company will endeavor to mail 30 days written notice to the holder of certificate named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.

Authorized Representative

Michael a. Intuin

#### **ENDORSEMENT**

(TO BE ATTACHED TO CERTIFICATE)

Effective Date of Endorsement:

9/18/2021

Cancellation Date of Endorsement: 9/19/2021

Certificate Holder: Archdiocese of Kansas City in Kansas

Savior Pastoral Center 12615 Parallel Parkway Kansas City, KS 66109

Location:

Mater Dei Parish 911 SW Clay Topeka, KS 66606

8556 of The Catholic Mutual Relief Society of America is amended as follows:

SECTION II - ADDITIONAL PROTECTED PERSON(S)

It is understood and agreed that Section II - Liability (only with respect to Coverage D - General Liability), is amended to include as an Additional Protected Person(s) members of the organizations shown in the schedule, but only with respect to their liability for the Protected Person(s) activities or activities they perform on behalf of the Protected Person(s).

It is further understood and agreed that coverage extended under this endorsement is limited to and applies only with respect to liability assumed by contract or agreement; and this extension of coverage shall not enlarge the scope of coverage provided under this certificate or increase the limit of liability thereunder. Unless otherwise agreed by contract or agreement, coverage extended under this endorsement to the Additional Protected Person(s) will not precede the effective date of this certificate of coverage endorsement or extend beyond the cancellation date.

> Schedule - ADDITIONAL PROTECTED PERSON(S) City of Topeka, KS Clerk's Office 215 SE 7th Street, Room 166 Topeka, KS 66603

(the following language supersedes any other language in this endorsement or the Certificate in Remarks conflict with this language):

Coverage only extends for claims arising out of Mater Dei Parish holding their Mater Dei Irish Fest and 5K run on September 18, 2021. Includes Set-up and Tear-down. Liquor Liability Included.



City Clerk
City Hall, 215 SE 7<sup>th</sup> Street, Room 166
Topeka, KS 66603
www.topeka.org

Brenda Younger, M.M.C. 785-368-3940 Email: cclerk@topeka.org

## Special Event Debris Deposit Form

Submit this form, including all supporting documentation and the appropriate fee to: City of Topeka City Clerk's Office; 215 SE 7th Street, Room 166, Topeka, Kansas 66603. For assistance call 785-368-3940 during business hours.

PLEASE PRINT					
Name of Event: Topeka Irish Fest and 2.5K Run					
Event Date(s): September 18, 2021 Estimated attendance: 1,500					
Location of Event: Assumption Church, 8th & Jackson and Gapitol Grounds for 2.5K Run-					
Name of Authorized Representative: Sarah Breymeyer					
Address: 5825 SE 77th Street, Berryton State: KS Zip: 66409					
Home Phone: Work Phone: Cell Phone: <u>785-230-7032</u>					
Email: sbreym1@hallmark.com					
A debris deposit is required for each special event in the following amount:					
\$250 - Less than 5,000 people in attendance \$500 - More than 5,000 people in attendance					
The purpose of the deposit is to ensure that normal traffic flow and access is restored to the area in a prompt manner and that the site(s) is returned to its former condition (normal wear and tear excepted). If not, the deposit will be forfeited and approval of special event permits may be withheld in the future.					
All debris must be removed from the street(s) and/or right-of-way within 30 minutes after the ending time noted on the event permit; and					
All other associated clean-up must be completed within 12 hours after the ending time noted on the event permit.					
A post-event inspection will be conducted by City staff and if all cleanup requirements have been met you will receive a refund within two (2) weeks.					
How would you like to receive your refund check? □ PICK UP at Clerk's Office					

Check Refund Information:		
Name and/or Company: Sarah Breymeyer		
Address: 5825 SE 77th Street, Berryton	State: KS	Zip: <u>6640</u> 9
Applicant's Statement of Agreement:		
I have read, understand and agree to regulations outlined associated with the cleanup of my event.  I hereby affirm that the above information is true and /fully refund is entirely contingent upon satisfactory compliance with	understand that the Sp	pecial Event Debris Deposit
Sarah Breymeyer		
PRINTED NAME of authorized representative/applicant	nt	
Sarah Breymeyer	6/10/21	
Sarah Breymeyer SIGNATURE of authorized representative/applicant	Date	
Internal Use Only		and the second s
City Clerk's Office Date Fee Received: 6/17/202/ Fee Received By: K. Bogver Fee Amount: \$ 250  Cash ( ) Credit ( ) Check & No. 2040 Receipt #	<u> </u>	
Cash () Credit () Check No. 2040 Receipt #	0728	
APPROVAL TO ISSUE REFUND OF DEBRIS DEPOSIT:  CHECK NO	YES NO DAT	E: