

*Referrals
9/4/18*

**NEIGHBORHOOD
AND COMMUNITY
SERVICES STANDING
COMMITTEE**

95

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MAYOR'S OFFICE COORDINATORS REPORT

OVERALL STATUS (please circle): **APPROVED** **DENIED** **N/A** **CANCELED**

Petition #: 478 Event Name: Convoy of Hope Detroit

Event Date : September 22, 2018

Street Closure: None

Organization Name: Convoy of Hope Detroit

Street Address: P.O. Box 39007 Redford, MI 48239

Receipt date of the COMPLETED Special Events Application:	
Date of City Clerk's Departmental Reference Communication:	
Due date for City Departments reports:	
Due date for the Coordinators Report to City Clerk:	

Event Elements (check all that apply):

- Walkathon Carnival/Circus Concert/Performance Run/Marathon
- Bike Race Religious Ceremony Political Ceremony Festival
- Filming Parade Sports/Recreation Rally/Demonstration
- Fireworks Convention/Conference Other: _____
- 24-Hour Liquor License**

Petition Communications (include date/time)

Community Service event held at Bishop Field Park - 2971 Ferry Park from 9:00am - 3:00pm which will provide free haircuts, groceries, and community assistance.

**** ALL permits and license requirements must be fulfilled for an approval status ****

Date	Department	N/A	APPROVED	DENIED	Additional Comments
	DPD	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contracted with Prudential Security to Provide Private Security Services
	DFD/EMS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pending Inspections
	DPW	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Jurisdiction
	Health Dept.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Permits Required

Date	Department	N/A	APPROVED	DENIED	Additional Comments
	TED	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Barricades Required
	Recreation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Application Received & Approved as Presented
	Bldg & Safety	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Permits Required for Tents
	Bus. License	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Permits Required
	Mayor's Office	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	All Necessary permits must be obtained prior to event. If permits are not obtained, departments can enforce closure of event.
	Municipal Parking	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Jurisdiction
	DDOT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Impact on Buses

MAYOR'S OFFICE

Signature: Bethanie Juster

Date: August 22, 2018

City of Detroit
OFFICE OF THE CITY CLERK

Janice M. Winfrey
City Clerk

Caven West
Deputy City Clerk/Chief of Staff

DEPARTMENTAL REFERENCE COMMUNICATION

Wednesday, August 08, 2018

To: The Department or Commission Listed Below

From: Janice M. Winfrey, Detroit City Clerk

The following petition is herewith referred to you for report and recommendation to the City Council.

In accordance with that body's directive, kindly return the same with your report in duplicate within four (4) weeks.

DPW - CITY ENGINEERING DIVISION MAYOR'S OFFICE
PLANNING AND DEVELOPMENT DEPARTMENT POLICE DEPARTMENT
FIRE DEPARTMENT BUSINESS LICENSE CENTER

478 *Convoy of Hope Detroit, request to hold "Convoy of Hope Detroit" at 2971 Ferry Park on September 22, 2018 from 9:00 AM to 3:00 PM with Set up to begin 9-18-18 and tear down to be completed on 9-22-18.*

City of Detroit Special Events Application

Successful events are the result of advance planning, effective communication and teamwork. The City of Detroit will be strictly adhering to the Special Events Guidelines; please print them out for reference. Petitioners are required to complete the information below so that the City of Detroit may gain a thorough understanding of the scope and needs of the event. This form must be completed and returned to the Special Events and Film Handling Office at least **60 days** prior to the first date of the event. If submitted later than 60 days prior, application is subject to denial. Please type or print clearly and attach additional sheets and maps as needed.

Event Name: Convoy of Hope Detroit

Event Location: 2971 Ferry Park, Detroit MI 48208

Is this going to be an annual event? Yes No

Section 2- ORGANIZATION/APPLICANT INFORMATION

Organization Name: Convoy of Hope Detroit

Organization Mailing Address: P.O.Box 39007, Redford MI 48239

Business Phone: 734.325.9177

Business Website: convoyofhope.org/detroit

Applicant Name: Arthur Ledlie

Business Phone: 734.325.9177 Ext 1

Cell Phone: 313.319.2183

Email:

Arthur@bridgenetworks.org and abl@dwo.org

Event On-Site Contact Person:

Name: Arthur Ledlie (Phone above) or Orlando Gregory
313.550.0186

Business Phone: Cell Phone:

Email: orlando.gregory@yahoo.com

Event Elements (check all that apply)

- Walkathon
- Run/Marathon
- Political Event
- Carnival/Circus
- Bike Race
- Festival
- Concert/Performance
- Religious Ceremony
- Filming

- Parade
- Sports/Recreation
- Rally/Demonstration
- Convention/Conference
- Fireworks
- Other: Community Event

Please provide a brief description of your event:

Convoy of Hope, Detroit, is a one-day, outdoor, community service event held Saturday, September 22, 2018 in Bishop Park field~ 2971 Ferry Park, Detroit MI 48208 (Adjacent to Northwestern High School location). COHD is designed to serve over 5-7,000 Detroit residents of Detroit in Districts 5 and 7 (primarily zip codes 48201, 48202, 48204, 48206 48208,48210), and deliver over \$1,000,000 in goods and services to the community.

Convoy of Hope Detroit features free groceries, haircuts, family portraits, opportunities to engage numerous non-profit and business owners and volunteers providing job services, health and dental services, veteran's services, a kids' zone for the day and long term partnership opportunities within the city of Detroit.

Convoy of Hope Detroit has been to Detroit 3 times during the last 15 years servicing over 30,000 Detroiters at Osborn, Northwestern High School locations and during the Superbowl. Convoy of Hope Detroit is a collaborative effort to help the community with Straightgate Church, Central Detroit Christian CDC, Detroit World Outreach, Bridge Networks and a number of Detroit area churches, non-profits and businesses, whose goal together is to provide hope for a greater quality of life in the City of Detroit.

What are the projected set-up, event and tear down dates and times (must be completed)?

Begin Set-up Date : 9/18/18 Time: 9am Complete Set-up Date: 9/21/18 Time: 5pm

Event Start Date: 9/22/18 Time: 9am Event End Date: 9/22/18 Time: 3:00pm

Begin Tearing Down Date: 9/22 Complete Tear Down Date: 9/22

Event Times (If more than one day, give times for each day): Leadership Team: 5:30am Volunteers On Site 7:30am Meeting; Tear Down 2-5pm

Location of Event: 2971 Ferry Park, Detroit MI 48208

Facilities to be used (circle): Street Sidewalk X Park x City
Facility

Please attach a copy of Port-a-John, Sanitation, and Emergency Medical Agreements as well as a site plan which illustrates the anticipated layout of your event including the following:

- Public entrance and exit
- Location of merchandising booths
- Location of food booths
- Location of garbage receptacles
- Location of beverage booths
- Location of sound stages
- Location of hand washing sinks
- Location of portable restrooms
- Location of First Aid
- Location of fire lane
- Proposed route for walk/run
- Location of tents and canopies
- Sketch of street closure
- Location of bleachers
- Location of press area
- Sketch of proposed light pole banners

Describe the entertainment for this year's event: None, just music playing through speakers.

Will a sound system be used? Yes No

If yes, what type of sound system?

1 small system with two powered speakers, mixing board, cabling

Describe specific power needs for entertainment and/or music:

How many generators will be used? ..

6

How will the generators be fueled?

Gas

Name of vendor providing generators:

Straightgate Church

Contact Person: David Merritt

Address: 10100 Grand River

Phone:(313) 491-8430

City/State/Zip Detroit Mi 48204

Will there be advanced ticket sales? Yes No
If yes, please describe:

Will there be on-site ticket sales? Yes No
If yes, list price(s):

Will there be vending or sales? Yes No
If yes, check all that apply:

Food Merchandise Non-Alcoholic Beverages Alcoholic Beverages

Indicate type of items to be sold: None

Name of Private Security Company: Existing park contract security will be used.

Contact Person: Mike Gomez

Address: PO Box 1988

Phone: 313.215.6763

City/State/Zip: Taylor, MI 48180

Number of Private Security Personnel Hired Per Shift: 6

Are the private security personnel (check all that apply):

Licensed Armed Bonded

How will you advise attendees of parking options?

 By email, flyers and social media

How will your event impact the surrounding community (i.e. pedestrian traffic, sound carryover, safety)?
Foot traffic in and out of event

Have local neighborhood groups/businesses approved your event?

Mayor Michael Duggan

Alexis Wiley (City of Detroit: Mayor's Office Chief of Staff)

Tabernacle Baptist Church, Associate Pastor Terry Robinson

District 5, Mary Sheffield

Detroit Olympia Armory (Alex Kasshenider)

Bishop Andrew Merritt, Straight gate International Church

Lisa Johannan: Central Detroit Christian CDC

Indicate what steps you have or will take to notify them of your event: Phone/Email/Organizational

Meetings/ Planning Meetings/Team Leader Trainings

Complete the appropriate categories that apply to the event **Structure**

	How Many?	Size/Height
Booth		
Tents (enclosed on 3 sides)	9	1 - 20x40 4 - 40x40 4 - 60x90
Tents (enclosed on 2 sides)	2	1 - 40x60 1 - 60x90
Canopy (open on all sides)	8	6 - 10x10 1 - 20x20 1 - 40x40

Staging/Scaffolding

Bleachers

Emergency medical services?

Contact Person: Dr. Regina R. Frost, MD

Address: 21000 E. 12 Mile Rd Suite 102

City/State/Zip: St. Clair Shores, MI 48081

Name of company providing port-a-johns.
Scotty's Pottys, Bob Sanitation

Contact Person: Lori Proctor

Address: 27940 Wick Rd

Phone: 888-610-0783 734-241-1400

City/State/Zip: Romulus

Name of private catering company?

Contact Person: N/A

Address:

Phone:

City/State/Zip

SPECIAL USE REQUESTS

List any streets or possible streets you are requesting to be closed. Include the day, date, and time of requested closing and reopening.
Neighborhood Signatures must be submitted with application for approval. **Barricades are not available from the City of Detroit.**

Attach a map or sketch of the proposed area for closure.

STREET NAME: _____

FROM: _____ TO: _____

CLOSURE DATES: _____ BEG TIME: _____ END TIME: _____

REOPEN DATE: _____ TIME: _____

STREET NAME: _____

FROM: _____ TO: _____

CLOSURE DATES: _____ BEG TIME: _____ END TIME: _____

REOPEN DATE: _____ TIME: _____

STREET NAME: _____

FROM: _____ TO: _____

CLOSURE DATES: _____ BEG TIME: _____ END TIME:

REOPEN DATE: _____ TIME:

STREET NAME: _____

FROM: _____ TO:

CLOSURE DATES: _____ BEG TIME: _____ END TIME:

REOPEN DATE: _____ TIME:

STREET NAME: _____

FROM: _____ TO:

CLOSURE DATES: _____ BEG TIME: _____ END TIME:


REOPEN DATE: _____ TIME:

PLEASE ADD IMPORTANT INFORMATION BELOW AND ATTACH A COPY OF THE FOLLOWING:

- 1) **CERTIFICATE OF INSURANCE (attached)**
- 2) **EMERGENCY MEDICAL AGREEMENT**
Health Service Tent
Medical Professionals staffing that tent
First Aid Tent next to the Health Service Tent
- 3) **SANITATION AGREEMENT**
Clean-up plan by 1500 volunteers:
There will be ongoing clean-up throughout the event.
Each area of service will clean its area at the end of the event.
The Logistics team will direct a final clean up for the entire site.
- 4) **PORT-A-JOHN AGREEMENT (attached)**
5 - ADA
15 - Regular Port a Potties
Average guest stays 1 hour - w/ kids 2 hours
- 5) **COMMUNITY COMMUNICATION (see top of page 5)**

AUTHORIZATION & AFFIDAVIT OF APPLICANT

I certify that the information contained in the foregoing application is true and correct to the best of my knowledge and belief that I have read, understood and agreed to abide by the rules and regulations governing the proposed Special Event, and I understand that this application is made subject to the rules and regulations established by the Mayor or the Mayor's designee. Applicant agrees to comply with all other requirements of the City, County, State, and Federal Government and any other applicable entity, which may pertain to Special Events. I further agree to abide by these rules, and further certify that I, on behalf of the Event agree to be financially responsible for any costs and fees that may be incurred by or on behalf of the Event, to the City of Detroit.


Signature of Applicant

ARTHUR B. LEDUE 6/14/18
8300 N. HIX ROAD
WESTLAND MI 48185

Date 6/14/18

NOTE: Completion of this form does not constitute approval of your event. Pending review by the Special Events Management Team, you will be notified of any requirements, fees, and/or restrictions pertaining to your event.

HOLD HARMLESS AND INDEMNIFICATION

The Applicant agrees to indemnify and hold the City of Detroit (which includes its agencies, officers, elected officials, appointed officials and employees) harmless from and against injury, loss, damage or liability (or any claims in respect of the foregoing including claims for personal injury and death, damage to property, and reasonable outside attorney's fees) arising from activities associated with this permit, except to the extent attributable to the gross negligence or intentional act or omission of the City.

Applicant affirms that Applicant has read and understands the Hold Harmless and Indemnification provision and agrees to the terms expressed therein.

(Please Print)

Event Name: CONVOY OF HOPE DETROIT

Event Date: 09/22/18

Event Organizer: COORDINATOR: ARTHUR LEDUE

Applicant Signature: 

Date: 06/14/18



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
6/8/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER R&A INSURANCE SERVICES INC. 8061 21 MILE ROAD UNIT 3 SHELBY TWP, MI 48317		CONTACT NAME: DAN CONROY PHONE (A/C, No, Ext): 586-286-3727 FAX (A/C, No): 586-286-2848 E-MAIL ADDRESS: dan@ra-insurance.com	
INSURED STRAIGHT GATE 10100 GRAND RIVER AVE DETROIT, MI. 48204		INSURER(S) AFFORDING COVERAGE INSURER A: GuideOne Insurance INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	


COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY			1427-596	3/28/2018	3/28/2019	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						MED EXP (Any one person) \$ 15,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						PERSONAL & ADV INJURY \$ 1,000,000
	OTHER:						GENERAL AGGREGATE \$ 3,000,000
	AUTOMOBILE LIABILITY						PRODUCTS - COMP/OP AGG \$
	<input type="checkbox"/> ANY AUTO						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per person) \$
	<input type="checkbox"/> HIRED AUTOS						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS						PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> NON-OWNED AUTOS						\$
	UMBRELLA LIAB						EACH OCCURRENCE \$
	EXCESS LIAB						AGGREGATE \$
	DED						\$
	RETENTION \$						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						OTHER
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

NOTE: Insured is hosting a Special Event on 9/22/2018 at Bishop Park Field, 2791 Ferry Park St., Detroit, Mi. 48208. Certificate Holder is also Additional Insured. Subject to policy terms and conditions.

CERTIFICATE HOLDER CONVOY OF HOPE 330 S. PATTERSON AVE SPRINGFIELD, MO 65802	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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NAMED INSURED : Straight Gate

POLICY NUMBER: 01427596

COMMERCIAL GENERAL LIABILITY
CG 20 26 07 04

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)
Convoy of Hope 330 S Patterson Ave Springfield, MO 65802
The above is named as an Additional Insured for the Convoy of Hope community outreach event that Straight Gate is co-sponsoring on September 22, 2018 at the following location:
2791 Ferry Park Street Detroit, MI 48208
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

- A. In the performance of your ongoing operations; or
- B. In connection with your premises owned by or rented to you.

From: Drew Weber <drewscottypotties@gmail.com>

Date: June 14, 2018 at 12:58:42 PM EDT

To: ARTHUR@bridgenetworks.org

Subject: QUOTE

Good Morning,

If you need a more formal quote I apologize but we simply do not have the time to get that written out at this time of the year. The standard special event units are \$125 each. and the ADA units are \$225 each. The total would be \$3,000 even.

Drew Weber
Bob's Sanitation
Scotty's Potties
734.421.1400



- ⋯ = Safety Fencing
- ⊕ = Manned Gate
- = Foot Traffic
- ★ = Safety Personnel
- ⊕ = Restroom
- = ADA Accessible

Convoy of Hope
Bishop Park
Revised 6-12-18

© 2018 Google

Grand River Ave

Google Earth

1999

42°21'18.81" N 83°08'12.08" W elev 620 ft eye alt 1395 ft



Google Earth

42°21'24.74" N 83°06'10.13" W elev 622 ft eye alt 3042 ft

© 2018 Google

Bishop Park

533 ft

1999

Grand River Ave

W Grand Blvd

Wildemere Ave

Lothrop Ave

Ferry Park St

Lawton St

McGraw St

Marquette Ave

Wreford St

Nebraska St

Hooker St



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MAYOR'S OFFICE COORDINATORS REPORT

OVERALL STATUS (please circle): **APPROVED** **DENIED** **N/A** **CANCELED**

Petition #: 480 Event Name: Sukkah x Detroit

Event Date : September 23, 2018

Street Closure: None

Organization Name: Isaac Agree Downtown Synagogue

Street Address: 1457 Griswold Detroit, MI 48226

Receipt date of the COMPLETED Special Events Application:	
Date of City Clerk's Departmental Reference Communication:	
Due date for City Departments reports:	
Due date for the Coordinators Report to City Clerk:	

Event Elements (check all that apply):

- Walkathon Carnival/Circus Concert/Performance Run/Marathon
- Bike Race Religious Ceremony Political Ceremony Festival
- Filming Parade Sports/Recreation Rally/Demonstration
- Fireworks Convention/Conference Other: _____
- 24-Hour Liquor License**

Petition Communications (include date/time)

Collaboration of the Jewish Harvest Festival and Detroit Design Month to place five "Sukkahs" in Capitol Park as educational and marketplace huts from 6:00am - 11:00pm.

