

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

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

# 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: Dauntour Adventure Race (Jeka DART)
Event Date(s)*: Estimated attendance: Estimated attendance: *NOTE: If this Application is submitted more than six months prior to the scheduled event, the City may not be aware of potential street closures/traffic issues associated with yet-to-be-scheduled construction projects.
EVENT Start Time: am/pm EVENT End Time: am/pm
SET UP Start Time: 6.30 am/pm TEAR DOWN End Time: am/pm
Full and complete description of event:  KUNNES WI GO anywhere south of 1st styret. East of  TOPERS Blvd, North of 12TO styred and west of totherson.  Topers Blvd, North of 12TO styred and west of totherson.
Location(s) / Route (if applicable) – Please attach a map AND describe the route, showing the Start and Finish areas:  Doughton Toplka, No Spark rate but will be within the areas 13 ted above.
Staging Area (if applicable) – Please provide a full and complete description:
Will electrical outlets be needed for equipment used during event?  Yes  No  Please list location(s) of electrical outlets
Disbandment Area (if applicable) – Please provide a full and complete description:

Rain Date? Yes	No				
If yes, then date(s):					
Fundraiser? (Yes)	No				
If yes, then beneficiary: ( ) The					
Registration/Entry Fee? Yes No					
	If yes, then amount:	\$40 Before 811 Then \$50			
Noise Exception?	Yes No	ferperson.			
•	If ves, then Council	\$40 Before 811 Then \$50 per person.  District No. Downtown Topellal			
	3 ,				
PLEASI	E CHECK ALL THAT APPLY TO	YOUR EVENT:			
		TOOKEVE(I.			
Type of Event	Event Details	Equipment at Event			
	A second				
Festival	Alcohol Served	Amplified Speaking and/or Music			
Festival	Alcohol Served  Alcohol Sales	Music ~Hours:7:45 to 2:00  Portable Restrooms (see attachment for recommended			
Parade Block Party/Picnic	\(	Music ~Hours:7:45 to 2:00  X Portable Restrooms (see attachment for recommended Standards)			
Parade	Alcohol Sales	Music ~Hours:7:45 to 2:00  X Portable Restrooms (see attachment for recommended Standards)  X Stage/Props/Production			
Parade Block Party/Picnic and/or Neighborhood	Alcohol Sales  Mobile Food Vendors:	Music ~Hours:7:45 to 2:00  X Portable Restrooms (see attachment for recommended Standards)  X Stage/Props/Production Electrical Outlets Needed			
Parade  Block Party/Picnic and/or Neighborhood Procession  Sporting Event or	Alcohol Sales  Mobile Food Vendors:  ~How many?  Transient or Sidewalk	Music ~Hours:7:45 to 2:00  X Portable Restrooms (see attachment for recommended Standards)  X Stage/Props/Production			
Parade  Block Party/Picnic and/or Neighborhood Procession  Sporting Event or	Alcohol Sales  Mobile Food Vendors:  ~How many?  Transient or Sidewalk Vendors:	Music ~Hours:7:45 to 2:00  X Portable Restrooms (see attachment for recommended Standards)  X Stage/Props/Production Electrical Outlets Needed			

Organization/Sponsor & its Authorized Representative Please Print
Name of Organization/Sponsor: Lets Help
Address: 2005, Kansas the State: 165 Zip: 16663
Business Phone: <u>770 5738</u> Fax: <u>354-7145</u>
Web Address of Organization/Sponsor: Letshelpinc.org
Name of Authorized Representative: Washies
Address: 2005, Cansas Arestate: CS Zip: (dolo3)
Home Phone: 640-053 Work Phone: 270-5738 Cell Phone: 640-0535
Email: Indake betshelpinc.org
Primary On-Site Contact Person Please Print
Name: Moda Lehres
Home Phone: 640-0535 Work Phone: 70 5238 Cell Phone: 640-0535
Email: Undake lets helpinciong
*NOTE: The authorized representative must be an individual who possesses full legal authority to sign this application and any subsequent documents on behalf of said entity. The primary on-site contact person must be an individual who can provide appropriate and effective (1) information to City personnel and (2) direction to event staff and volunteers during preparation for, as well as during the course of, the event.
Public Safety Considerations Please Print
Will the organizer/sponsor ensure that fire hydrants remain unobstructed? Yes No
Will the organizer/sponsor supply a First-Aid Station for the event? Yes No
If yes, then: Type: Location:
Will the organizer/sponsor engage <u>private</u> security to work the event? Yes
If yes, then identify the provider:
*NOTE: Various City departments will conduct a full review of the proposed event from a public safety perspective and staff will provide associated requirements in a timely manner. Type III barricades are the minimum traffic control device required for all street closures. However, more advanced barricades may be required depending upon the particular facts and circumstances surrounding each event. It is important for the organizer/sponsor to understand that some type of barricade(s) will most likely be required for any type of special event.

### Traffic/Parking/Access

Please Print

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))

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

Set Up: From (1.30 to 8.00 am/pm

Tear Down: From (1.00 to 2.00 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:

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.

<u>Traffic Control Company Contact Numbers:</u> 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? Wes



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. \_\_\_\_\_ (initials)

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:

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Clean-Up personnel provided by:

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\*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.

LINDakehres		
PRINTED NAME of authorized representative/applicant	6(18/19	
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: 6/19 By:
Date Non-Refundable Special Event Application Fee Received: 6/19
Fee Received By: Fee Amount: \$ 50 -
Cash ( ) Credit ( ) Check ( )/No Receipt #



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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: Downtown Adventive Race Toplice (DA)
Event Date(s): 824/19 Estimated attendance: 300
Location of Event: Downstown Well's
Name of Authorized Representative:
Address: ZODS, Kansas State: US Zip: Walders
Home Phone: <u>640 0535</u> Work Phone: <u>270 5238</u> Cell Phone: <u>640 -0535</u>
Email: Moakefetshelpinc. org
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 By MAIL

Applicant's Statement of Agreement:

I have read, understand and agree to regulations outlined in this form and the Topeka Municipal Code associated with the cleanup of my event.

I hereby affirm that the above information is true and /fully understand that the Special Event Debris Deposit refund is entirely contingent upon satisfactory compliance with all associated conditions and requirements.

PRINTED NAME of authorized representative/applicant  SIGNATURE of authorized representative/applicant  Date				
Internal Use Only  City Clerk's Office				
Date Fee Received: 6-19-9 Fee Received By: Fee Amount: \$ 250				
Cash ( ) Credit ( ) Check ( ) No Receipt #				
APPROVAL TO ISSUE REFUND OF DEBRIS DEPOSIT: YES NO DATE:				

CHECK NO. \_\_\_\_\_

DART Site Plan 8(24/18

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