#0001561

CITY OF
TOPEKA

City Clerk
City Hall, 215 SE 7th 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 7th Street, Room 166; Topeka, Kansas 66603. For assistance call **785/368-3940** during business hours.*

General Event Information

Please Print

Name of Event: Sunflower Salute Veterans Day Parade

Event Date(s)*: November 6, 2021 Estimated attendance: 4000

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: 11am (am)/pm **EVENT** End Time: 12 NOON am/pm

SET UP Start Time: 7am (am)/pm **TEAR DOWN** End Time: 1pm am/pm

Full and complete description of event:
Parade to Honor Veterans and Display our Appreciation for their Service and Sacrifice.

Location(s) / Route (if applicable) – Please attach a map **AND** describe the route, showing the Start and Finish areas:
Parade will Stage on Harrison from 8th to 10th Street. Bands and JROTC Units will Stage in Parking lot at 10th and Topeka. Route will go from 10th and Harrison east to 10th and Kansas South on Kansas to 8th west on 8th to VanBuren, South on VanBuren to the parking lot from 6th to 7th on VanBuren.

Staging Area (if applicable) – Please provide a full and complete description:
8th to 10th and Harrison and 10th and Topeka

Will electrical outlets be needed for equipment used during event? (Yes) No
Please list location(s) of electrical outlets 10th + Kansas

Disbandment Area (if applicable) – Please provide a full and complete description:
600 Blk VanBuren

Rain Date? Yes (No)

If yes, then date(s): _____

Fundraiser? Yes (No)

If yes, then beneficiary: _____

Registration/Entry Fee? Yes (No)

If yes, then amount: _____

Noise Exception? Yes (No)

If yes, then Council District No. _____

PLEASE CHECK ALL THAT APPLY TO YOUR EVENT:

Type of Event	**Event Details**	**Equipment at Event**
____ Festival	____ Alcohol Served	_X_ Amplified Speaking and/or Music ~Hours: 10:30 to 12 noon
_X_ Parade	____ Alcohol Sales	_X_ Portable Restrooms *(see attachment for recommended Standards)*
____ Block Party/Picnic and/or Neighborhood Procession	____ Mobile Food Vendors: ~How many? _____	_X_ Stage/Props/Production
____ Sporting Event or Competition	____ Transient or Sidewalk Vendors: ~How many? _____	_X_ **Electrical Outlets Needed**
____ Concert	_X_ Open to the Public	____ Dumpsters/Receptacles
____ Other:_____	____ Animals	____ Other: _____

Organization/Sponsor & its Authorized Representative

Please Print

Name of Organization/Sponsor: Kansas National Guard Foundation

Address: 125 SE Airport Drive State: KS Zip: 66619

Business Phone: 785-272-4912 Fax: 785-272-9128

Web Address of Organization/Sponsor: Kansas N.G. Foundation

Name of Authorized Representative: Paul A. Honaker, CPA

Address: 4228 SW 29th Terr. State: KS Zip: 66614

Home Phone: — Work Phone: 785-272-4912 Cell Phone: —

Email: paul@honakercpa.com

Primary On-Site Contact Person

Please Print

Name: Rikki Blume

Home Phone: — Work Phone: — Cell Phone: 770-331-7017

Email: Richelle.S.Blume.mil@mail.mil

***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.*

Kansas National Guard Foundation
125 SE Airport DRIVE
Topeka, KS 66619

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? (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))***

NOTIFIED BY EMAIL THROUGH DT

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

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

Set Up: From 8am to 12:30 am/pm

Tear Down: From 12:30 to 1:30 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

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:
Route and Clean Up Volunteer will walk the Parade Route.

Clean-Up personnel provided by: Parade Committee

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.

Ron Brown

PRINTED NAME of authorized representative/applicant

Ron Brown — 9-13-21

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 7th Street, Room 166
Topeka, KS 66603

OFFICIAL USE ONLY

City Clerk's Office

Date Application Received: 9/27/2021 By: K Bogner

Date Non-Refundable Special Event Application Fee Received: 9/27/2021

Fee Received By: K. Bogner Fee Amount: $ 50

Cash ( ) Credit ( ) Check (X)/No._____ Receipt # 00139

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 were notified at least ten days prior to the event.