**** ALL permits and license requirements must be fulfilled for an approval status ****

Date	Department	N/A	APPROVED	DENIED	Additional Comments
	DPD	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contracted with Eagle Security to Provide Private Security Services
	DFD/EMS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pending Inspections
	DPW	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Permits Required
	Health Dept.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Temporary Food License Required for Food Vendors

Date	Department	N/A	APPROVED	DENIED	Additional Comments
	TED	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Barricades Required
	Recreation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Application Received & Approved as Presented
	Bldg & Safety	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Permits Required for Sukkah Structures
	Bus. License	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Vendors License Required
	Mayor's Office	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	All Necessary permits must be obtained prior to event. If permits are not obtained, departments can enforce closure of event.
	Municipal Parking	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Jurisdiction
	DDOT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Impact on Buses

MAYOR'S OFFICE

Signature: Bethanie Ausher

Date: August 22, 2018

City of Detroit

Janice M. Winfrey
City Clerk

OFFICE OF THE CITY CLERK

Caven West
Deputy City Clerk/Chief of Staff

DEPARTMENTAL REFERENCE COMMUNICATION

Wednesday, August 08, 2018

To: The Department or Commission Listed Below

From: Janice M. Winfrey, Detroit City Clerk

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In accordance with that body's directive, kindly return the same with your report in duplicate within four (4) weeks.

DPW - CITY ENGINEERING DIVISION MAYOR'S OFFICE
PLANNING AND DEVELOPMENT DEPARTMENT RECREATION DEPARTMENT
POLICE DEPARTMENT FIRE DEPARTMENT
BUSINESS LICENSE CENTER

480 *Isaac Agree Downtown Synagouge, request to hold "Sukkah x Detroit" at Capitol Park from September 23 to 30, 2018 from 8:00 AM to 10:00 PM each day. Set up begins 9-14-18, tear down completed 10-5-18.*

City of Detroit Special Events Application

Successful events are the result of advance planning, effective communication and teamwork. The City of Detroit will be strictly adhering to the Special Events Guidelines; please print them out for reference. Petitioners are required to complete the information below so that the City of Detroit may gain a thorough understanding of the scope and needs of the event. This form must be completed and returned to the Special Events and Film Handling Office at least **60 days** prior to the first date of the event. If submitted later than 60 days prior, application is subject to denial. Please type or print clearly and attach additional sheets and maps as needed.

Section 1- GENERAL EVENT INFORMATION

Event Name: Sukkah x Detroit

Event Location: Capitol Park

Is this going to be an annual event? Yes No

Section 2- ORGANIZATION/APPLICANT INFORMATION

Organization Name: Isaac Agree Downtown Synagogue

Organization Mailing Address: 1457 Griswold, Detroit, MI 48226

Business Phone: (313) 962-4047

Business Website: DowntownSynagogue.org

Applicant Name: Jodee Fishman Raines

Business Phone: (248) 302-3502

Cell Phone: (248) 302-3502

Email: jraines@erbff.org

Event On-Site Contact Person: Name: Sigal Hemy

Business Phone: (724) 713-4851

Cell Phone: (724) 713-4851

Email: shemy@erbff.org

Event Elements (check all that apply)

Walkathon

Carnival/Circus

Concert/Performance

Run/Marathon

Bike Race

Religious Ceremony

Political Event

Festival

Filming

Parade

Sports/Recreation

Rally/Demonstration

Convention/Conference

Fireworks

Other: _____

Please provide a brief description of your event:

Throughout the last week of September, as part of Detroit's Month of Design, Sukkah x Detroit will celebrate the Jewish harvest festival of Sukkot in Detroit's Capitol Park with a display of five to seven sukkahs selected through the largest international design competition in Detroit's recent history.

The competition, which attracted 78 applications from 14 countries, is modeled after New York's 2010 Sukkah City, adding educational and agricultural elements.

Since biblical times, the sukkah—a temporary structure giving thanks for the fall harvest and commemorating the exodus from Egypt—has served as the centerpiece of the eight-day Jewish holiday of Sukkot.

From September 23-30, Capitol Park will be transformed into an open-air marketplace featuring produce, food products, crafts, and Jewish educational events interspersed amongst the sukkahs, showcasing Detroit's design, urban agriculture, and Jewish communities on a national and international stage.

What are the projected set-up, event and tear down dates and times (must be completed)?

Begin Set-up Date: 9/14/18 Time: 6AM Complete Set-up Date: 9/22/18 Time: 11PM

Event Start Date: 9/23/18 Time: 6AM Event End Date: 9/30/18 Time: 11PM

Begin Tearing Down Date: 10/1/18 Complete Tear Down Date: 10/5/18

Event Times (If more than one day, give times for each day):

Daily 8AM-10PM

Section 3- LOCATION/SITE INFORMATION

Location of Event: Capitol Park

Facilities to be used (circle): Street Sidewalk **Park** City
Facility

Please attach a copy of Port-a-John, Sanitation, and Emergency Medical Agreements as well as a site plan which illustrates the anticipated layout of your event including the following:

- Public entrance and exit
- Location of merchandising booths
- Location of food booths
- Location of garbage receptacles
- Location of beverage booths
- Location of sound stages
- Location of hand washing sinks
- Location of portable restrooms
- Location of First Aid
- Location of fire lane
- Proposed route for walk/run
- Location of tents and canopies
- Sketch of street closure
- Location of bleachers
- Location of press area
- Sketch of proposed light pole banners

Section 4- ENTERTAINMENT

Describe the entertainment for this year's event:

Several lunch and learns related to urban agriculture, sustainability, design, and interfaith programs. Additional activities that include dinners, lectures, farmers market, family programming, and co-working space.

Will a sound system be used? **Yes** No

If yes, what type of sound system? Microphone and portable speaker for amplification of panel discussions.

Describe specific power needs for entertainment and/or music:

Outlets for the co-working space and portable speaker.

How many generators will be used? 1 small generator for speaker and co-working space connections

How will the generators be fueled? Diesel

Name of vendor providing generators: Contact Person: Aggreko — Contact: Don Gray

Address: 8119 Park Place, Brighton, Michigan 48116

Phone: 920-694-0929

Section 5- SALES INFORMATION

Will there be advanced ticket sales? Yes No

If yes, please describe:

Will there be on-site ticket sales? Yes No

If yes, list price(s):

Will there be vending or sales? Yes No

If yes, check all that apply:

Food Merchandise Non-Alcoholic Beverages Alcoholic Beverages

Indicate type of items to be sold: During the week, farm-type vendors will sell produce and/or goods from inside the sukkah or 10x10 tents. All vendors will be Detroit based and responsible for securing their own business licenses and permits. Hours are TBD, the vendors will operate daily.

Section 6- PUBLIC SAFETY & PARKING INFORMATION

Name of Private Security Company: Existing park contract security will be used.

Contact Person: Pam Lenoir

Address: 1074 Woodward Ave

Phone: O. 313.373.0708 C: 313.820.4618

City/State/Zip: Detroit, MI 48226

Number of Private Security Personnel Hired Per Shift: To be determined in partnership with DDP.

Are the private security personnel (check all that apply):

Licensed

Armed

Bonded

How will you advise attendees of parking options?

Attendees will be directed to surface lots, street parking, and surrounding parking decks.

Section 7- COMMUNICATION & COMMUNITY IMPACT INFORMATION

How will your event impact the surrounding community (i.e. pedestrian traffic, sound carryover, safety)?

The event will enrich the communities lives with cultural programming and create community in public space.

Have local neighborhood groups/businesses approved your event? Yes No Indicate

what steps you have or will take to notify them of your event: Outreach to surrounding businesses via email or face to face.

Section 8- EVENT SET-UP

Complete the appropriate categories that apply to the event **Structure**

	How Many?	Size/Height
Lean-to like structures	5	approx. 10' x 12'

Few notes on the selection of the structures:

1) We had 78 total entries from 14 different countries. 15 of the entries were from the City of Detroit, with another 8 from the metro Detroit area (including Ann Arbor).

2) On average, the sukkah dimensions are 10'x12'. Once we select our 5 finalists, we will pair them with an engineer and make any necessary adjustments to the scale and design of the sukkahs for safety and constructability.

3) Selection process: our jury (full list and affiliations included below) will narrow down the 78 submissions to about 20 by July 27. Select images depicting the designs with the highest scores to date are attached. On July 31, the jury will meet in person to select 5 finalists and up to 5 back-up designs. Selection criteria are:

- Originality, coherence, and clarity of the design
- Ease of assembly and disassembly on-site
- Performativity, inhabitability, and ability to host programming.

In addition, jurors will balance factors such as size, function, form, and diversity of applicants, including balancing local and national applicants.

4) In addition to promotion throughout the UNESCO network, an intentional effort was made to recruit local talent for the design competition. We promoted the competition at local design schools, had articles in Model D and Curbed Detroit, made announcement at the Detroit Fine Arts Breakfast Club, conducted personal outreach throughout the Detroit art and design community, and posted flyers (attached for reference) throughout the city.

Jury:

- Abir Ali, The Platform
- Melinda Anderson, Design Core Detroit
- Patty Boyle, SmithGroupJJR
- Jeff Kidorf, Albert Kahn Associates
- Tiff Massey, Artist and Architect
- Noah Resnick, UD Mercy School of Architecture and Laavu
- Anya Sirota, University of Michigan Taubman College and Akoaki

Section 9- COMPLETE ALL THAT APPLY

Emergency medical services?

Contact Person: DMCare Express | Terrye Nicholls | Director of Operations | Terrye.Nicholls@beaumont.org

Address: 1600 E. Grand Blvd, Suite 200

City/State/Zip: Detroit, MI 48211

Name of company providing port-a-johns. N/A already existing within the park

Contact Person:

Address:

Phone:

City/State/Zip:

Name of private catering company? N/A

Contact Person:

Address:

Phone:

City/State/Zip:

SPECIAL USE REQUESTS

List any streets or possible streets you are requesting to be closed. Include the day, date, and time of requested closing and reopening. Neighborhood Signatures must be submitted with application for approval. **Barricades are not available from the City of Detroit.**

Attach a map or sketch of the proposed area for closure.

STREET NAME: n/a _____

FROM: _____ TO: _____

CLOSURE DATES: _____ BEG TIME: _____ END TIME: _____

REOPEN DATE: _____ TIME: _____

STREET NAME: _____

FROM: _____ TO: _____

CLOSURE DATES: _____ BEG TIME: _____ END TIME: _____

REOPEN DATE: _____ TIME: _____

STREET NAME: _____

FROM: _____ TO: _____

CLOSURE DATES: _____ BEG TIME: _____ END TIME: _____

REOPEN DATE: _____ TIME: _____

STREET NAME: _____

FROM: _____ TO: _____

CLOSURE DATES: _____ BEG TIME: _____ END TIME: _____

REOPEN DATE: _____ TIME: _____

STREET NAME: _____

FROM: _____ TO: _____

CLOSURE DATES: _____ BEG TIME: _____ END TIME: _____

REOPEN DATE: _____ TIME: _____

PLEASE ADD IMPORTANT INFORMATION BELOW AND ATTACH A COPY OF THE FOLLOWING:

- 1) **CERTIFICATE OF INSURANCE**
- 2) **EMERGENCY MEDICAL AGREEMENT**
- 3) **SANITATION AGREEMENT**
- 4) **PORT-A-JOHN AGREEMENT**
- 5) **COMMUNITY COMMUNICATION**

AUTHORIZATION & AFFADAVIT OF APPLICANT

I certify that the information contained in the foregoing application is true and correct to the best of my knowledge and belief that I have read, understood and agreed to abide by the rules and regulations governing the proposed Special Event, and I understand that this application is made subject to the rules and regulations established by the Mayor or the Mayor’s designee. Applicant agrees to comply with all other requirements of the City, County, State, and Federal Government and any other applicable entity, which may pertain to Special Events. I further agree to abide by these rules, and further certify that I, on behalf of the Event agree to be financially responsible for any costs and fees that may be incurred by or on behalf of the Event, to the City of Detroit.



July 24, 2018

Signature of Applicant

Date

NOTE: Completion of this form does not constitute approval of your event. Pending review by the Special Events Management Team, you will be notified of any requirements, fees, and/or restrictions pertaining to your event.

HOLD HARMLESS AND INDEMNIFICATION

The Applicant agrees to indemnify and hold the City of Detroit (which includes its agencies, officers, elected officials, appointed officials and employees) harmless from and against injury, loss, damage or liability (or any claims in respect of the foregoing including claims for personal injury and death, damage to property, and reasonable outside attorney’s fees) arising from activities associated with this permit, except to the extent attributable to the gross negligence or intentional act or omission of the City.

Applicant affirms that Applicant has read and understands the Hold Harmless and Indemnification provision and agrees to the terms expressed therein.

(Please Print)

Event Name: Sukkah x Detroit Event Date: Sept 23-30 2018

Event Organizer: Isaac Agree Downtown Synagogue

Applicant Signature: 

Date: July 24, 2018

9697

MAYOR'S OFFICE COORDINATORS REPORT

OVERALL STATUS (please circle): **APPROVED** **DENIED** **N/A** **CANCELED**

Petition #: 483 Event Name: Detroit Lions Season Launch Party Presented by Rocket Mortgage

Event Date : September 10, 2018

Street Closure: None

Organization Name: Detroit Lions

Street Address: 2000 Brush Street Suite 200 Detroit, MI 48226

Receipt date of the COMPLETED Special Events Application:	
Date of City Clerk's Departmental Reference Communication:	
Due date for City Departments reports:	
Due date for the Coordinators Report to City Clerk:	

Event Elements (check all that apply):

- Walkathon Carnival/Circus Concert/Performance Run/Marathon
- Bike Race Religious Ceremony Political Ceremony Festival
- Filming Parade Sports/Recreation Rally/Demonstration
- Fireworks Convention/Conference Other: _____
- 24-Hour Liquor License**

Petition Communications (include date/time)

2018 Detroit Lions Season Opener event located at Campus Martius from 3:00pm - 5:30pm.

**** ALL permits and license requirements must be fulfilled for an approval status ****

Date	Department	N/A	APPROVED	DENIED	Additional Comments
	DPD	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	DPD will Provide Special Attention; Contracted with Eagle Security to Provide Private Security Services
	DFD/EMS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Permits Required
	DPW	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Permits Required
	Health Dept.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Permits Required

Date	Department	N/A	APPROVED	DENIED	Additional Comments
	TED	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Bike Racks Required
	Recreation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Application Received & Approved as Presented
	Bldg & Safety	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Permits Required for Tent
	Bus. License	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Permits Required
	Mayor's Office	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	All Necessary permits must be obtained prior to event. If permits are not obtained, departments can enforce closure of event.
	Municipal Parking	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Jurisdiction
	DDOT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Impact on Buses

MAYOR'S OFFICE

Signature: Bethanie Jusker

Date: August 20, 2018

DEPARTMENTAL REFERENCE COMMUNICATION

Wednesday, August 08, 2018

To: The Department or Commission Listed Below

From: Janice M. Winfrey, Detroit City Clerk

The following petition is herewith referred to you for report and recommendation to the City Council.

In accordance with that body's directive, kindly return the same with your report in duplicate within four (4) weeks.

MAYOR'S OFFICE PLANNING AND DEVELOPMENT DEPARTMENT
DPW - CITY ENGINEERING DIVISION POLICE DEPARTMENT
FIRE DEPARTMENT RECREATION DEPARTMENT
BUSINESS LICENSE CENTER

483 *Detroit Lions, request to hold "Detroit Lions Season Launch Party presented by Rocket Mortgage" at Campus Martius Park on September 10, 2018 from 3:00 PM to 5:30 PM with set up to begin on 9-10-18 and tear down to end on 9-11-18*

City of Detroit Special Events Application

Successful events are the result of advance planning, effective communication and teamwork. The City of Detroit will be strictly adhering to the Special Events Guidelines; please print them out for reference. Petitioners are required to complete the information below so that the City of Detroit may gain a thorough understanding of the scope and needs of the event. This form must be completed and returned to the Special Events and Film Handling Office at least **60 days** prior to the first date of the event. If submitted later than 60 days prior, application is subject to denial. Please type or print clearly and attach additional sheets and maps as needed.

Section 1- GENERAL EVENT INFORMATION

Event Name: Detroit Lions Season Launch Party presented by Rocket Mortgage (name is tentative and subject to change)

Event Location: Campus Martius

Is this going to be an annual event? Yes No *There is a strong possibility it will be, but that is not official yet.*

Section 2- ORGANIZATION/APPLICANT INFORMATION

Organization Name: Detroit Lions

Organization Mailing Address: 2000 Brush Street, Suite 200, Detroit, MI 48226

Business Phone: (313) 262-2000 Business Website: www.detroitlions.com

Applicant Name: Emily Griffin – Vice President of Marketing, Detroit Lions

Business Phone: (313) 262-2206 Cell Phone: (313) 434-0088 Email: emily.griffin@lions.nfl.net

Event On-Site Contact Person:

Name: Dan Stropes

Business Phone: (313) 262-2840 Cell Phone: (734) 664-0414

Email: emily.griffin@lions.nfl.net / dan.stropes@lions.nfl.net

Event Elements (check all that apply)

- Walkathon
- Run/Marathon
- Political Event
- Parade
- Convention/Conference
- Carnival/Circus
- Bike Race
- Festival
- Sports/Recreation
- Fireworks
- Concert/Performance
- Religious Ceremony
- Filming
- Rally/Demonstration
- Other: _____

Please provide a brief description of your event:

The event is a celebration of the start of the 2018 Detroit Lions football season, taking place just hours before the first home game is played at Ford Field against the New York Jets on Monday Night Football. Fans will be invited to come down to enjoy live music from LANCO, a performance by members of the Detroit Lions Cheerleaders and free giveaways.

What are the projected set-up, event and tear down dates and times (must be completed)?

Begin Set-up Date : 9/10/18 Time: 7:00am Complete Set-up Date: 9/10/18 Time: 1:30pm

Event Start Date: 9/10/18 Time: 3:00pm Event End Date: 9/10/19 Time: 5:30pm

Begin Tearing Down Date: 9/10/18 Complete Tear Down Date: 11:00am - 9/11/18

Event Times (If more than one day, give times for each day):

N/A

Section 3- LOCATION/SITE INFORMATION

Location of Event: Campus Martius Lawn and West End of Cadillac Square

Facilities to be used (circle): Street Sidewalk Park City
Facility

Please attach a copy of Port-a-John, Sanitation, and Emergency Medical Agreements as well as a site plan which illustrates the anticipated layout of your event including the following:

- Public entrance and exit
- Location of merchandising booths
- Location of food booths
- Location of garbage receptacles
- Location of beverage booths
- Location of sound stages
- Location of hand washing sinks
- Location of portable restrooms
- Location of First Aid
- Location of fire lane
- Proposed route for walk/run
- Location of tents and canopies
- Sketch of street closure
- Location of bleachers
- Location of press area
- Sketch of proposed light pole banners

Section 4- ENTERTAINMENT

Describe the entertainment for this year's event:

Emcee + country music band, LANCO.

