



# CITY OF TOPEKA

8/29/2019

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 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: MIRACLE ON KANSAS AVENUE RESCUE RUN

Event Date(s)\*: NOV 30, 2019 Estimated attendance: 500

\*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: 5:00 am/pm  pm EVENT End Time: 6:00 am/pm  pm

SET UP Start Time: 1:00 am/pm  pm TEAR DOWN End Time: 7:00 am/pm  pm

Full and complete description of event:  
5K RUN/WALK TO BENEFIT TOPEKA RESCUE MISSION

Location(s) / Route (if applicable) – Please attach a map AND describe the route, showing the Start and Finish areas:  
START AT CROSSWALK OF WESTBOUND 6TH AND KANSAS AVENUE  
FINISH AT 534 S KANSAS AVENUE

FULL DESCRIPTION ATTACHED

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  
534 S. KANSAS AVENUE

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: TOPEKA RESCUE MISSION

Registration/Entry Fee? Yes  No

If yes, then amount: \$10 - \$35

Noise Exception? Yes  No

If yes, then Council District No. \_\_\_\_\_

PLEASE CHECK ALL THAT APPLY TO YOUR EVENT:

| <u>Type of Event</u>   | <u>Event Details</u>  | <u>Equipment at Event</u>  |
|--|---|--|
| <input type="checkbox"/> Festival  | <input type="checkbox"/> Alcohol Served                                     | <input type="checkbox"/> Amplified Speaking and/or Music<br>~Hours: <u>4:30</u> to <u>6:00</u> |
| <input type="checkbox"/> Parade  | <input type="checkbox"/> Alcohol Sales                                      | <input type="checkbox"/> Portable Restrooms (see attachment for recommended Standards)         |
| <input type="checkbox"/> Block Party/Picnic and/or Neighborhood Procession | <input type="checkbox"/> Mobile Food Vendors:<br>~How many? _____           | <input type="checkbox"/> Stage/Props/Production  |
| <input checked="" type="checkbox"/> Sporting Event or Competition          | <input type="checkbox"/> Transient or Sidewalk Vendors:<br>~How many? _____ | <input checked="" type="checkbox"/> <b>Electrical Outlets Needed</b>                           |
| <input type="checkbox"/> Concert   | <input checked="" type="checkbox"/> Open to the Public                      | <input type="checkbox"/> Dumpsters/Receptacles   |
| <input type="checkbox"/> Other: _____                                      | <input type="checkbox"/> Animals  | <input type="checkbox"/> Other: _____  |

**Organization/Sponsor & its Authorized Representative**

Please Print

Name of Organization/Sponsor: TOPEKA RESCUE MISSION

Address: 600 N KANSAS AVE State: KS Zip: 66608

Business Phone: 354 1744 Fax: \_\_\_\_\_

Web Address of Organization/Sponsor: TOPEKA RESCUE RUN.ORG

Name of Authorized Representative: TONY ESTES

Address: 8139 SW 33RD ST State: KS Zip: 66614

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: 213 1727

Email: get-fit@cox.net

**Primary On-Site Contact Person**

Please Print

Name: TONY ESTES

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: 213 1727

Email: \_\_\_\_\_

*\*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 **private** security to work the event? Yes  No

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?    Yes    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)*)

IDENTICAL TO AND IN CONJUNCTION WITH  
THE MIRACLE ON KANSAS AVENUE PARADE.

Date(s) of street, sidewalk and/or intersection closures: 11/30/19

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

Set Up: From 1:00 to 5:00 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:

SOCIAL MEDIA, TELEVISION, NEWSPAPER

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? Yes  No

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:

TRASH WILL BE DISPOSED OF IN THE DUMPSTERS  
LOCATED AT THE TOPEKA TOWER

Clean-Up personnel provided by: \_\_\_\_\_

**\*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.

TONY ESTES  
PRINTED NAME of authorized representative/applicant

[Signature]  
SIGNATURE of authorized representative/applicant

8.29.19  
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

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***OFFICIAL USE ONLY***

**City Clerk's Office**

Date Application Received: 8/29/19 By: [Signature]

Date Non-Refundable Special Event Application Fee Received: 8-29-19

Fee Received By: [Signature] Fee Amount: \$ 50-

Cash ( ) Credit ( ) Check (  )/No. 5961 Receipt # \_\_\_\_\_



# CITY OF TOPEKA

8/29/19

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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  
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## 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: MKA RESCUE RUN  
Event Date(s): NOV 23 2019 Estimated attendance: 500  
Location of Event: DOWNTOWN TOPEKA  
Name of Authorized Representative: TONY ESTES  
Address: 8139 SW 33RD ST State: KS Zip: 66614  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: 7131727  
Email: get-fit@cox.net

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.