Ron Brown

PRINTED NAME of authorized representative/applicant

SIGNATURE of authorized representative/applicant

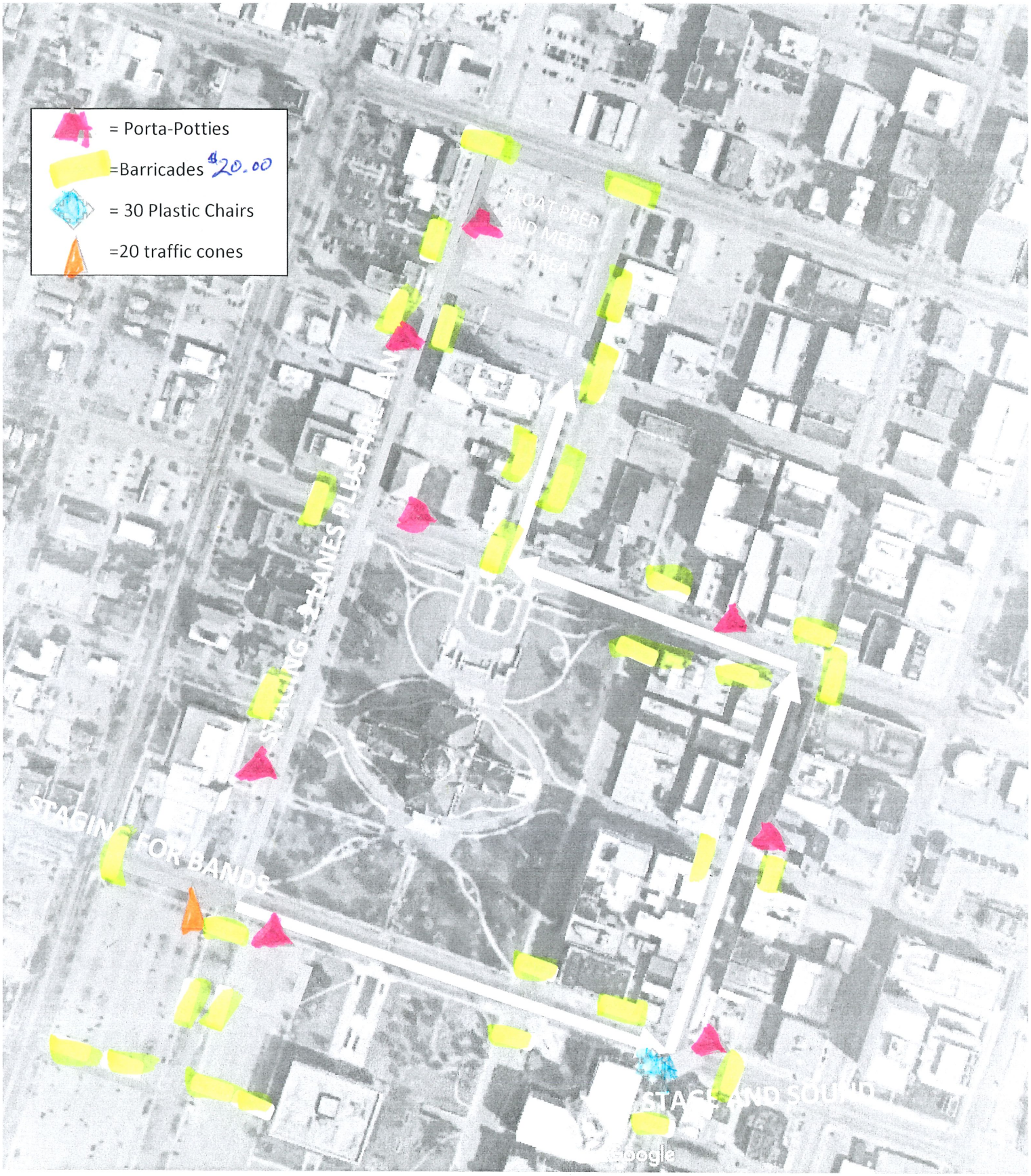
9-27-21

Date

Email: cclerk@topeka.org

Fax: 785-368-3943

Address: City Clerk's Office
215 SE 7th Street, Room 166
Topeka, KS 66603


= Porta-Potties
=Barricades $20.00
= 30 Plastic Chairs
=20 traffic cones
STAGING LANES PLUS
STAGING FOR BANDS
Google

CITY OF TOPEKA

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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: VETERANS DAY PARADE

Event Date(s): NOV. 6, 2021 Estimated attendance: 4000

Location of Event: 10TH AND HARRISON

Name of Authorized Representative: RON BROWN

Address: 4113 SE 32ND TERR State: KS Zip: 66605

Home Phone: _____ Work Phone: _____ Cell Phone: 785-215-0723

Email: RONBROWN4113@GMAIL.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 ☒ By MAIL

Check Refund Information:

Name and/or Company: KANSAS N.G. FOUNDATION

Address: 4228 SW 29TH TERR State: KS Zip: 66614

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.

ROW BROWN

PRINTED NAME of authorized representative/applicant

SIGNATURE of authorized representative/applicant Date 9.27.21

Internal Use Only

City Clerk's Office
Date Fee Received: 9/27/2021
Fee Received By: K Bogner Fee Amount: $250

Cash ( ) Credit ( ) Check (X) No. 10001 Receipt # 00739

APPROVAL TO ISSUE REFUND OF DEBRIS DEPOSIT: YES NO DATE: _____

CHECK NO. _____