Will a sound system be used? Yes No

If yes, what type of sound system? TBD

Describe specific power needs for entertainment and/or music:

How many generators will be used? _____

How will the generators be fueled? _____

Name of vendor providing generators:

Contact Person:

Address:

Phone:

City/State/Zip

Section 5- SALES INFORMATION

Will there be advanced ticket sales? Yes No

If yes, please describe:

Will there be on-site ticket sales? Yes No

If yes, list price(s):

Will there be vending or sales? Yes No

If yes, check all that apply:

[] Food [X] Merchandise [X] Non-Alcoholic Beverages [X] Alcoholic Beverages

Indicate type of items to be sold: Water, Soda, Beer, Lions Apparel + Novelty Items

Section 6- PUBLIC SAFETY & PARKING INFORMATION

Name of Private Security Company: Existing park contract security will be used.

Contact Person: Eagle Security

Address:

Phone:

City/State/Zip:

Number of Private Security Personnel Hired Per Shift:

Are the private security personnel (check all that apply):

[] Licensed

[] Armed

[] Bonded

How will you advise attendees of parking options?

Via email and social media.

Section 7- COMMUNICATION & COMMUNITY IMPACT INFORMATION

How will your event impact the surrounding community (i.e. pedestrian traffic, sound carryover, safety)?

Pedestrian traffic, sound.

Have local neighborhood groups/businesses approved your event? Yes No

Indicate what steps you have or will take to notify them of your event: Personal visit, phone call, letter.

Section 8- EVENT SET-UP

Complete the appropriate categories that apply to the event **Structure**

	How Many?	Size/Height
Booth	<u>1</u>	<u></u>
Tents (enclosed on 3 sides)	<u>1</u>	<u>20' x 20'</u>
Canopy (open on all sides)	<u>1</u>	<u></u>
Staging/Scaffolding	<u>1</u>	<u>25' x 15' existing stage</u>
Bleachers	<u>None</u>	<u></u>

Section 9- COMPLETE ALL THAT APPLY

Emergency medical services?

Contact Person:

Address:

City/State/Zip:

Name of company providing port-a-johns. **SCOTTIE'S POTTIES**

Contact Person:

Address: Phone:

City/State/Zip:

Name of private catering company? **FOUNTAIN DETROIT**

Contact Person: **ALYSSA FARDELL**

Address: Phone:

City/State/Zip:

SPECIAL USE REQUESTS

List any streets or possible streets you are requesting to be closed. Include the day, date, and time of requested closing and reopening. Neighborhood Signatures must be submitted with application for approval. **Barricades are not available from the City of Detroit.**

Attach a map or sketch of the proposed area for closure.

STREET NAME: _____

FROM: _____ TO: _____

CLOSURE DATES: _____ BEG TIME: _____ END TIME: _____

REOPEN DATE: _____ TIME: _____

STREET NAME: _____

FROM: _____ TO: _____

CLOSURE DATES: _____ BEG TIME: _____ END TIME: _____

REOPEN DATE: _____ TIME: _____

STREET NAME: _____

FROM: _____ TO: _____

CLOSURE DATES: _____ BEG TIME: _____ END TIME: _____

REOPEN DATE: _____ TIME: _____

STREET NAME: _____

FROM: _____ TO: _____

CLOSURE DATES: _____ BEG TIME: _____ END TIME: _____

REOPEN DATE: _____ TIME: _____

STREET NAME: _____

FROM: _____ TO: _____

CLOSURE DATES: _____ BEG TIME: _____ END TIME: _____

REOPEN DATE: _____ TIME: _____

PLEASE ADD IMPORTANT INFORMATION BELOW AND ATTACH A COPY OF THE FOLLOWING:

- 1) CERTIFICATE OF INSURANCE**
- 2) EMERGENCY MEDICAL AGREEMENT**
- 3) SANITATION AGREEMENT**
- 4) PORT-A-JOHN AGREEMENT**
- 5) COMMUNITY COMMUNICATION**

AUTHORIZATION & AFFADAVIT OF APPLICANT

I certify that the information contained in the foregoing application is true and correct to the best of my knowledge and belief that I have read, understood and agreed to abide by the rules and regulations governing the proposed Special Event, and I understand that this application is made subject to the rules and regulations established by the Mayor or the Mayor’s designee. Applicant agrees to comply with all other requirements of the City, County, State, and Federal Government and any other applicable entity, which may pertain to Special Events. I further agree to abide by these rules, and further certify that I, on behalf of the Event agree to be financially responsible for any costs and fees that may be incurred by or on behalf of the Event, to the City of Detroit.

Signature of Applicant Date

NOTE: Completion of this form does not constitute approval of your event. Pending review by the Special Events Management Team, you will be notified of any requirements, fees, and/or restrictions pertaining to your event.

HOLD HARMLESS AND INDEMNIFICATION

The Applicant agrees to indemnify and hold the City of Detroit (which includes its agencies, officers, elected officials, appointed officials and employees) harmless from and against injury, loss, damage or liability (or any claims in respect of the foregoing including claims for personal injury and death, damage to property, and reasonable outside attorney’s fees) arising from activities associated with this permit, except to the extent attributable to the gross negligence or intentional act or omission of the City.

Applicant affirms that Applicant has read and understands the Hold Harmless and Indemnification provision and agrees to the terms expressed therein.

(Please Print)

Event Name: Detroit Lions Season Launch Party presented by Rocket Mortgage **Event Date:** 9/10/18

Event Organizer: Detroit Lions

Applicant Signature: _____ **Date:** _____

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MAYOR'S OFFICE COORDINATORS REPORT

OVERALL STATUS (please circle): APPROVED DENIED N/A CANCELED

Petition #: 484 Event Name: Beacon Park - Fall Programming

Event Date : September 10 - December 2, 2018

Street Closure: None

Organization Name: Detroit 300 Conservancy

Street Address: 1 Campus Martius Suite 380 Detroit, MI 48226

Receipt date of the COMPLETED Special Events Application:	
Date of City Clerk's Departmental Reference Communication:	
Due date for City Departments reports:	
Due date for the Coordinators Report to City Clerk:	

Event Elements (check all that apply):

- Walkathon Carnival/Circus Concert/Performance Run/Marathon
- Bike Race Religious Ceremony Political Ceremony Festival
- Filming Parade Sports/Recreation Rally/Demonstration
- Fireworks Convention/Conference Other: Fall Programming
- 24-Hour Liquor License**

CITY CLERK 30 AUG 2018 PM12:12

Petition Communications (include date/time)

Fall Programming for Beacon Park located at 1901 Grand River from September 10 - December 2, 2018 with various times each day.

**** ALL permits and license requirements must be fulfilled for an approval status ****

Date	Department	N/A	APPROVED	DENIED	Additional Comments
	DPD	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	DPD will Provide Special Attention; Contracted with Eagle Security to Provide Private Security Services
	DFD/EMS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pending Inspections; Contracted with Hart Medical to Provide Private EMS Services
	DPW	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Permits Required
	Health Dept.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Temporary Food License Required

Date	Department	N/A	APPROVED	DENIED	Additional Comments
	TED	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Barricades Required
	Recreation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Application Received & Approved as Presented
	Bldg & Safety	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Permits Required for Tents
	Bus. License	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Vendors License & Liquor License Required
	Mayor's Office	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	All Necessary permits must be obtained prior to event. If permits are not obtained, departments can enforce closure of event.
	Municipal Parking	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Jurisdiction
	DDOT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Impact on Buses

MAYOR'S OFFICE

Signature: Bethanie Lusher

Date: August 20, 2018

City of Detroit
OFFICE OF THE CITY CLERK

Janice M. Winfrey
City Clerk

Caven West
Deputy City Clerk/Chief of Staff

DEPARTMENTAL REFERENCE COMMUNICATION

Thursday, August 09, 2018

To: The Department or Commission Listed Below

From: Janice M. Winfrey, Detroit City Clerk

The following petition is herewith referred to you for report and recommendation to the City Council.

In accordance with that body's directive, kindly return the same with your report in duplicate within four (4) weeks.

MAYOR'S OFFICE RECREATION DEPARTMENT
BUSINESS LICENSE CENTER DPW - CITY ENGINEERING DIVISION
POLICE DEPARTMENT FIRE DEPARTMENT
PLANNING AND DEVELOPMENT DEPARTMENT

484 *Detroit 300 Conservancy, request to hold "Beacon Park - Fall Programming" at Beacon Park on various dates from September 10, 2018 through December 2, 2018 at various times.*

City of Detroit Special Events Application

Successful events are the result of advance planning, effective communication and teamwork. The City of Detroit will be strictly adhering to the Special Events Guidelines; please print them out for reference. Petitioners are required to complete the information below so that the City of Detroit may gain a thorough understanding of the scope and needs of the event. This form must be completed and returned to the Special Events and Film Handling Office at least **60 days** prior to the first date of the event. If submitted later than 60 days prior, application is subject to denial. Please type or print clearly and attach additional sheets and maps as needed.

Section 1- GENERAL EVENT INFORMATION

Event Name: BEACON PARK – FALL PROGRAMMING

Event Location: BEACON PARK, 1901 GRAND RIVER

Is this going to be an annual event? Yes No

Section 2- ORGANIZATION/APPLICANT INFORMATION

Organization Name: DETROIT 300 CONSERVANCY

Organization Mailing Address: 1 CAMPUS MARTIUS, SUITE 380, DETROIT, MI 48226

Business Phone: 313-715-9944

Business Website: DowntownDetroitParks.com

Applicant Name: HEATHER BADRAK

Business Phone:

Cell Phone: 313-715-9944

Email: HBADRAK@DETROIT300.ORG

Event On-Site Contact Person:

Name: DAVID COWAN

Business Phone:

Cell Phone: 734-377-3472 Email: david.cowan@downtowndetroit.org

Event Elements (check all that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> Walkathon | <input type="checkbox"/> Carnival/Circus | <input type="checkbox"/> Concert/Performance |
| <input type="checkbox"/> Run/Marathon | <input type="checkbox"/> Bike Race | <input type="checkbox"/> Religious Ceremony |
| <input type="checkbox"/> Political Event | <input type="checkbox"/> Festival | <input type="checkbox"/> Filming |
| <input type="checkbox"/> Parade | <input type="checkbox"/> Sports/Recreation | <input type="checkbox"/> Rally/Demonstration |
| <input type="checkbox"/> Convention/Conference | <input type="checkbox"/> Fireworks | <input checked="" type="checkbox"/> Other: <u>FALL PROGRAMMING</u> |

CITY OF DETROIT 300 CONSERVANCY

Please provide a brief description of your event:

PARKTOBERFEST: 9/21, 9/22, 9/23, NOON – MIDNIGHT

BIG GAME VIEWING PARTY: 10/20, TIME TBD

LIONS TAILGATES & VIEWING PARTIES: 9/10, 5P – 11P, 9/23, 6P – MIDNIGHT, 10/28, 11/18 & 12/2, 11A – 5P

HALLOWEEN FAMILY FUN DAY: 10/27, 1P – 5P

What are the projected set-up, event and tear down dates and times (must be completed)?

Begin Set-up Date : _____ Time: _____ Complete Set-up Date: _____ Time: _____

Event Start Date: _____ Time: _____ Event End Date: _____ Time: _____

Begin Tearing Down Date: _____ Complete Tear Down Date: _____

Event Times (If more than one day, give times for each day):

Section 3- LOCATION/SITE INFORMATION

Location of Event: BEACON PARK, 1901 GRAND RIVER, DETROIT, MI 48226

Facilities to be used (circle): Street Sidewalk Park City
Facility

Please attach a copy of Port-a-John, Sanitation, and Emergency Medical Agreements as well as a site plan which illustrates the anticipated layout of your event including the following:

- Public entrance and exit
- Location of merchandising booths
- Location of food booths
- Location of garbage receptacles
- Location of beverage booths
- Location of sound stages
- Location of hand washing sinks
- Location of portable restrooms
- Location of First Aid
- Location of fire lane
- Proposed route for walk/run
- Location of tents and canopies
- Sketch of street closure
- Location of bleachers
- Location of press area
- Sketch of proposed light pole banners

Section 4- ENTERTAINMENT

Describe the entertainment for this year's event: ATTACHED

Will a sound system be used? Yes No

If yes, what type of sound system? HOUSE + AMPLIFIED SOUND AS NEEDED

Describe specific power needs for entertainment and/or music:
HOUSE POWER

How many generators will be used? N/A _____

How will the generators be fueled? _____

Name of vendor providing generators:

Contact Person:

Address:

Phone:

City/State/Zip

Section 5- SALES INFORMATION

Will there be advanced ticket sales? Yes No

If yes, please describe:

Will there be on-site ticket sales? Yes No

If yes, list price(s):

Will there be vending or sales? Yes No

If yes, check all that apply:

Food

Merchandise

Non-Alcoholic Beverages

Alcoholic Beverages

Indicate type of items to be sold: VARIES PER EVENT

Section 6- PUBLIC SAFETY & PARKING INFORMATION

Name of Private Security Company: Existing park contract security will be used.

Contact Person: EAGLE SECURITY, MATT WARNER

Address: 500 GRISWOLD, STE 400

Phone: 734-306-4871

City/State/Zip: DETROIT, MI 48226

Number of Private Security Personnel Hired Per Shift:

Are the private security personnel (check all that apply):

Licensed

Armed

Bonded

How will you advise attendees of parking options?

WEBSITE

Section 7- COMMUNICATION & COMMUNITY IMPACT INFORMATION

How will your event impact the surrounding community (i.e. pedestrian traffic, sound carryover, safety)?
POSITIVE IMPACT, FREE COMMUNITY ACTIVATIONS

Have local neighborhood groups/businesses approved your event? Yes No

Indicate what steps you have or will take to notify them of your event: **PARK MANAGEMENT, DTE AND**

LUMEN APPROVE

Section 8- EVENT SET-UP

Complete the appropriate categories that apply to the event **Structure**

	How Many?	Size/Height
Booth		
Tents (enclosed on 3 sides)		
Canopy (open on all sides)	1	40' x 100' (PARKTOBERFEST) 80' x 100' OCT - DEC EVENTS
Staging/Scaffolding		
Bleachers		

Section 9- COMPLETE ALL THAT APPLY

Emergency medical services? FOR PARKTOBERFEST ONLY

Contact Person: **ADAM GOTLIEB, HART EMS MEDICAL SERVICES**

Address: **220 BAGLEY, SUITE 912**

City/State/Zip: **DETROIT, MI 48226**

Name of company providing port-a-johns. SCOTTY'S POTTIES

Contact Person: **LORI PROCTOR**

Address: **PO BOX 530845**

Phone: **734-421-1400**

City/State/Zip: **LIVONIA, MI 48153**

Name of private catering company? N/A

Contact Person: ?

Address:

Phone:

City/State/Zip:

SPECIAL USE REQUESTS

List any streets or possible streets you are requesting to be closed. Include the day, date, and time of requested closing and reopening. Neighborhood Signatures must be submitted with application for approval. **Barricades are not available from the City of Detroit.**

Attach a map or sketch of the proposed area for closure.

STREET NAME: _____

FROM: _____ **TO:** _____

CLOSURE DATES: _____ **BEG TIME:** _____ **END TIME:** _____

REOPEN DATE: _____ **TIME:** _____

STREET NAME: _____

FROM: _____ **TO:** _____

CLOSURE DATES: _____ **BEG TIME:** _____ **END TIME:** _____

REOPEN DATE: _____ **TIME:** _____

STREET NAME: _____

FROM: _____ **TO:** _____

CLOSURE DATES: _____ **BEG TIME:** _____ **END TIME:** _____

REOPEN DATE: _____ **TIME:** _____

STREET NAME: _____

FROM: _____ **TO:** _____

CLOSURE DATES: _____ **BEG TIME:** _____ **END TIME:** _____

REOPEN DATE: _____ **TIME:** _____

STREET NAME: _____

FROM: _____ **TO:** _____

CLOSURE DATES: _____ **BEG TIME:** _____ **END TIME:** _____

REOPEN DATE: _____ **TIME:** _____

PLEASE ADD IMPORTANT INFORMATION BELOW AND ATTACH A COPY OF THE FOLLOWING:

- 1) **CERTIFICATE OF INSURANCE**
- 2) **EMERGENCY MEDICAL AGREEMENT**
- 3) **SANITATION AGREEMENT**
- 4) **PORT-A-JOHN AGREEMENT**
- 5) **COMMUNITY COMMUNICATION**

AUTHORIZATION & AFFADAVIT OF APPLICANT

I certify that the information contained in the foregoing application is true and correct to the best of my knowledge and belief that I have read, understood and agreed to abide by the rules and regulations governing the proposed Special Event, and I understand that this application is made subject to the rules and regulations established by the Mayor or the Mayor's designee. Applicant agrees to comply with all other requirements of the City, County, State, and Federal Government and any other applicable entity, which may pertain to Special Events. I further agree to abide by these rules, and further certify that I, on behalf of the Event agree to be financially responsible for any costs and fees that may be incurred by or on behalf of the Event, to the City of Detroit.

 7/30/18
Signature of Applicant Date

NOTE: Completion of this form does not constitute approval of your event. Pending review by the Special Events Management Team, you will be notified of any requirements, fees, and/or restrictions pertaining to your event.

HOLD HARMLESS AND INDEMNIFICATION


The Applicant agrees to indemnify and hold the City of Detroit (which includes its agencies, officers, elected officials, appointed officials and employees) harmless from and against injury, loss, damage or liability (or any claims in respect of the foregoing including claims for personal injury and death, damage to property, and reasonable outside attorney's fees) arising from activities associated with this permit, except to the extent attributable to the gross negligence or intentional act or omission of the City.