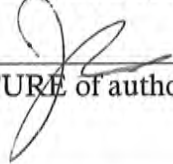
How would you like to receive your refund check?  PICK UP at Clerk's Office  By MAIL

Applicant's Statement of Agreement:

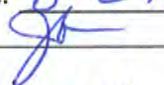
I have read, understand and agree to regulations outlined in this form and the Topeka Municipal Code associated with the cleanup of my event.

*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.*

TONY ESTES  
PRINTED NAME of authorized representative/applicant

      8.29.19  
SIGNATURE of authorized representative/applicant      Date

***Internal Use Only***

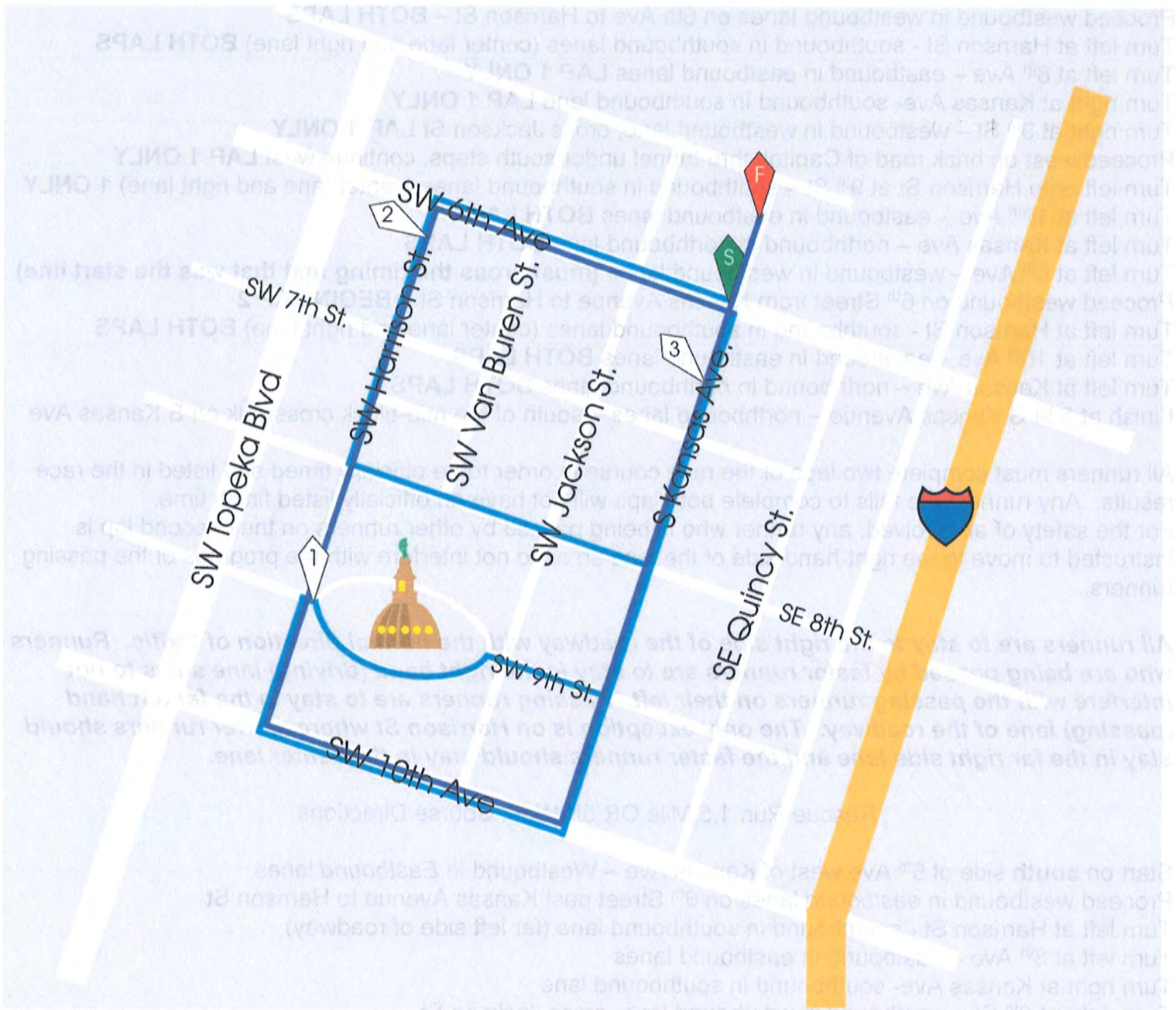
City Clerk's Office  
Date Fee Received: 8-29-19  
Fee Received By:       Fee Amount: \$ 250-  
Cash ( ) Credit ( ) Check (  ) No. 5961 Receipt # \_\_\_\_\_

APPROVAL TO ISSUE REFUND OF DEBRIS DEPOSIT:      YES      NO      DATE: \_\_\_\_\_  
CHECK NO. \_\_\_\_\_





North



Start Line is on 6<sup>th</sup> Avenue just west of Kansas Avenue. **1<sup>st</sup> Lap**, ALL proceed west on 6<sup>th</sup>, south on Harrison, east on 8<sup>th</sup>, south on Kansas, west on 9<sup>th</sup>, across Jackson, west on the private drive of the State Capitol and under the South Steps continuing west to Harrison, south on Harrison, east on 10<sup>th</sup>, and north on Kansas to 6<sup>th</sup>. **2<sup>nd</sup> Lap**, All runners (walkers optional) proceed west on 6<sup>th</sup>, south on Harrison, east on 10<sup>th</sup>, and north on Kansas to the Finish Line at 534 S Kansas Avenue.