Applicant affirms that Applicant has read and understands the Hold Harmless and Indemnification provision and agrees to the terms expressed therein.

(Please Print)

Event Name: FALL PROGRAMMING Event Date: SEP-DEC

Event Organizer: DOWNTOWN DETROIT PARTNERSHIP

Applicant Signature:  Date: 7/30/18

BEACON PARK FALL ENTERTAINMENT SERIES DRAFT PROGRAM SCHEDULE

ALL PROGRAMS FREE AND OPEN TO EVERYONE

PARKTOBERFEST

Friday, September 21 NOON - MIDNIGHT		BEACON PARK	Downtown Beer & Food Fest	2-day event
Saturday, September 22 NOON - MIDNIGHT FAMILY FUN, 12p-8P		BEACON PARK	Downtown Beer & Food Fest + Family Fun	
Sunday, September 23 NOON - MIDNIGHT		BEACON PARK	Downtown Beer & Food Fest + Family Fun	

German-themed food & drink celebration plus fun specials for children & families.

THE BIG GAME DETROIT RALLY

Saturday, October 20 TIME: TBD		BEACON PARK	MSU vs U-M Viewing Party	1 day event
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Watch the Big Game in Beacon Park

LIONS TAILGATE AND VIEWING PARTIES

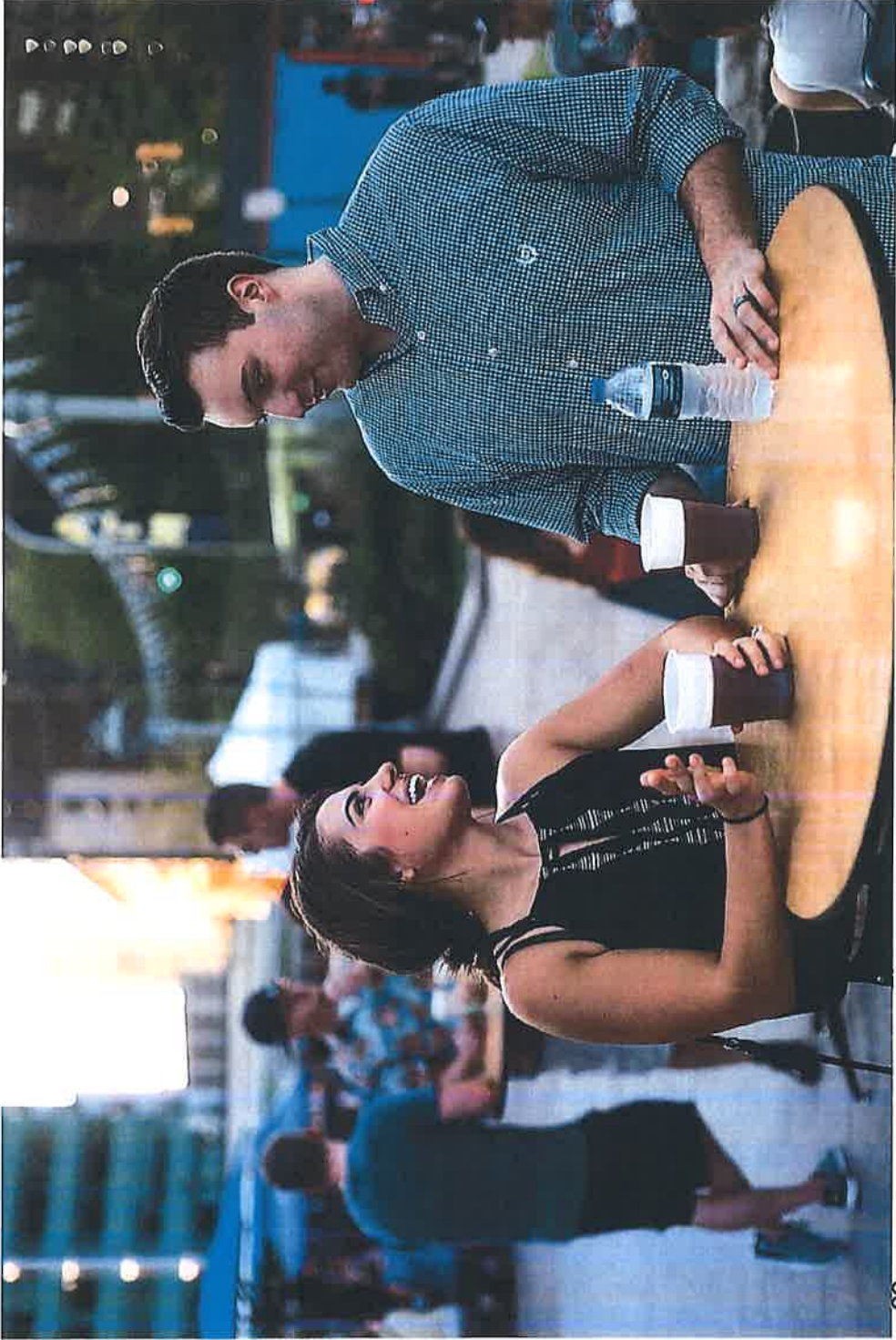
Monday, September 10 5P - 11P Sunday, September 23 6P - MIDNIGHT Sunday, October 28 11A - 5P Sunday, November 18 11A - 5P Sunday, December 2 11A - 5P		BEACON PARK	Lions Viewing Party	5 Home game events
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Tailgate and/or watch the Lions in Beacon Park

HALLOWEEN FAMILY FUN DAY

SATURDAY, October 27 1P - 5P		BEACON PARK	Family Fun	1 day event
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Free family programming with local food fare available for purchase



Parktoberfest

1 Weekend in September

- Detroit's signature Oktoberfest Celebration
- With food and beverage support from Lumen
- Live music, themed games, and activities



PARKTOBERFEST
SEPTEMBER 21st -
23rd 12pm - 12am



The Big Game

Detroit Rally and Tailgate -
MSU vs. UM

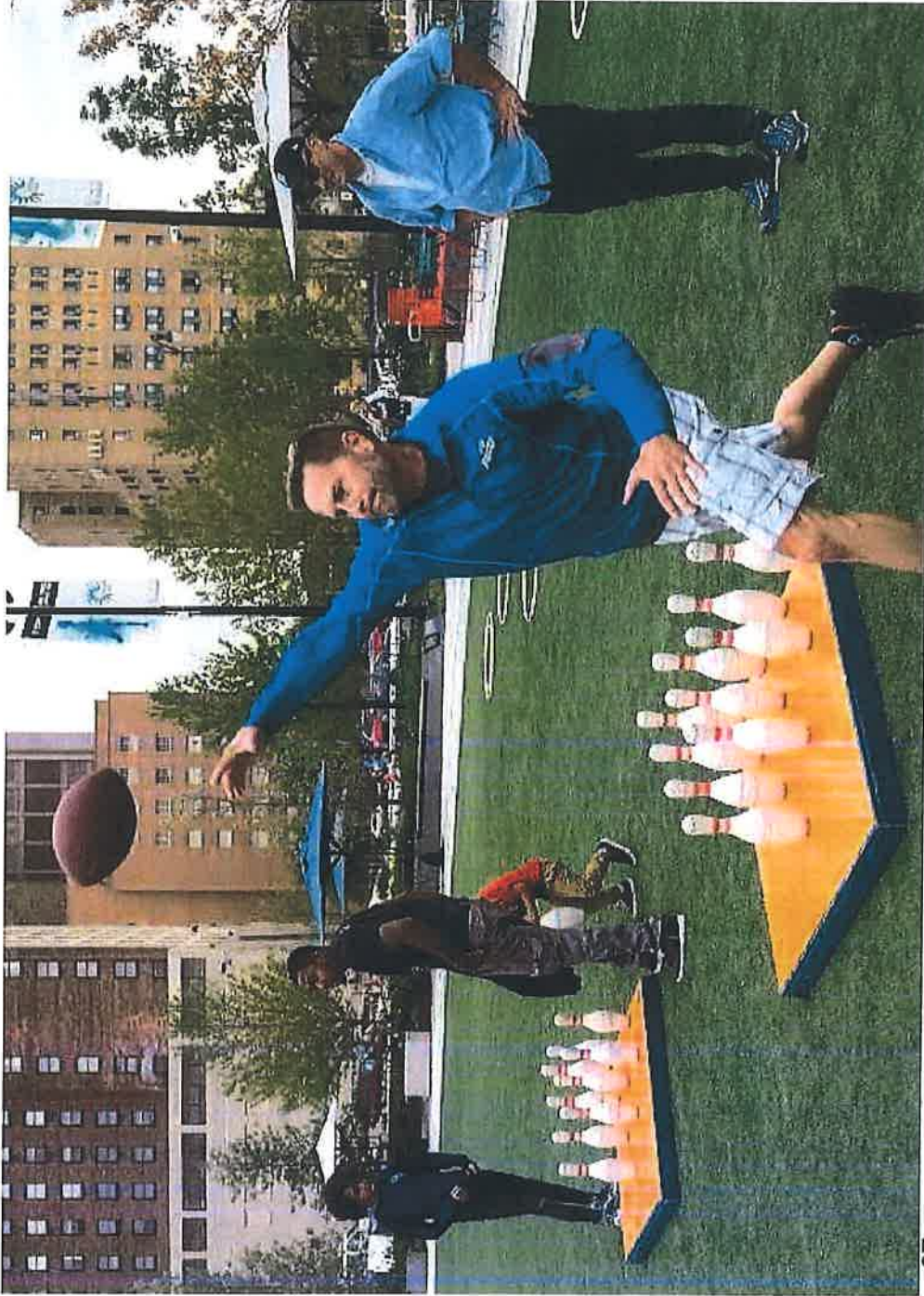
- Annual tailgate party and flag football game
- Tailgating menu from Lumen to support
- Music, giveaways



Lions Tailgates

Six Lions Home Games

- Supported by Lumen food and beverage
- Screens showing Lions games live activated at restaurant
- Lions décor, branded presence and participation
- Enhanced marketing effort to position Beacon Park as top tailgating destination



HALLOWEEN FAMILY FUN DAY

BEACON PARK

Saturday, October 27, 2018
1pm - 5 pm

- Target Demographic
 - Families
 - Metro Detroit Residents
 - Weekend Visitors
- The first annual event in 2017 attracted crowds of 1,500+



City of Detroit Special Events Application

Successful events are the result of advance planning, effective communication and teamwork. The City of Detroit will be strictly adhering to the Special Events Guidelines; please print them out for reference. Petitioners are required to complete the information below so that the City of Detroit may gain a thorough understanding of the scope and needs of the event. This form must be completed and returned to the Special Events and Film Handling Office at least **60 days** prior to the first date of the event. If submitted later than 60 days prior, application is subject to denial. Please type or print clearly and attach additional sheets and maps as needed.

Section 1- GENERAL EVENT INFORMATION

Event Name: BEACON PARK – FALL PROGRAMMING

Event Location: BEACON PARK, 1901 GRAND RIVER

Is this going to be an annual event? Yes No

Section 2- ORGANIZATION/APPLICANT INFORMATION

Organization Name: DETROIT 300 CONSERVANCY

Organization Mailing Address: 1 CAMPUS MARTIUS, SUITE 380, DETROIT, MI 48226

Business Phone: 313-715-9944

Business Website: DowntownDetroitParks.com

Applicant Name: HEATHER BADRAK

Business Phone:

Cell Phone: 313-715-9944

Email: HBADRAK@DETROIT300.ORG

Event On-Site Contact Person:

Name: DAVID COWAN

Business Phone:

Cell Phone: 734-377-3472

Email: david.cowan@downtowndetroit.org

Event Elements (check all that apply)

Walkathon

Carnival/Circus

Concert/Performance

Run/Marathon

Bike Race

Religious Ceremony

Political Event

Festival

Filming

Parade

Sports/Recreation

Rally/Demonstration

Convention/Conference

Fireworks

Other: FALL PROGRAMMING

Please provide a brief description of your event:

SEE ATTACHED EVENTS. ALL EVENTS INSIDE BEACON PARK, NO ROAD CLOSURES.

BEACON PARK FALL ENTERTAINMENT SERIES DRAFT PROGRAM SCHEDULE

ALL PROGRAMS FREE AND OPEN TO EVERYONE

PARKTOBERFEST

Friday, September 21 NOON - MIDNIGHT		BEACON PARK	Downtown Beer & Food Fest	2-day event
Saturday, September 22 NOON - MIDNIGHT FAMILY FUN, 12p-8P		BEACON PARK	Downtown Beer & Food Fest + Family Fun	
Sunday, September 23 NOON - MIDNIGHT		BEACON PARK	Downtown Beer & Food Fest + Family Fun	

German-themed food & drink celebration plus fun specials for children & families.

THE BIG GAME DETROIT RALLY

Saturday, October 20 TIME: TBD		BEACON PARK	MSU vs U-M Viewing Party	1 day event
-----------------------------------	--	-------------	--------------------------	-------------

Watch the Big Game in Beacon Park

LIONS TAILGATE AND VIEWING PARTIES

Monday, September 10 5P - 11P Sunday, September 23 6P - MIDNIGHT Sunday, October 28 11A - 5P Sunday, November 18 11A - 5P Sunday, December 2 11A - 5P		BEACON PARK	Lions Viewing Party	5 Home game events
--	--	-------------	---------------------	-----------------------

Tailgate and/or watch the Lions in Beacon Park

HALLOWEEN FAMILY FUN DAY

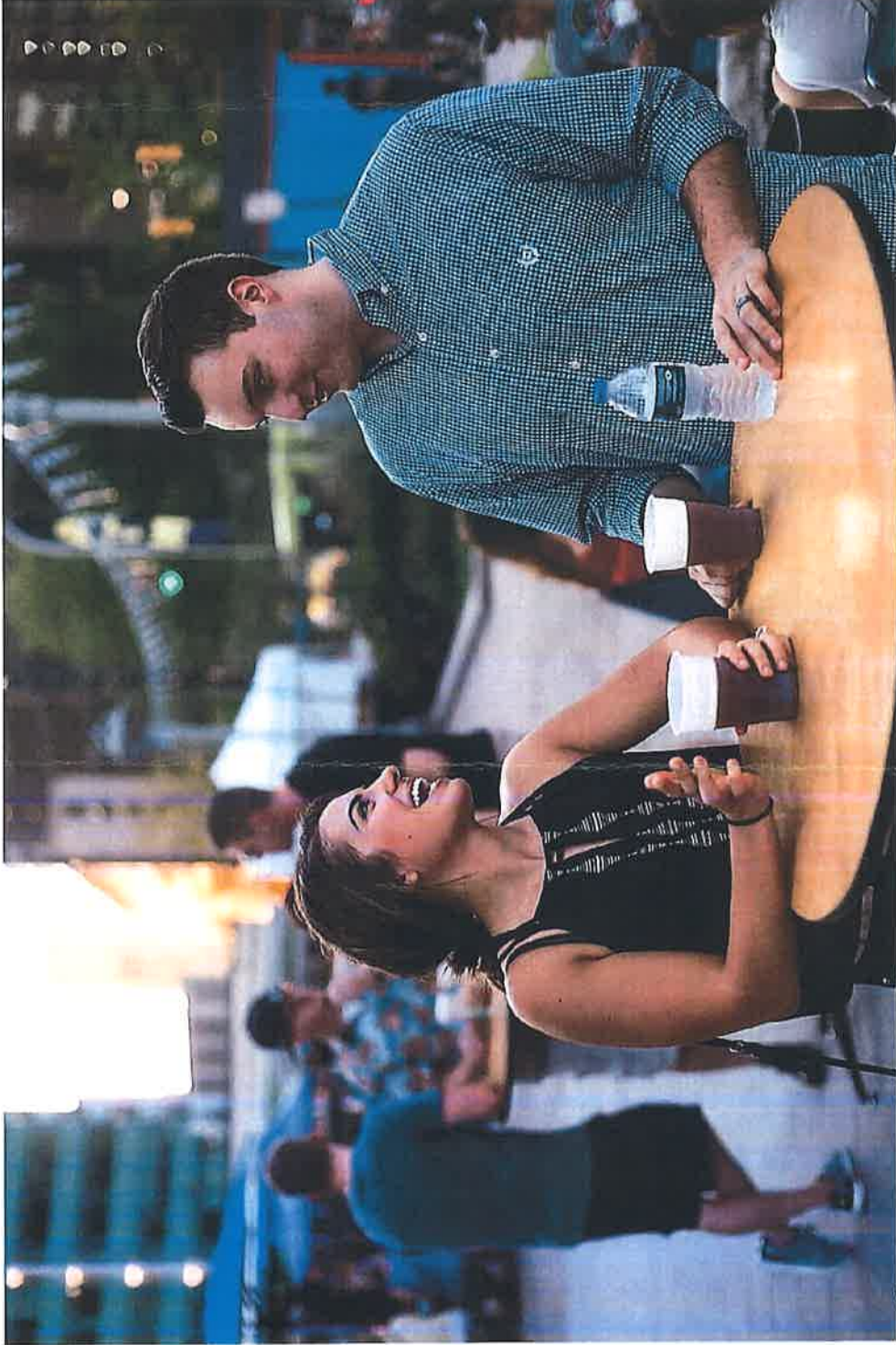
SATURDAY, October 27 1P - 5P		BEACON PARK	Family Fun	1 day event
---------------------------------	--	-------------	------------	-------------

Free family programming with local food fare available for purchase

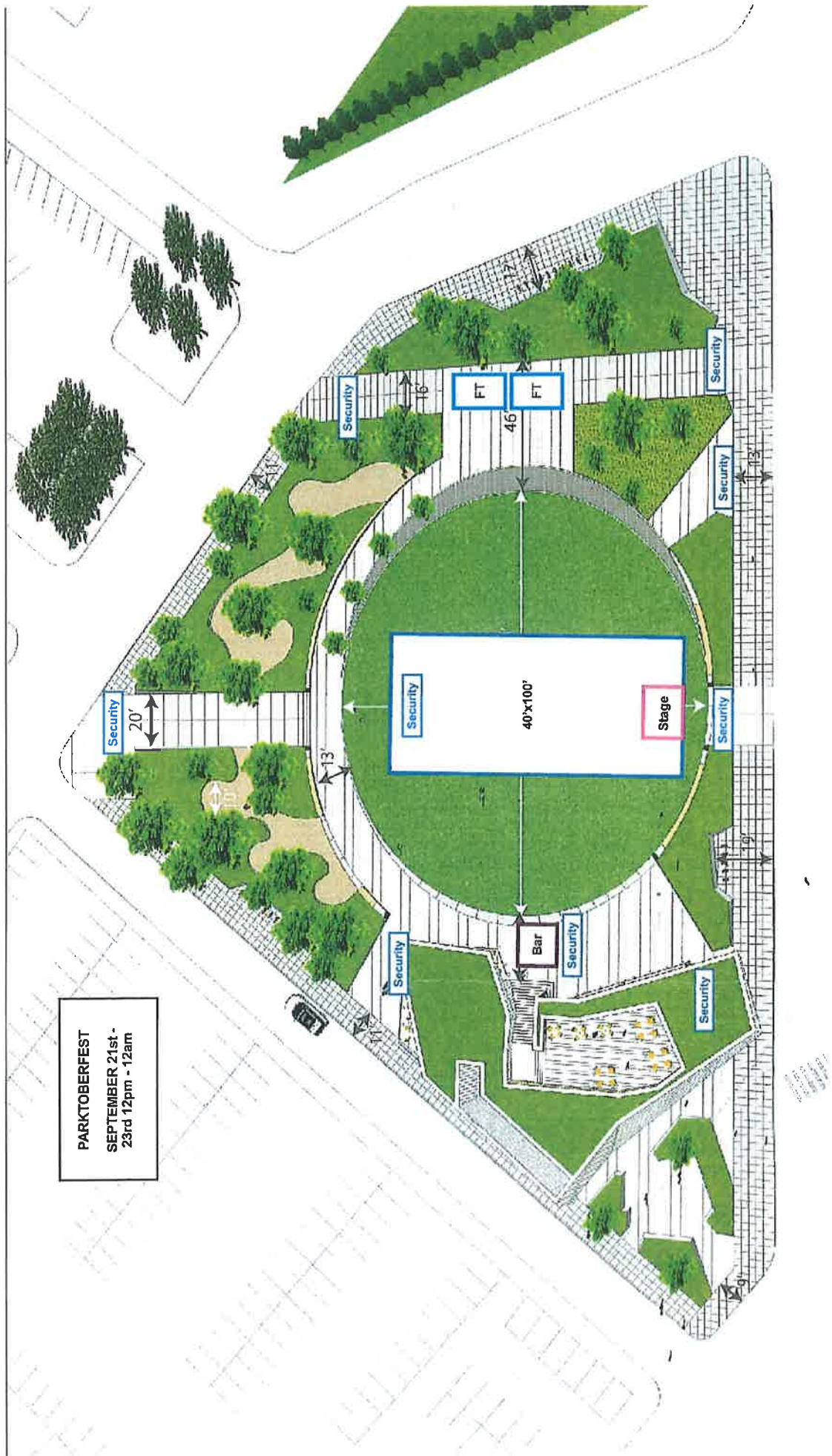
Parktoberfest

1 Weekend in September

- Detroit's signature Oktoberfest Celebration
- With food and beverage support from Lumen
- Live music, themed games, and activities



PARKTOBERFEST
SEPTEMBER 21st -
23rd 12pm - 12am





The Big Game

Detroit Rally and Tailgate -

MSU vs. UM

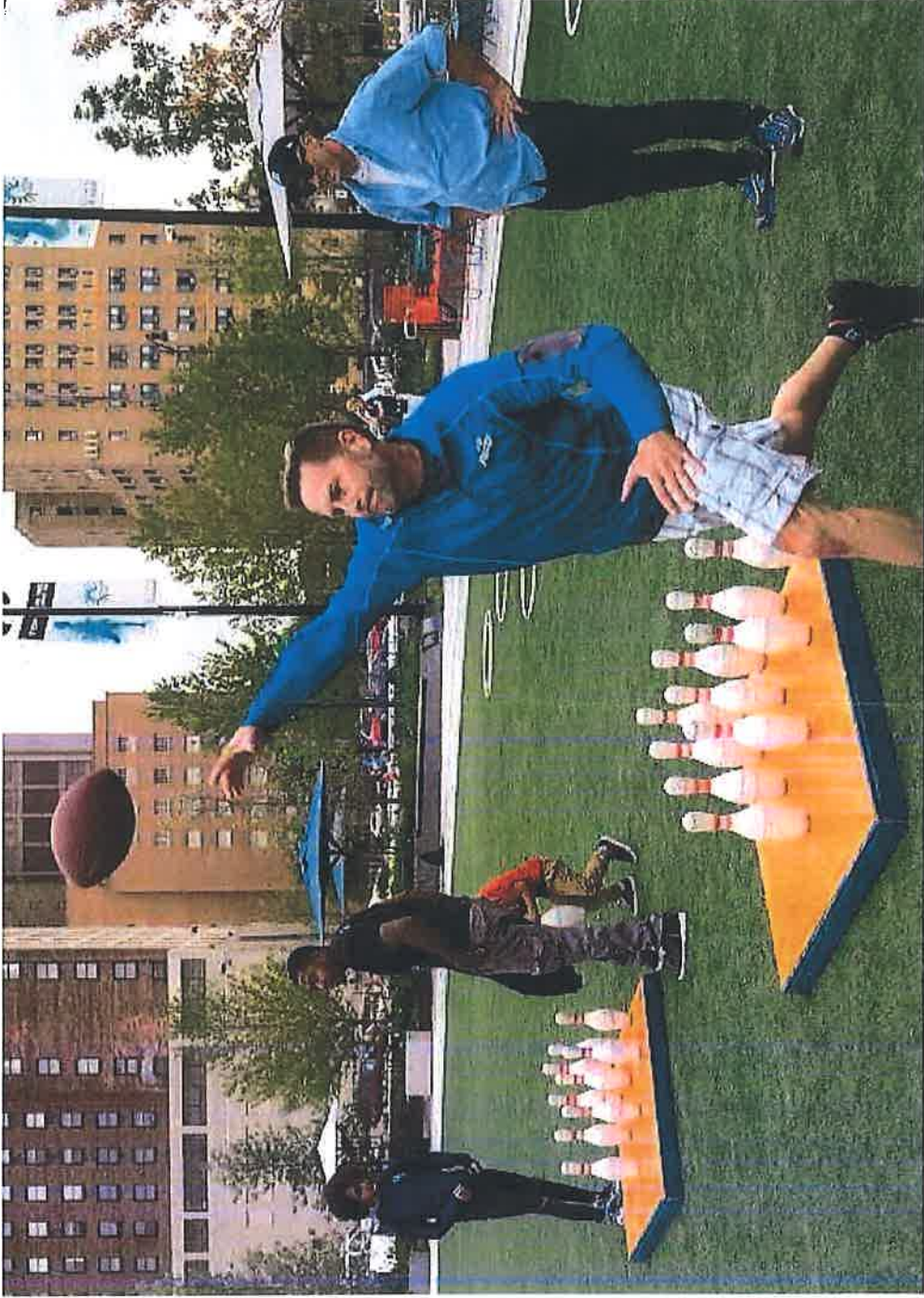
- Annual tailgate party and flag football game
- Tailgating menu from Lumen to support
- Music, giveaways



Lions Tailgates

Six Lions Home Games

- Supported by Lumen food and beverage
- Screens showing Lions games live activated at restaurant
- Lions décor, branded presence and participation
- Enhanced marketing effort to position Beacon Park as top tailgating destination



HALLOWEEN FAMILY FUN DAY

BEACON PARK

Saturday, October 27, 2018
1pm - 5 pm

- Target Demographic
 - Families
 - Metro Detroit Residents
 - Weekend Visitors
- The first annual event in 2017 attracted crowds of 1,500+



What are the projected set-up, event and tear down dates and times (must be completed)?

Begin Set-up Date : _____ Time: _____ Complete Set-up Date: _____ Time: _____

Event Start Date: _____ Time: _____ Event End Date: _____ Time: _____

Begin Tearing Down Date: _____ Complete Tear Down Date: _____

Event Times (If more than one day, give times for each day):

Section 3- LOCATION/SITE INFORMATION

Location of Event: BEACON PARK, 1901 GRAND RIVER, DETROIT, MI 48226

Facilities to be used (circle): Street Sidewalk Park City
Facility

Please attach a copy of Port-a-John, Sanitation, and Emergency Medical Agreements as well as a site plan which illustrates the anticipated layout of your event including the following:

- Public entrance and exit
- Location of merchandising booths
- Location of food booths
- Location of garbage receptacles
- Location of beverage booths
- Location of sound stages
- Location of hand washing sinks
- Location of portable restrooms
- Location of First Aid
- Location of fire lane
- Proposed route for walk/run
- Location of tents and canopies
- Sketch of street closure
- Location of bleachers
- Location of press area
- Sketch of proposed light pole banners

Section 4- ENTERTAINMENT

Describe the entertainment for this year's event: ATTACHED

Will a sound system be used? Yes No

If yes, what type of sound system? HOUSE + AMPLIFIED SOUND AS NEEDED

Describe specific power needs for entertainment and/or music:
HOUSE POWER

How many generators will be used? N/A _____

How will the generators be fueled? _____

Name of vendor providing generators:

Contact Person:

Address:

Phone:

City/State/Zip

Section 5- SALES INFORMATION

Will there be advanced ticket sales? Yes No

If yes, please describe:

Will there be on-site ticket sales? Yes No

If yes, list price(s):

Will there be vending or sales? Yes No

If yes, check all that apply:

Food

Merchandise

Non-Alcoholic Beverages

Alcoholic Beverages

Indicate type of items to be sold: VARIES PER EVENT

Section 6- PUBLIC SAFETY & PARKING INFORMATION

Name of Private Security Company: Existing park contract security will be used.

Contact Person: EAGLE SECURITY, MATT WARNER

Address: 500 GRISWOLD, STE 400

Phone: 734-306-4871

City/State/Zip: DETROIT, MI 48226

Number of Private Security Personnel Hired Per Shift:

Are the private security personnel (check all that apply):

Licensed

Armed

Bonded

How will you advise attendees of parking options?

WEBSITE

Section 7- COMMUNICATION & COMMUNITY IMPACT INFORMATION

How will your event impact the surrounding community (i.e. pedestrian traffic, sound carryover, safety)?
POSITIVE IMPACT, FREE COMMUNITY ACTIVATIONS

Have local neighborhood groups/businesses approved your event? Yes No

Indicate what steps you have or will take to notify them of your event: **PARK MANAGEMENT, DTE AND**

LUMEN APPROVE

Section 8- EVENT SET-UP

Complete the appropriate categories that apply to the event **Structure**

	How Many?	Size/Height
Booth		
Tents (enclosed on 3 sides)		
Canopy (open on all sides)	1	40' x 100' (PARKTOBERFEST) 80' x 100' OCT - DEC EVENTS
Staging/Scaffolding		
Bleachers		

Section 9- COMPLETE ALL THAT APPLY

Emergency medical services? FOR PARKTOBERFEST ONLY

Contact Person: **ADAM GOTLIEB, HART EMS MEDICAL SERVICES**

Address: **220 BAGLEY, SUITE 912**

City/State/Zip: **DETROIT, MI 48226**

Name of company providing port-a-johns. SCOTTY'S POTTIES

Contact Person: **LORI PROCTOR**

Address: **PO BOX 530845**

Phone: **734-421-1400**

City/State/Zip: **LIVONIA, MI 48153**

Name of private catering company? N/A

Contact Person: **?**

Address:

Phone:

City/State/Zip:

SPECIAL USE REQUESTS

List any streets or possible streets you are requesting to be closed. Include the day, date, and time of requested closing and reopening. Neighborhood Signatures must be submitted with application for approval. **Barricades are not available from the City of Detroit.**

Attach a map or sketch of the proposed area for closure.

STREET NAME: _____

FROM: _____ **TO:** _____

CLOSURE DATES: _____ **BEG TIME:** _____ **END TIME:** _____

REOPEN DATE: _____ **TIME:** _____

STREET NAME: _____

FROM: _____ **TO:** _____

CLOSURE DATES: _____ **BEG TIME:** _____ **END TIME:** _____

REOPEN DATE: _____ **TIME:** _____

STREET NAME: _____

FROM: _____ **TO:** _____

CLOSURE DATES: _____ **BEG TIME:** _____ **END TIME:** _____

REOPEN DATE: _____ **TIME:** _____

STREET NAME: _____

FROM: _____ **TO:** _____

CLOSURE DATES: _____ **BEG TIME:** _____ **END TIME:** _____

REOPEN DATE: _____ **TIME:** _____

STREET NAME: _____

FROM: _____ **TO:** _____

CLOSURE DATES: _____ **BEG TIME:** _____ **END TIME:** _____

REOPEN DATE: _____ **TIME:** _____

PLEASE ADD IMPORTANT INFORMATION BELOW AND ATTACH A COPY OF THE FOLLOWING:

- 1) **CERTIFICATE OF INSURANCE**
- 2) **EMERGENCY MEDICAL AGREEMENT**
- 3) **SANITATION AGREEMENT**
- 4) **PORT-A-JOHN AGREEMENT**
- 5) **COMMUNITY COMMUNICATION**

AUTHORIZATION & AFFADAVIT OF APPLICANT

I certify that the information contained in the foregoing application is true and correct to the best of my knowledge and belief that I have read, understood and agreed to abide by the rules and regulations governing the proposed Special Event, and I understand that this application is made subject to the rules and regulations established by the Mayor or the Mayor's designee. Applicant agrees to comply with all other requirements of the City, County, State, and Federal Government and any other applicable entity, which may pertain to Special Events. I further agree to abide by these rules, and further certify that I, on behalf of the Event agree to be financially responsible for any costs and fees that may be incurred by or on behalf of the Event, to the City of Detroit.

 7/30/18
Signature of Applicant Date

NOTE: Completion of this form does not constitute approval of your event. Pending review by the Special Events Management Team, you will be notified of any requirements, fees, and/or restrictions pertaining to your event.

HOLD HARMLESS AND INDEMNIFICATION

The Applicant agrees to indemnify and hold the City of Detroit (which includes its agencies, officers, elected officials, appointed officials and employees) harmless from and against injury, loss, damage or liability (or any claims in respect of the foregoing including claims for personal injury and death, damage to property, and reasonable outside attorney's fees) arising from activities associated with this permit, except to the extent attributable to the gross negligence or intentional act or omission of the City.

Applicant affirms that Applicant has read and understands the Hold Harmless and Indemnification provision and agrees to the terms expressed therein.

(Please Print)

Event Name: FALL PROGRAMMING Event Date: SEP-DEC

Event Organizer: DOWNTOWN DETROIT PARTNERSHIP

Applicant Signature:  Date: 7/30/18

MAYOR'S OFFICE COORDINATORS REPORT

OVERALL STATUS (please circle):
 APPROVED
 DENIED
 N/A
 CANCELED

Petition #: 501 Event Name: Detroit China Festival - Taste of China, Detroit

Event Date : September 22, 2018

Street Closure: None

Organization Name: Detroit Chinatown, LLC

Street Address: 1 Ajax Drive Suite 1, Madison Heights, MI 48071

Receipt date of the COMPLETED Special Events Application:	
Date of City Clerk's Departmental Reference Communication:	
Due date for City Departments reports:	
Due date for the Coordinators Report to City Clerk:	

Event Elements (check all that apply):

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Walkathon | <input type="checkbox"/> Carnival/Circus | <input type="checkbox"/> Concert/Performance | <input type="checkbox"/> Run/Marathon |
| <input type="checkbox"/> Bike Race | <input type="checkbox"/> Religious Ceremony | <input type="checkbox"/> Political Ceremony | <input checked="" type="checkbox"/> Festival |
| <input type="checkbox"/> Filming | <input type="checkbox"/> Parade | <input type="checkbox"/> Sports/Recreation | <input type="checkbox"/> Rally/Demonstration |
| <input type="checkbox"/> Fireworks | <input type="checkbox"/> Convention/Conference | <input type="checkbox"/> Other: _____ | |
| <input type="checkbox"/> 24-Hour Liquor License | | | |

Petition Communications (include date/time)

Chinese Street Food and Music festival held at Grand Circus Park from 11:00am - 5:00pm.

**** ALL permits and license requirements must be fulfilled for an approval status ****

Date	Department	N/A	APPROVED	DENIED	Additional Comments
	DPD	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contracted with Eagle Security to Provide Private Security Services; DPD will Provide Special Attention & Assist at Woodward Crosswalk
	DFD/ EMS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pending Inspections; Contracted with Hart Medical to Provide Private EMS Services
	DPW	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Permits Required
	Health Dept.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Temporary Food License Required

Date	Department	N/A	APPROVED	DENIED	Additional Comments
	TED	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Bike Racks Required
	Recreation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Application Received & Approved as Presented
	Bldg & Safety	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Permits Required for Tents, Staging & Generators
	Bus. License	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Vendors License & Liquor License Required
	Mayor's Office	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	All Necessary permits must be obtained prior to event. If permits are not obtained, departments can enforce closure of event.
	Municipal Parking	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Jurisdiction
	DDOT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Impact on Buses

MAYOR'S OFFICE

Signature: Bethanie Justice

Date: August 22, 2018

City of Detroit
OFFICE OF THE CITY CLERK

Janice M. Winfrey
City Clerk

Caven West
Deputy City Clerk/Chief of Staff

DEPARTMENTAL REFERENCE COMMUNICATION

Thursday, August 30, 2018

To: The Department or Commission Listed Below

From: Janice M. Winfrey, Detroit City Clerk

The following petition is herewith referred to you for report and recommendation to the City Council.

In accordance with that body's directive, kindly return the same with your report in duplicate within four (4) weeks.