## 2019 Rescue Run 5K **RUN** Course Directions

Start on **north** side of 6<sup>th</sup> Ave west of Kansas Ave – Westbound in Westbound lanes  
Proceed westbound in westbound lanes on 6<sup>th</sup> Ave to Harrison St – **BOTH LAPS**  
Turn left at Harrison St - southbound in southbound lanes (center lane and right lane) **BOTH LAPS**  
Turn left at 8<sup>th</sup> Ave – eastbound in eastbound lanes **LAP 1 ONLY**  
Turn right at Kansas Ave- southbound in southbound lane **LAP 1 ONLY**  
Turn right at 9<sup>th</sup> St – westbound in westbound lane, cross Jackson St **LAP 1 ONLY**  
Proceed west on brick road of Capitol, thru tunnel under south steps, continue west **LAP 1 ONLY**  
Turn left onto Harrison St at 9<sup>th</sup> St – southbound in southbound lanes (center lane and right lane) **1 ONLY**  
Turn left at 10<sup>th</sup> Ave – eastbound in eastbound lanes **BOTH LAPS**  
Turn left at Kansas Ave – northbound in northbound lane **BOTH LAPS**  
Turn left at 6<sup>th</sup> Ave – westbound in westbound lanes (**must cross the timing mat that was the start line**)  
Proceed westbound on 6<sup>th</sup> Street from Kansas Avenue to Harrison St – **BEGIN LAP 2**  
Turn left at Harrison St - southbound in southbound lanes (center lane and right lane) **BOTH LAPS**  
Turn left at 10<sup>th</sup> Ave – eastbound in eastbound lanes **BOTH LAPS**  
Turn left at Kansas Ave – northbound in northbound lanes **BOTH LAPS**  
Finish at 534 S Kansas Avenue – northbound lanes – south of the mid-block crosswalk on S Kansas Ave

All runners must complete two laps of the race course in order to be officially timed and listed in the race results. Any runner who fails to complete both laps will not have an officially listed finish time. For the safety of all involved, any runner who is being passed by other runners on their second lap is instructed to move to the right-hand side of the lane so as to not interfere with the progress of the passing runners.

***All runners are to stay to the right side of the roadway with the normal direction of traffic. Runners who are being passed by faster runners are to stay in the right hand (driving) lane so as to not interfere with the passing runners on their left. Passing runners are to stay in the far left hand (passing) lane of the roadway. The only exception is on Harrison St where slower runners should stay in the far right side lane and the faster runners should stay in the center lane.***

## Rescue Run 1.5 Mile **OR** 5K **Walk** Course Directions

Start on **south** side of 6<sup>th</sup> Ave west of Kansas Ave – Westbound in *Eastbound* lanes  
Proceed westbound in *eastbound* lanes on 6<sup>th</sup> Street past Kansas Avenue to Harrison St  
Turn left at Harrison St - southbound in southbound lane (far left side of roadway)  
Turn left at 8<sup>th</sup> Ave – eastbound in eastbound lanes  
Turn right at Kansas Ave- southbound in southbound lane  
Turn right at 9<sup>th</sup> St – westbound in westbound lane, cross Jackson St  
Proceed west on red brick road of Capitol grounds, through tunnel under south steps, continue west  
Turn left onto Harrison St at 9<sup>th</sup> St – southbound in southbound lane (left lane)  
Turn left at 10<sup>th</sup> Ave – eastbound in *westbound* lanes  
Turn left at Kansas – northbound in *southbound* lanes  
Finish at 534 S Kansas Avenue – southbound lanes at the mid-block crosswalk

Walkers follow the inner perimeter of the same route as runners follow while runners use outer perimeter.. Walkers may do **one OR two** laps of race course but MUST exit the course before the 6 p.m. parade start ***For the safety of all participants, walkers must remain in the left hand lane(s) moving against the normal flow of traffic (except on Harrison St, 8<sup>th</sup> Ave & 9<sup>th</sup> St) at all times so as to not interfere with the runners on the course. Walkers will remain in the far left hand lane of Harrison St moving with the normal flow of traffic and will walk with the traffic flow from 8<sup>th</sup> Ave to Kansas Ave & on 9<sup>th</sup> St.*** Walkers will not be officially timed but may note their finish time by the clock at the finish line.