DPW - CITY ENGINEERING DIVISION MAYOR'S OFFICE
PLANNING AND DEVELOPMENT DEPARTMENT POLICE DEPARTMENT
FIRE DEPARTMENT RECREATION DEPARTMENT
BUSINESS LICENSE CENTER

501 *Detroit Chinatown LLC, request to hold "Detroit China Festival-Taste of China, Detroit" at Grand Circus Park on September 22, 2018 from 11:00 AM to 5:00 PM with set up and tear down to be complete on the event date, 9-22-18.*

City of Detroit Special Events Application

Successful events are the result of advance planning, effective communication and teamwork. The City of Detroit will be strictly adhering to the Special Events Guidelines; please print them out for reference. Petitioners are required to complete the information below so that the City of Detroit may gain a thorough understanding of the scope and needs of the event. This form must be completed and returned to the Special Events and Film Handling Office at least **60 days** prior to the first date of the event. If submitted later than 60 days prior, application is subject to denial. Please type or print clearly and attach additional sheets and maps as needed.

Section 1- GENERAL EVENT INFORMATION

Event Name: Detroit China Festival—Taste of China, Detroit

Event Location: Grand Circus Park

Is this going to be an annual event? Yes No

Section 2- ORGANIZATION/APPLICANT INFORMATION

Organization Name: Detroit Chinatown LLC

Organization Mailing Address: 1 Ajax Dr. Suite 201, Madison Heights, MI 48071

Business Phone: 810-394-5289

Business Website: www.detroitchinatownllc.com

Applicant Name: Joshua Chiatovich

Business Phone: 734-205-7739

Cell Phone: 734-205-7739

Email: joshua.c@detroitchinatownllc.com

Event On-Site Contact Person:

Name: Paul Gaines

Business Phone: 248-910-9066

Cell Phone: 248-910-9066

Email: Paul.Gaines@detroitchinatownllc.com

Event Elements (check all that apply)

Walkathon

Carnival/Circus

Concert/Performance

Run/Marathon

Bike Race

Religious Ceremony

Political Event

Festival

Filming

Parade

Sports/Recreation

Rally/Demonstration

Convention/Conference

Fireworks

Other: _____

Please provide a brief description of your event:

Chinese Street Food and Music event with live music show that provides diversity and a cultural experience to the general public. Government Officials from Michigan and China will also participate including Wayne County Executive Warren Evans. The event's purpose is to provide a good time to Michigan citizens, bring economic benefits to Detroit, local Chinese restaurants, and sponsors, and build up a platform for future economic connections between Michigan and China.

What are the projected set-up, event and tear down dates and times (must be completed)?

Begin Set-up Date : 9/22/2018 Time: 8:30 AM Complete Set-up Date: 9/22/2018 Time: 10:30 AM

Event Start Date: 9/22/2018 Time: 11AM Event End Date: 9/22/2018 Time: 5 PM

Begin Tearing Down Date: 9/22/2018 Complete Tear Down Date: 9/22/2018

Event Times (If more than one day, give times for each day):

11 AM -5 PM

Section 3- LOCATION/SITE INFORMATION

Location of Event: Detroit, MI

Facilities to be used (circle): Street Sidewalk Park City
Facility

Please attach a copy of Port-a-John, Sanitation, and Emergency Medical Agreements as well as a site plan which illustrates the anticipated layout of your event including the following:

- Public entrance and exit
- Location of merchandising booths
- Location of food booths
- Location of garbage receptacles
- Location of beverage booths
- Location of sound stages
- Location of hand washing sinks
- Location of portable restrooms
- Location of First Aid
- Location of fire lane
- Proposed route for walk/run
- Location of tents and canopies
- Sketch of street closure
- Location of bleachers
- Location of press area
- Sketch of proposed light pole banners

Section 4- ENTERTAINMENT

Describe the entertainment for this year's event:

Opening ceremony at 11:30AM and closing ceremony at 4:30PM. There will be an entertainment session every hour at 12:30PM, 1:30PM, 2:30PM, 3:30PM. Each session will be about 20 minutes and will include live music and dance performance show, raffle draw, keynote speech. Between each session, DJ will play recorded music

Will a sound system be used? Yes No

If yes, what type of sound system? PA's for announcements and Live entertainment

Describe specific power needs for entertainment and/or music:

Three 20 amp outlets

How many generators will be used? Two 50KW full containment generators

How will the generators be fueled? Diesel

Name of vendor providing generators:

Contact Person: Aggreko.com (James)

Address: 8119 Park Place

Phone: 248-875-6070

City/State/Zip Brighton, MI. 48116

Section 5- SALES INFORMATION

Will there be advanced ticket sales? Yes No

If yes, please describe:

Will there be on-site ticket sales? Yes No

If yes, list price(s):

Will there be vending or sales? Yes No

If yes, check all that apply:

Food Merchandise Non-Alcoholic Beverages Alcoholic Beverages

Indicate type of items to be sold:

Chinese street food, snacks, souvenirs, bubble tea, soda, beer

Section 6- PUBLIC SAFETY & PARKING INFORMATION

Name of Private Security Company: Existing park contract security will be used.

Contact Person: Matt Warner (Liberty/Eagle security Group)

Address: 1400 Biddle Ave

Phone: 1-855-457-4732

City/State/Zip: Wyndotte,

Mi.

Number of Private Security Personnel Hired Per Shift: 10

Are the private security personnel (check all that apply):

Licensed

Armed

Bonded

How will you advise attendees of parking options?

detroit.bestparking.com

Section 7- COMMUNICATION & COMMUNITY IMPACT INFORMATION

How will your event impact the surrounding community (i.e. pedestrian traffic, sound carryover, safety)?

Increased pedestrian traffic, amplified sound from 12pm to 4pm

Have local neighborhood groups/businesses approved your event?

Yes No

Indicate what steps you have or will take to notify them of your event:

Communicating with all surrounding business through email by September 1st

Section 8- EVENT SET-UP

Complete the appropriate categories that apply to the event Structure

	How Many?	Size/Height
Booth		
Tents (enclosed on 3 sides)	1	20x20
Canopy (open on all sides)		10X10
Staging/Scaffolding	1	12x15x15
Bleachers		

Section 9- COMPLETE ALL THAT APPLY

Emergency medical services?

Contact Person: Heart Medical 313-264-6003

Address: 2799 west Grand blvd, suite E-112

City/State/Zip: Detroit, 48202

Name of company providing port-a-johns.

Contact Person: Scotties Potties

Address: 27940 Wick rd

Phone: 734-421-1400

City/State/Zip: Romulus, Mi 48174

Name of private catering company?

Contact Person: Please see attached document for list of all food and drink vendors.

Address:

Phone:

City/State/Zip:

SPECIAL USE REQUESTS

List any streets or possible streets you are requesting to be closed. Include the day, date, and time of requested closing and reopening. Neighborhood Signatures must be submitted with application for approval. **Barricades are not available from the City of Detroit.**

Attach a map or sketch of the proposed area for closure.

STREET NAME: NA

FROM: _____ **TO:** _____

CLOSURE DATES: _____ **BEG TIME:** _____ **END TIME:** _____

REOPEN DATE: _____ **TIME:** _____

STREET NAME: NA

FROM: _____ **TO:** _____

CLOSURE DATES: _____ **BEG TIME:** _____ **END TIME:** _____

REOPEN DATE: _____ **TIME:** _____

STREET NAME: NA

FROM: _____ **TO:** _____

CLOSURE DATES: _____ **BEG TIME:** _____ **END TIME:** _____

REOPEN DATE: _____ **TIME:** _____

STREET NAME: NA

FROM: _____ **TO:** _____

CLOSURE DATES: _____ **BEG TIME:** _____ **END TIME:** _____

REOPEN DATE: _____ **TIME:** _____

STREET NAME: NA

FROM: _____ **TO:** _____

CLOSURE DATES: _____ **BEG TIME:** _____ **END TIME:** _____

REOPEN DATE: _____ **TIME:** _____

PLEASE ADD IMPORTANT INFORMATION BELOW AND ATTACH A COPY OF THE FOLLOWING:

- 1) **CERTIFICATE OF INSURANCE**
- 2) **EMERGENCY MEDICAL AGREEMENT**
- 3) **SANITATION AGREEMENT**
- 4) **PORT-A-JOHN AGREEMENT**
- 5) **COMMUNITY COMMUNICATION**

Acord, Paul Lee insurance agency

Hart Medical

DDP and Block by Block Detroit will provide Sanitation

Bobs sanitation (Scotties potties)

AUTHORIZATION & AFFADAVIT OF APPLICANT

I certify that the information contained in the foregoing application is true and correct to the best of my knowledge and belief that I have read, understood and agreed to abide by the rules and regulations governing the proposed Special Event, and I understand that this application is made subject to the rules and regulations established by the Mayor or the Mayor’s designee. Applicant agrees to comply with all other requirements of the City, County, State, and Federal Government and any other applicable entity, which may pertain to Special Events. I further agree to abide by these rules, and further certify that I, on behalf of the Event agree to be financially responsible for any costs and fees that may be incurred by or on behalf of the Event, to the City of Detroit.

Signature of Applicant

Date

NOTE: Completion of this form does not constitute approval of your event. Pending review by the Special Events Management Team, you will be notified of any requirements, fees, and/or restrictions pertaining to your event.

HOLD HARMLESS AND INDEMNIFICATION

The Applicant agrees to indemnify and hold the City of Detroit (which includes its agencies, officers, elected officials, appointed officials and employees) harmless from and against injury, loss, damage or liability (or any claims in respect of the foregoing including claims for personal injury and death, damage to property, and reasonable outside attorney’s fees) arising from activities associated with this permit, except to the extent attributable to the gross negligence or intentional act or omission of the City.

Applicant affirms that Applicant has read and understands the Hold Harmless and Indemnification provision and agrees to the terms expressed therein.

(Please Print)

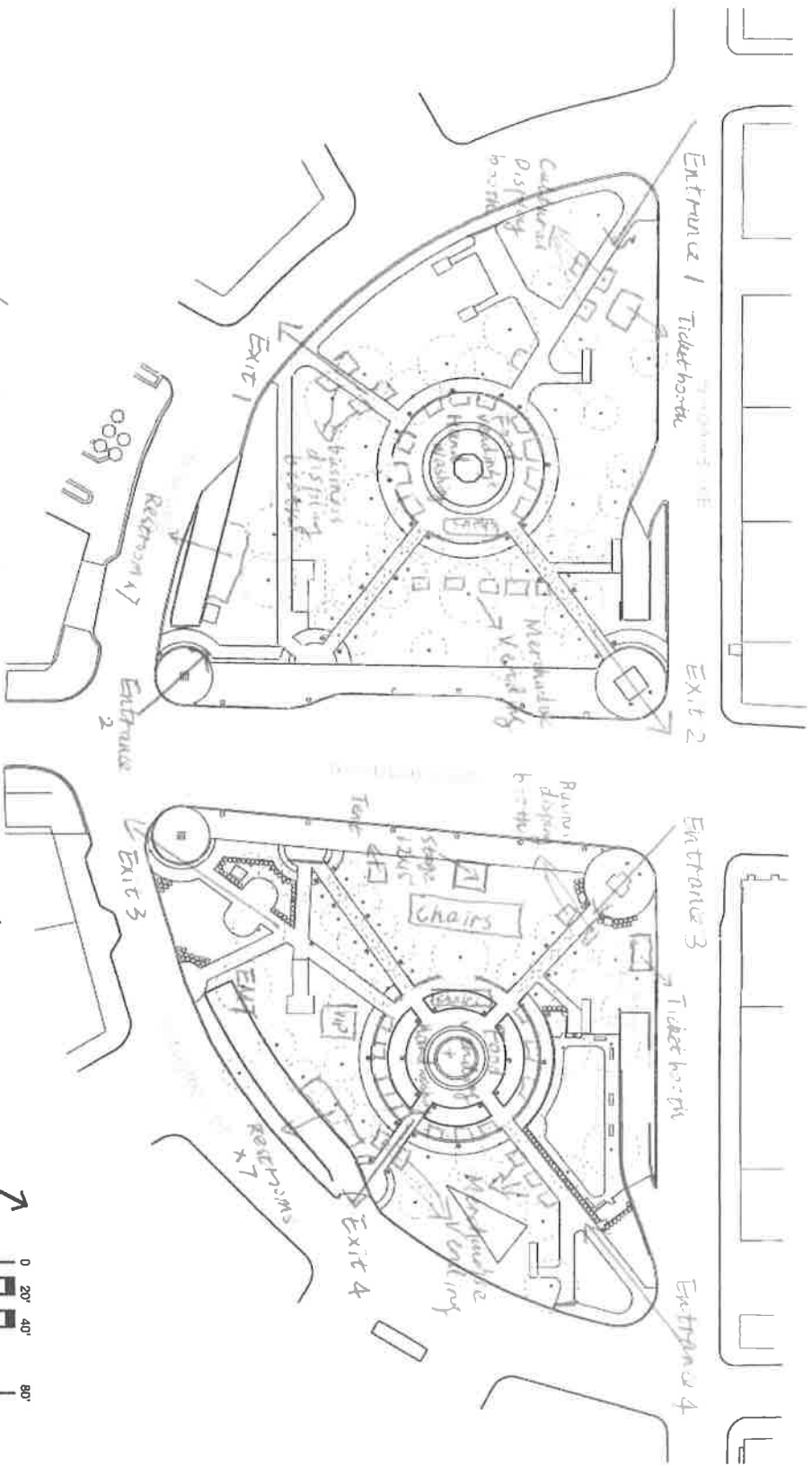
Event Name: Detroit China Festival Event Date: 9/22/2018

Event Organizer: Detroit Chinatown LLC

Applicant Signature: _____ Date: _____

Grand Circus Park
 Detroit, MI
 6/17/15

1. 20 food vending tents. 10 on each side. 10x10 tents. surrounding fountain (canopy)
2. 10 Non food vending tents that sell small merchandise. 5 on each side. 10x10 tents (canopy)
3. 10 Cultural or business display booths. 10x10 tents. 5 on each side. Do not sell mer
4. 1 stage. 12x15' on East side. 100 chairs in front of the stage
5. 1 10x10' tent next to the stage for performers to change clothes



6. 1 VIP tent on East side. 20x20.
7. 14 Portable bathrooms. 1 on each side.
8. 4 entrances and 4 exits.
9. EMT on East side in parking area.

7. 10' x 10' tent

1. 10' x 10'


NO.	NAME	Address	Contact Person	Contact Info
1	Sweeting	1213 S University Ave, Ann Arbor, MI 48104	Jason Li	(734) 213-3300
2	Yee Siang Dumplings	4837 Washtenaw Ave, Ann Arbor, MI 48108	Ye Tie	(734) 879-1459
3	Evergreen	2771 Plymouth Rd, Ann Arbor, MI 48105	Nancy Zhang	(734) 769-2899
4	Chia Shiang	2016 Packard St, Ann Arbor, MI 48104	Xiaohong Zhou	(734) 741-0778
5	Ypbor Yan Restaurant	4905 Washtenaw Ave, Ann Arbor, MI 48108	Fuhua Zhong	(734) 434-7978
6	Hotpot Chen	2255 W Stadium Blvd, Ann Arbor, MI 48103	Ivy Huang	(734) 668-8389
7	Lai Lai	4023 Carpenter Rd, Ypsilanti, MI 48197	Feng Ye	(734) 677-0790
8	China Palace	2905 Washtenaw Ave, Ypsilanti, MI 48197	Jay Wang	(734) 829-0999
9	Asian Edible	3039 E Walton Blvd, Auburn Hills, MI 48326	Julia Tseng	(248) 997-1313
10	John Lum Chop Suey	23634 Van Born Rd, Dearborn Heights, MI 48125	Stephanie Lum	(313) 292-2454
11	Shangri-La	4710 Cass Ave, Detroit, MI 48201	Ms Chen	(313) 974-7669
12	New China One	7414 Woodward Ave, Detroit	Ricky Dong	(248) 929-1868
13	China Wok	18670 Livernois Ave, Detroit, MI 48221	Ms Shi	(313) 864-8899
14	Lotus Garden	12832 W Seven Mile Rd, Detroit, MI 48235	Ms Wang	(313) 342-2440
15	Empire Dynasty	29505 W Nine Mile Rd, Farmington Hills, MI 48336	Gina Fang	(734) 748-1186
16	Hong Hua	27925 Orchard Lake Rd, Farmington, MI 48334	Danny Yu	(248) 489-2280
17	Taste of China	27626 Middlebelt Rd, Farmington Hills, MI 48334	Penny Peng	(248) 474-8183
18	Jiang Nan	29222 Orchard Lake Rd, Farmington Hills, MI 48334	Fang You	(248) 702-0166
19	Street King	9750 Melissa Lane, Davisburg, MI 48350	Mai See Xiong	(248) 884-4176
20	Hong's Café	3030 E Lake Lansing Rd, East Lansing, MI 48823	Qing Yang	(517) 332-6688
21	Gourmet Village	4790 Hagadorn Rd, East Lansing, MI 48823	Lanfan Zhang	(517) 332-5333
22	Noodletopia	30120-30140 John R Rd, Madison Heights, MI 48071	Li Zhai	(248) 591-4092
23	Fuji Buffet	32153 John R Rd, Madison Heights, MI 48071	Ricky Dong	(248) 929-1868
24	168 Asian Mart	32393 John R Rd, Madison Heights, MI 48071	Ricky Dong	(248) 929-1868
25	Kung Fu Noodle House	31151 Dequindre Rd, Madison Heights, MI 48071	Ken Gao	(248) 268-2171
26	Kung Fu Tea	2105 15 Mile Rd, Sterling Heights, MI 48310	Andy Wang	(586) 999-5928
27	Chen's Restaurant	2666 S Rochester Rd, Rochester Hills, MI 48307	Ming He	(248) 299-9450

CONFIRMATION OF SERVICES

HART EMS MEDICAL SERVICES, PLLC
220 BAGLEY, SUITE 912
DETROIT, MI 48226
313.366.4278 OR 313.216.1771 FAX

Event: 2018 Michigan China Festival		Location: Grand Circus Park, Detroit	
Date of Service:		Start to End Time:	
September 22, 2018		11:00am – 5:00pm	
Services Requested By Client:		Quantity:	Location:
On-Site Ambulance		1	Grand Circus Park
First Aid Station			
<input type="checkbox"/> Physician On-Site		x No	
<input type="checkbox"/> Additional Medical Personal On-Site		x No	
Golf-Cart Ambulance		X No	
<input type="checkbox"/> Dispatch On-Site		x No	
<input type="checkbox"/> Command Center		x No	

Additional Procedures:



Adam Gottlieb
Hart EMS Medical Services, PLLC
8/6/2018
Date

Detroit China Town LLC
Name
Company
8/6/2018
Date

Terms and Conditions

1) **Payment Terms:** Customer shall pay monthly, within ten (10) days after receipt of Scotty's Potties invoice; provided, that if service is to be furnished for a period of Twenty-Eight (28) days or less, all charges are payable in cash upon delivery of the equipment. In addition, Customer shall be liable for all taxes, fees or other charges applicable to this Agreement or Customer's use of the equipment.

2) **Use by Customer,**

- A) Customer has inspected the equipment and finds it to be in good condition and suitable for his needs.
- B) Customer will permit the equipment to be used only for the proper sanitation purposes for which it was intended.
- C) Customer will make no alteration or attachments to the equipment.
- D) Customer has chosen the location for installing the equipment and accepts all responsibility in connection with that choice of location.
- E) Customer will give Scotty's Potties free access to the equipment at all times over suitable pavement or other driving surface, and will make the equipment available for servicing or maintenance at ground level without hazard to Scotty's Potties agents, employees or equipment.
- F) Customer will notify Scotty's Potties immediately and discontinue use of the equipment if the equipment becomes unsafe or in disrepair for any reason.
- G) Customer will not permit the equipment to become subject to any lien, charge or encumbrance.

3) **Maintenance.** Scotty's Potties will recharge and service the equipment in accordance with the terms set forth on the front of this agreement. Scotty's Potties obligation to maintain the equipment in good working order under ordinary use is condition upon Customer's compliance with the use obligation set forth in paragraph 2.

4) **Customer's Indemnity.** Customer will indemnify Scotty's Potties, its employees and agents against and claim, liability or cost arising from this agreement or the use of the equipment, including property damage and personal injuries, except the extent that such claims. Liabilities or cost are due to Scotty's Potties sole negligence. Customer will promptly reimburse Scotty's Potties for any damage to or loss of the equipment. Equipment damage beyond repair will be paid for by the customer at replacement cost.

5) **Enforcement.** If Customer fails to make any payment or to perform any obligation due hereunder, Scotty's Potties may pursue all remedies available at law or in equity, including termination of this Agreement without notice, repossession of the equipment without legal process, and recovery of all sums due hereunder. Such remedies shall be cumulative. Customer shall pay Scotty's Potties cost's of collection and enforcement, including court costs and attorney's fees.

6) **General.**

- A) Without the prior written consent of Scotty's Potties, Customer will not assign the Agreement or any legal rights or obligations hereunder and will not transfer possession or control of the equipment.
- B) The provisions of this contract can be waived or modified only by a writing signed by both parties. Failure by Scotty's Potties to enforce any provision shall not constitute a waiver of the provision. Acceptance of the returned units shall not waive any claims by Scotty's Potties against Customer.
- C) Scotty's Potties shall not be liable for any failure to perform caused by materials or other causes beyond its control.
- D) The invalidity, unenforceability or waiver of any of the provisions shall not affect the other provisions.

Bob's Sanitation
(Scotty's Potties)

ACORD. INSURANCE PROPOSAL

DATE (MM/DD/YY)
08-07-18

THIS BINDER IS A TEMPORARY INSURANCE CONTRACT, SUBJECT TO THE CONDITIONS SHOWN ON THE REVERSE SIDE OF THIS FORM.

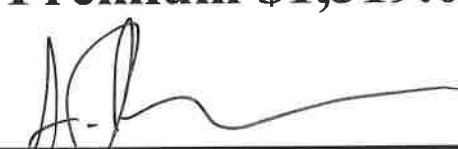

PRODUCER: Paul Lee Agency, Inc. 19329 Farmington Rd. Livonia, MI 48152 TEL: (248) 471-1688 FAX: (248) 471-1288	COMPANY		BINDER	
	NSI		TBD	
	EFFECTIVE		EXPIRATION	
	DATE	TIME	DATE	TIME
09-22-18	12:01	09-23-18	12:01	<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM
CODE:	SUB CODE:	THIS BINDER IS ISSUED TO EXTEND COVERAGE IN THE ABOVE NAMED COMPANY PER EXPIRING POLICY #:		
AGENCY CUSTOMER NO:	INSURED:			
DETROIT CHINATOWN, LLC.		DESCRIPTION OF OPERATIONS/VEHICLES/PROPERTY (Including Location) 1 AJAX DR. STE. 201 MADISON HEIGHTS, MI 48071		

COVERAGES

LIMITS

TYPE OF INSURANCE	COVERAGE/FORMS	DEDUCTIBLE	COINS %	AMOUNT
PROPERTY CAUSES OF LOSS <input type="checkbox"/> BASIC <input type="checkbox"/> BROAD <input type="checkbox"/> SPEC	NO PROPERTY COVERAGE			
GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT	RETRO DATE FOR CLAIMS MADE:	GENERAL AGGREGATE		\$ 2,000,000
		PRODUCTS-COMP/OP AGG		\$ 2,000,000
		PERSONAL & ADV INJURY		\$ 1,000,000
		EACH OCCURRENCE		\$ 1,000,000
		FIRE DAMAGE (Any one fire)		\$ 100,000
		MED EXP (Any one person)		\$ EXCLUDED
AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS		COMBINED SINGLE LIMIT		\$
		BODILY INJURY (Per person)		\$
		BODILY INJURY (Per accident)		\$
		PROPERTY DAMAGE		\$
		MEDICAL PAYMENTS		\$
		PERSONAL INJURY PROT		\$
		UNINSURED MOTORIST		\$
AUTO PHYSICAL DAMAGE COLLISION: OTHER THAN COL:	<input type="checkbox"/> ALL VEHICLES <input type="checkbox"/> SCHEDULED VEHICLES	ACTUAL CASH VALUE		\$
		STATED AMOUNT		
		OTHER		
GARAGE LIABILITY <input type="checkbox"/> ANY AUTO		AUTO ONLY - EA ACCIDENT		\$
		OTHER THAN AUTO ONLY:		
		EACH ACCIDENT		\$
		AGGREGATE		\$
EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM	RETRO DATE FOR CLAIMS MADE:	EACH OCCURRENCE		\$
		AGGREGATE		\$
		SELF-INSURED RETENTION		\$
WORKER'S COMPENSATION AND EMPLOYER'S LIABILITY	REJECTED WORKER'S COMP. COVERAGE	STATUTORY LIMITS		
		EACH ACCIDENT		\$
		DISEASE-EACH EMPLOYEE		\$
		DISEASE-POLICY LIMIT		\$
SPECIAL CONDITIONS/ OTHER COVERAGES	LIQUOR LIABILITY \$1,000,000	FEES		\$
		TAXES		\$
		ESTIMATED TOTAL PREMIUM		\$

NAME & ADDRESS

GL \$1,059 LIQUOR \$460 Total Premium \$1,519.00 "X" 	MORTGAGEE LOSS PAYEE	ADDITIONAL INSURED
	LOAN#	
	AUTHORIZED REPRESENTATIVE 	

99

CITY CLERK 30 AUG 2018 PM 12:12

100

MAYOR'S OFFICE COORDINATORS REPORT

OVERALL STATUS (please circle): **APPROVED** **DENIED** **N/A** **CANCELED**

Petition #: 502 Event Name: 13th Annual Mega March for Animals

Event Date: September 29, 2018

Street Closure: None

Organization Name: Michigan Humane Society

Street Address: 30300 Telegraph Road, Suite 120 Bingham Farms, MI 48205

Receipt date of the COMPLETED Special Events Application:	
Date of City Clerk's Departmental Reference Communication:	
Due date for City Departments reports:	
Due date for the Coordinators Report to City Clerk:	

Event Elements (check all that apply):

- Walkathon Carnival/Circus Concert/Performance Run/Marathon
- Bike Race Religious Ceremony Political Ceremony Festival
- Filming Parade Sports/Recreation Rally/Demonstration
- Fireworks Convention/Conference Other: _____
- 24-Hour Liquor License**

Petition Communications (include date/time)

The Mega March for Animals is a fund raiser where participants and their leashed pets will walk from Dean Savage Park around the Corktown Neighborhood utilizing the sidewalk from 8:00am - 12:00pm.

**** ALL permits and license requirements must be fulfilled for an approval status ****

Date	Department	N/A	APPROVED	DENIED	Additional Comments
	DPD	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	DPD Assisted Event; Contracted with Prudential Security to Provide Private Security Services
	DFD/EMS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contracted with General Dispatch to Provide Private Security Services
	DPW	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Permits Required; Participants will Utilize the Sidewalks
	Health Dept.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Permits Required

Date	Department	N/A	APPROVED	DENIED	Additional Comments
	TED	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Bike Racks Required at Dean Savage Park
	Recreation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Application Received & Approved as Presented
	Bldg & Safety	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Permits Required
	Bus. License	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Permits Required
	Mayor's Office	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	All Necessary permits must be obtained prior to event. If permits are not obtained, departments can enforce closure of event.
	Municipal Parking	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Jurisdiction
	DDOT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Impact on Buses

MAYOR'S OFFICE

Signature: Bethanie Lushier

Date: August 22, 2018

City of Detroit
OFFICE OF THE CITY CLERK

Janice M. Winfrey
City Clerk

Caven West
Deputy City Clerk/Chief of Staff

DEPARTMENTAL REFERENCE COMMUNICATION

Wednesday, August 15, 2018

To: The Department or Commission Listed Below

From: Janice M. Winfrey, Detroit City Clerk

The following petition is herewith referred to you for report and recommendation to the City Council.

In accordance with that body's directive, kindly return the same with your report in duplicate within four (4) weeks.

MAYOR'S OFFICE PLANNING AND DEVELOPMENT DEPARTMENT
DPW - CITY ENGINEERING DIVISION POLICE DEPARTMENT
FIRE DEPARTMENT BUSINESS LICENSE CENTER
TRANSPORTATION DEPARTMENT

502 *Michigan Humane Society, request to hold "13th Annual Mega March for Animals" at Savage Park and in the Corktown Neighborhood on September 29, 2018 from 8:00 AM to 12:00 PM with set up and tear down to be complete on the event date 9-29-18.*

City of Detroit Special Events Application

Successful events are the result of advance planning, effective communication and teamwork. The City of Detroit will be strictly adhering to the Special Events Guidelines; please print them out for reference. Petitioners are required to complete the information below so that the City of Detroit may gain a thorough understanding of the scope and needs of the event. This form must be completed and returned to the Special Events and Film Handling Office at least **60 days** prior to the first date of the event. If submitted later than 60 days prior, application is subject to denial. Please type or print clearly and attach additional sheets and maps as needed.

Event Name: 13th Annual Mega March For Animals

Event Location: Savage Park & Corktown Neighborhood – Detroit MI

Is this going to be an annual event? Yes No

Section 2- ORGANIZATION/APPLICANT INFORMATION

Organization Name: Michigan Humane Society

Organization Mailing Address: 30300 Telegraph Rd. Suite 220, Bingham Farms MI 48025

Business Phone: 866-mhumane

Business Website: michiganhumane.org

Applicant Name: Greg Harris

Business Phone: 248 – 283-5628

Cell Phone: 313-407-1010

Email: gharris@michiganhumane.org

Event On-Site Contact Person:

Name: Greg Harris

Business Phone: Same As Above

Cell Phone: Same As Above

Email: Same As Above

Event Elements (check all that apply)

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Walkathon | <input type="checkbox"/> Carnival/Circus | <input type="checkbox"/> Concert/Performance |
| <input type="checkbox"/> Run/Marathon | <input type="checkbox"/> Bike Race | <input type="checkbox"/> Religious Ceremony |
| <input type="checkbox"/> Political Event | <input type="checkbox"/> Festival | <input type="checkbox"/> Filming |
| <input type="checkbox"/> Parade | <input type="checkbox"/> Sports/Recreation | <input type="checkbox"/> Rally/Demonstration |
| <input type="checkbox"/> Convention/Conference | <input type="checkbox"/> Fireworks | <input type="checkbox"/> Other: _____ |

Please provide a brief description of your event:

The Mega March for Animals offers an upbeat walk for our supporters and their well-behaved dogs. 2018 marks the 13th anniversary of this fundraising event and consistently draws about 800 pet owners and up to 300 dogs. Festivities begin early with a 1.2 mile walk start of 10:00am, concluding at about 11:30am. The Mega March is advertised months prior to the actual walks and concludes on event day with information available through pet-focused vendors, free bites to eat, and music. On average, this event generates nearly \$400,000, ultimately helping MHS to continue its mission to

improve and save lives through compassionate care, community engagement, and advocacy for animals.

What are the projected set-up, event and tear down dates and times (must be completed)?

Begin Set-up Date : 9/29/18 Time: 6:00am Complete Set-up Date: 9/29/18 Time: 9:00am

Event Start Date: 9/29/18 Time: 8:00am Event End Date: 9/29/18 Time: 12:00pm

Begin Tearing Down Date: 9/29/18 Complete Tear Down Date: 9/29/18

Event Times (If more than one day, give times for each day): 9:00am-12:00pm

Location of Event: Savage Park & Cork town Neighborhood – sidewalks only for walking route.

Facilities to be used (circle): Street Sidewalk Park City
Facility

Please attach a copy of Port-a-John, Sanitation, and Emergency Medical Agreements as well as a site plan which illustrates the anticipated layout of your event including the following:

- Public entrance and exit
- Location of merchandising booths
- Location of food booths
- Location of garbage receptacles
- Location of beverage booths
- Location of sound stages
- Location of hand washing sinks
- Location of portable restrooms
- Location of First Aid
- Location of fire lane
- Proposed route for walk/run
- Location of tents and canopies
- Sketch of street closure
- Location of bleachers
- Location of press area
- Sketch of proposed light pole banners

Describe the entertainment for this year's event: - None.

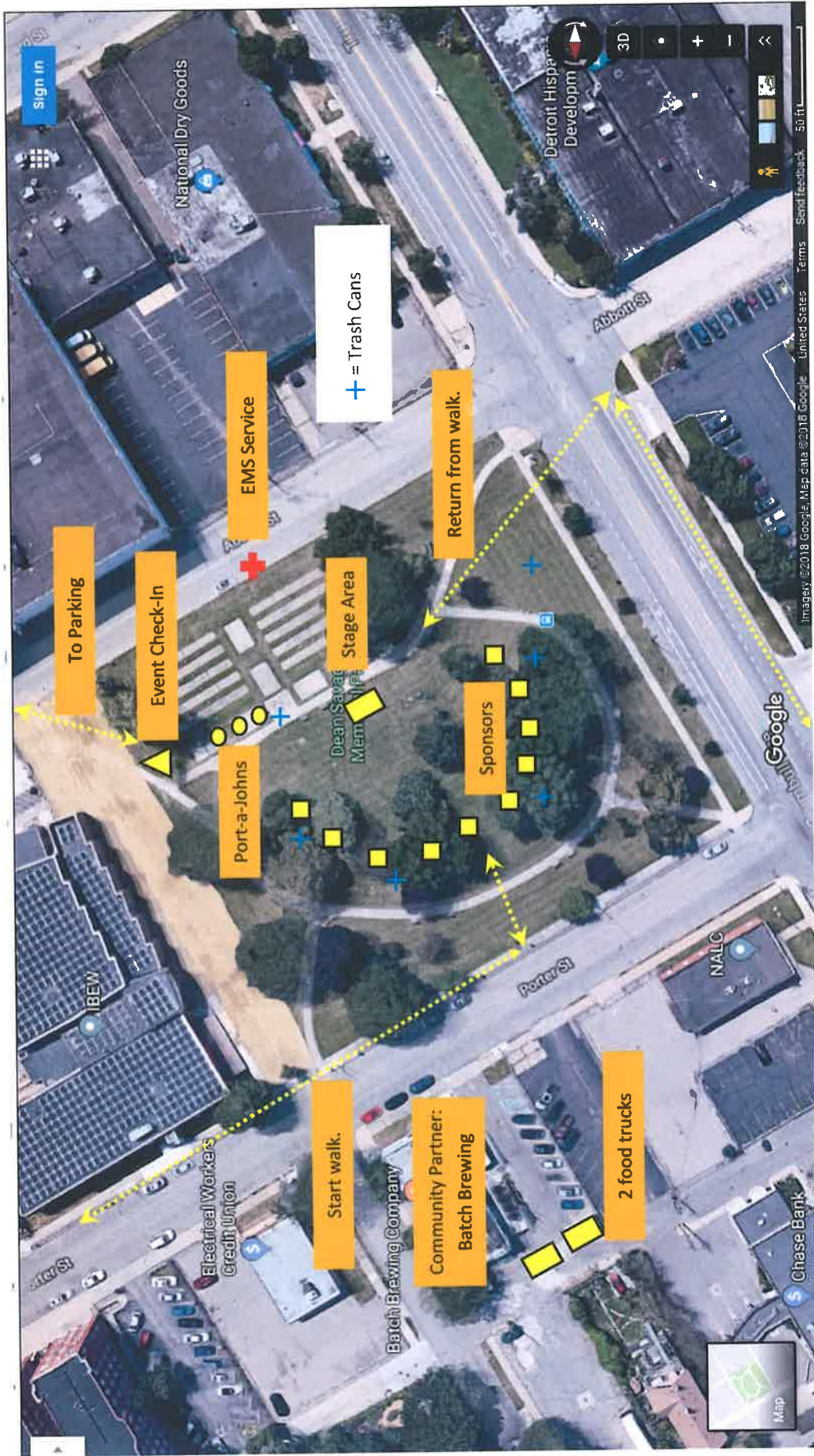
Will a sound system be used? Yes No

If yes, what type of sound system? Amplified voice and music through two speakers.

Describe specific power needs for entertainment and/or music:

Self-contained battery powered speakers.

How many generators will be used? 2 generators, Honda 2000, Honda 3000, portable



100

IOS

August 9, 2018

TO: HONORABLE CITY COUNCIL

Re: Contracts and Purchase Orders Scheduled to be considered at the Formal Session for August 14, 2018.

Please be advised that the Contract listed was submitted on February 25, 2016 for the City Council Agenda for March 1, 2016 has been amended as follows:

1. The contractor's **Contract Number** was submitted incorrectly by the Office of Contracting and Procurement. Please see the correction(s) below:

Submitted as: Page 1

GENERAL SERVICES

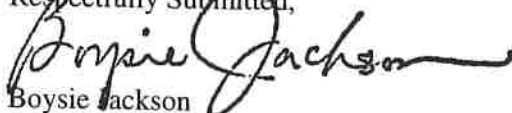
2919697 100% City Funding – Riverside Park Improvement Project – Contractor: KEO & Associates, Inc. – Location: 18286 Wyoming, Detroit, MI 48221 – Contract Period: Upon FRC Approval through June 30, 2020 – Total Contract Amount: \$2,970,000.00.

Should read as: Page 1

GENERAL SERVICES

6000025 100% City Funding – Riverside Park Improvement Project – Contractor: KEO & Associates, Inc. – Location: 18286 Wyoming, Detroit, MI 48221 – Contract Period: Upon FRC Approval through June 30, 2020 – Total Contract Amount: \$2,970,000.00.

Respectfully Submitted,



Boysie Jackson
Deputy Chief Procurement Officer
BJ/CD

BY COUNCIL MEMBER: _____

RESOLVED, that **contract #600025** referred to in the foregoing communication dated August 14, 2018 be hereby and is approved.



CITY CLERK 2018 JUN 20 PM 01:06

UCS

102
 Christopher Gulock, AICP
 Derrick Headd
 Marcel Hurt, Esq.
 Kimani Jeffrey
 Anne Marie Langan
 Jamie Murphy
 Kim Newby
 Analine Powers, Ph.D.
 Jennifer Reinhardt
 Sabrina Shockley
 Thomas Stephens, Esq.
 David Teeter
 Theresa Thomas
 Kathryn Lynch Underwood

City of Detroit
CITY COUNCIL

LEGISLATIVE POLICY DIVISION
 208 Coleman A. Young Municipal Center

Detroit, Michigan 48226
 Phone: (313) 224-4946 Fax: (313) 224-4336

David Whitaker, Esq.
 Director
Irvin Corley, Jr.
 Executive Policy Manager
Marcell R. Todd, Jr.
 Senior City Planner
Janese Chapman
 Deputy Director

LaKisha Barclift, Esq.
M. Rory Bolger, Ph.D., AICP
Elizabeth Cabot, Esq.
Tasha Cowen
Richard Drumb
George Etheridge
Deborah Goldstein

TO: COUNCIL MEMBERS
FROM: David Whitaker, Director 
 Legislative Policy Division Staff
DATE: August 20, 2018
RE: **Riverside Park Improvements Report**

In a memo to the Legislative Policy Division (LPD), Council member Castañeda-López requested that LPD provide a report detailing the improvements to Riverside Park by the City of Detroit. In the report, LPD is requested provide the following information:

- How much money the City has received in revenue and/or donations with regards to Riverside Park.
- How much money the City has spent or contracted to improve this space to date including any land acquisition-related costs (i.e. demolitions).
- Any further anticipated costs to the City for future improvements and environmental work.

This report is our response to this inquiry.

Brief History

In 2015, the City of Detroit and the Detroit International Bridge Company (DIBC), reached an agreement to swap land in the vicinity of Detroit's Riverside Park, located in southwest Detroit, in the shadow of the Ambassador Bridge. According to the Riverside Park/Land Exchange Agreement, one of the conditions of the deal was that the DIBC would make a cash contribution to the City in the amount of five million dollars in two installments: *"Three million dollars shall be paid by wire transfer on the date of the First Closing date. The second installment of two million dollars shall be paid on the second closing date."* Based on the proposed funding from the DIBC, the City developed a plan to reopen and improve Riverside Park. Subsequently, City Council approved the transaction in June 2015.

Riverside Park Funding Overview

- **SOURCE: \$3,000,000 from DIBC¹ (Land Exchange Agreement) (Phase 1)**
Uses:
\$220,000: Engineering, design, and field inspections of Phases 1 & 2
\$1,040,000: Environmental remediation of phase 1 & 2
\$1,740,000: Park construction of phase 1
 - **SOURCE: \$2,000,000 GO Bond Funding (Approved) (Phases 3 & 4)²**
Uses:
\$325,000: Engineering, design, and field inspections of Phases 3 & 4
\$1,650,000: Park construction
 - **SOURCE: \$1,262,814 Total (\$1,000,000 GO Bond Funding \$262,814 HRD Grant Funding)**
Uses:
(Pending Council approval) (Phase 2)
\$1,000,000 GO Bond Funding: For construction of skate-park, dog-park, and other site amenities
\$262,814 HRD Grant: Demolition of former Animal Control Building
- SOURCE: \$200,000 grant funding from EPA:** to provide trees and landscaping.
- **PENDING SOURCES:** GSD has also applied to Tony Hawk foundation for \$250,000 grant to supplement skate-park construction. The city will cover \$501,253 in matching funds from the General Fund, pending Council approval, if the grant is awarded to the City.
 - **PENDING SOURCES:** \$2,000,000³ for Conversion (Pending) Phase 5 construction

Riverside Park Contract Review

Since the agreement between the DIBC and the City, City Council has approved four contracts for expenditures related to Riverside Park. The contracts include one (1) General Services Department contract, one (1) Building Safety and Environmental Contract and two (2) Recreation Department contracts. The detail of each of the contracts is as follows:

GENERAL SERVICES.

Submitted to Council: **March 2016**

Contra. # **2919697⁴** 100% City Funding – Riverside Park Improvement Project – Contractor: KEO & Associates, Inc., Location: 18286 Wyoming, Detroit, MI 48221 – Contract Period: Upon FRC Approval through June 30, 2020 – Total Contract Amount: \$2,970,000.00

¹ Detroit International Bridge Company

² Bond funding provided from existing GO (General Obligation) bonds.

³ The second installment of two million dollars to be paid on the second closing date by the DIBC, as referenced in Riverside Park/Land Exchange Agreement.

Costs budgeted to Grant Fund, Acct. 2112-398580-0-632100-14106-0-0 (Appropriation for DIBC Private Contribution for Riverside Park)⁵

To-date: The City has paid the contractor a total of \$2,728,481.92 which leaves a balance of \$241,518.08.⁶

The scope of work includes: Installation of soil erosion and sedimentation control features; Installation of vault toilet building; Installation of aggregate parking lot(s); installation of asphalt walking trails, driveways; Installation of new picnic shelter; Installation of new full-service comfort station; Installation of new playscape areas, complete with drainage; Installation of sport fields and baseball diamonds; Installation of lighting; Boat launch improvements; Installation of basketball court; Installation of bollards, fencing, bio-swales and storm water control features; Installation of utilities, signage and various site amenities.

The fee schedule for the services is indicated to be a maximum of \$2,970,000

Buildings, Safety Engineering and Environmental Dept.
Submitted to Council: August 2016

Contra. # **6000256** 100% Federal Funding – To Provide Environmental Site Assessments for Parcel #3 at Riverside Park – Contractor: ASTI Environmental, Location: 28 West Adams St., Suite 1001, Detroit, MI, 48226 – Contract Period: Upon City Council Approval through September 30, 2018 – Total Contract Amount: \$338,800.00

Costs budgeted to Grant Fund, Acct. 2114-14108-130371-617900-0-0 (Appropriation for Riverside Park Environmental Assessment)⁷

To-date: The funding for this contract was provided by a \$350,000 Federal EPA Grant.⁸

The scope of work includes: Various site assessment activities on a 10-acre portion of the existing City-owned Riverside Park, Parcel 3. **Investigation to include:** Soil gas sampling, Risk Assessment Air Dispersion modeling, Site specific criteria developed based on future park use, Defining known chemical impacts, Evaluation of Ecological Risk from chemicals in riverbank bottom sediment, Evaluation of pore water migrating to the river system through the sea wall, Groundwater impact. **Contract services also include Remedial Action Plan, and Focus Feasibility Study/ Cleanup by April 2018;** contractor also required to attend all public meetings.

RECREATION

Submitted to Council: June 12, 2018

⁴ GSD reports that due to system changes, this contract number was changed to 6000025. However Novatus, the City's contract management software system still reflects 2919697. Therefore, the City's Office of Procurement needs to submit a correction letter to Council to address the change and subsequently reflect the update in Novatus.

⁵ At the time of the LPD report in March 2016, it was reported that \$2,000,000 was available for Riverside Park, with \$2,000,000 is to be contributed following the approvals from the State.

⁶ GSD response to LPD inquiry, 7/20/18.

⁷ Source LPD August 2016 Contracts Report

⁸ GSD response to LPD inquiry, 7/20/18.

Contra. # **6001458** 100% City Funding – To Provide Park Improvements to Phases 3 & 4 at Riverside Park. – Contractor: WCI Contractors. Location: 20210 Conner Street, Detroit, MI 48234 – Contract Period: June 26, 2018, through June 1, 2021 – Total Contract Amount: \$2,000,000.00. **Costs budgeted to Bond Fund, Acct. 4524-20315-470012-644124-470007-0-0 (Appropriation for Neighborhood Redevelopment & Housing)**

To-date: The City provided the funding for this contract through available GO Bonds.⁹

The scope of work includes: Task 1 – Pre-Design Meetings; Task 2 – Inventory and Analysis; Task 3 – Design Development.

RECREATION

Submitted to Council: **June 26, 2018**

Contra. # **6001473** 100% City Funding – To Provide Riverside Park Improvements for Phase 2, Part B. Services to Include the Installation of Concrete, Landscaping, Skate Park, and Skate Park Lighting. – Contractor: KEO and Associates INC – Location: 18286 Wyoming, Detroit MI, 48221 – Contract Period: June 26, 2018 through May 29, 2019 – Total Contract Amount: \$1,262,814.00. **Costs budgeted to the following accounts:**

\$1,000,000 to Bond Fund, Acct. 4524-20315-470012-644124-470007-0, Appropriation for Neighborhood Redevelopment & Housing & \$262,814 to Grant Fund, Acct. 2112-14106-398580-632100-0

To-date: The City provided the \$1,000,000 bond funds for this contract through available GO Bonds.¹⁰ The \$262,814 in grant funds is sourced from HRD reimbursement fund for the demolition of the former Animal Control Building on the site.¹¹

The scope of work includes: Improvements to Riverside Park, identified as Phase 2, Part B services to include installation of concrete, landscaping, a Skate Park and Skate Park lighting.

The Riverside Park Master Plan Overview (attached) included the following funding summary:

Riverside Park To-Date Actual Expenditures

Riverside Park Construction Costs Detail Breakdown

Description of expenditures	Cost	% of Cost
Phase I		
Pre-Construction, Remediation, Demolition and Design Work	\$ 1,029,572.40	37.2%
Installation of Equip. and Amenities	\$ 206,857.30	7.5%
Phase II and III		
Pre-Construction, Survey, Testing and Remediation	<u>\$ 1,534,375.36</u>	<u>55.4%</u>

⁹ GSD response to LPD inquiry, 7/20/18.

¹⁰ Source LPD June 26, 2018 Contracts Report.

¹¹ Source: General Services Department, in a memo to Council dated July 3, 2018

Cost Invoiced to Date (As of 6/30/2018)

\$ 2,770,805.06

100%

Riverside Park Budget for a Proposed Skate-Park

Breakdown of estimated cost of skate-park:

	Cost	% of Cost
Layout	\$ 29,000.00	3.9%
Rails/Drains	\$ 80,898.00	10.8%
Fine Grades of bowl	\$ 14,957.00	2.0%
Form Work	\$ 219,795.00	29.3%
Steel coping/Edging	\$ 36,000.00	4.8%
Rebar	\$ 96,000.00	12.8%
Concrete	\$ 256,000.00	34.1%
Underground Piping	\$ 18,603.00	2.5%
Total estimated cost of Skate-park	\$ 751,253.00 *	100%

****The city will cover \$501,253 and \$250,000 is expected from the Tony Hawk Foundation***

Phase I is complete

Phase II is 95% complete, some remediation and testing still needs to be done.¹²

According to GSD, the year-to-date actuals detailed above, illustrate the costs that have been invoiced to GSD as of 6/30/2018.

In addition, are the costs estimates for the proposed skate-park, of which the Council approved an application of a grant to the Tony Hawk¹³ Foundation of \$250,000. The grant requires a cash match of \$501,253, which brings the total cost of the project to \$751,253. On July 10, 2018, the Council approved a resolution (attached) authorizing the Office of Development and Grants to submit the grant application to the Tony Hawk Foundation for its Built to Play Grant.

Please contact us if we can be of any further assistance.

Attachments: Letter from GSD, Responding to (LPD) Riverside Park Questions
GSD Riverside Park Preliminary Master Plan
OCFO Tony Hawk Foundation Grant Application Request for a Skate Park

cc: Auditor General's Office

¹² Source: General Services Department (GSD)

¹³ Tony Hawk is arguably the single most influential skateboarder of all time, commonly known by his nickname "The Birdman," is an American professional skateboarder, actor and owner of skateboard company Birdhouse.



CITY OF DETROIT
GENERAL SERVICES DEPARTMENT

18100 MEYERS ROAD
DETROIT, MICHIGAN 48235
PHONE 313•628•0900 TTY:311
FAX 313•628•1915
WWW.DETROITMI.GOV

July 3, 2018

Honorable City Council
Detroit City Council
2 Woodward Avenue, Suite 1340
Detroit, Michigan 48226

Re: Riverside Park

Dear Honorable Council,

In regards to contract to your Riverside Park Questions:

How much money the City has received in revenue and/or donations with regards to Riverside Park.

- \$3,000,000 from Land Exchange Agreement
- \$125,000 from EPA funding for tree canopies (to be installed at Phase 2)

How much money the City has spent or contracted to improve this space to date including any land acquisition-related costs (i.e. demolitions)

- \$3,000,000 split between Phase 1 (design, environmental remediation, and park construction) and Phase 2 (design, environmental remediation).
- \$104,000 on Phase 3 Due Care Plan, environmental investigations, and topographic and boundary surveys.
- \$350,000 on Phase 4 for EPA Site Specific Environmental Assessment (Grant)

Any further anticipated costs to the City for future improvements and environmental work.

- \$1,262,814 (\$1,000,000 Bond funding. \$262, 814 HRD reimbursement funds for demolition of Animal Control Building) for park construction of Phase 2. (Pending Approval)
- \$2,000,000 split for construction of phases 3, 4, and 5. (Pending on conversion)

Respectfully,


Brad Dick
Director, General Services Department

cc: Honorable City Council
City Clerk
Stephanie Washington



Riverside Park Funding Overview

- \$3,000,000 from DIBC (Land Exchange Agreement) (Phase 1)
- \$220,000: Engineering, design, and field inspections of Phases 1 & 2
- \$1,040,000: Environmental remediation of phase 1 & 2
- \$1,740,000: Park construction of phase 1
- \$2,000,000 Bond Funding (Approved) (Phases 3 & 4)
- \$325,000: Engineering, design, and field inspections of Phases 3 & 4
- \$1,660,000: Park construction
- \$1,262,814 Total Contract (51,000,000 Bond Funding \$262,814 Grant) (Pending council approval) (Phase 2)
- For construction of skate park, dog park, and other site amenities
- This is in addition to \$200,000 funding from EPA to provide trees and landscaping work.
- GSD has also applied to Tony Hawk foundation for \$250,000 to supplement skatepark construction.
- \$2,000,000 for Conversion (Pending)
- Phase 5 construction

Phase 2 was not a part of original park plan. 3 acres of City property added to the park in 2016

Riverside Environmental Overview

- Phase 3: Environmental Assessment nearly complete.
- Phase 4: Response Activity and Due Care Plans are to be completed September 2018
- Phase 5: DTE remediation of parcel 2 is to be completed by January 2019, site restoration Spring 2019. Due Care Plan for area outside Parcel 2 is to be complete mid/late summer 2018.

Riverside Conversion Overview

MDNR is completing its submission package to the National Park Service for final review. MDNR has indicated that it expects NPS recommendation of approval of the conversion, however timing of NPS's final decision is not known.

Riverside Schedule Overview

- Phase 1: -Construction complete. Park closed currently until environmental remediation is completed by DTE at Phase 5
- Phase 2: -Dog park and skate park construction pending on Council approval. Estimated completion Spring 2019
- Phase 3 and 4: -Design, engineering, and construction contract reviewed by Council. Community input meeting planned for August. Estimated park completion 2019
- Phase 5: -DTE is mitigating environmental contamination currently. Disturbed areas to be restored by DTE.

RIVERSIDE PARK - PRELIMINARY MASTER PLAN



CITY OF DETROIT
OFFICE OF THE CHIEF FINANCIAL OFFICER
OFFICE OF DEVELOPMENT AND GRANTS

19

Formal Session of JULY 3, 2018
Line Item(s) 19
From/To: Regular Advisory New Business
 BFEA PH&S Internal Ops N&CS PAED
 TR&SP The Clerk Other
 Authorized Referred To Committee
 Failed Other

NEIGHBORHOOD & COMMUNITY SERVICES
Date: 7-5-18 Line Item # 10
 New Unfinished Bus. Discussion
 Hearing Public Hearing Interview
Disposition: Approve

2 WOODWARD AVENUE, SUITE 1020
DETROIT, MICHIGAN 48226
PHONE: 313 • 628-2158
FAX: 313 • 224 - 0542
WWW.DETROITMI.GOV

June 8, 2018

The Honorable Detroit City Council
ATTN: City Clerk Office
200 Coleman A. Young Municipal Center
Detroit MI 48226

RE: Authorization to submit a grant application to the Tony Hawk Foundation for the FY 2018 Built To Play Grant

The General Service Department is hereby requesting authorization from Detroit City Council to submit a grant application to the Tony Hawk Foundation for the FY 2018 Built To Play Grant. The amount being sought is \$250,000.00. There is a cash match requirement of \$501,253.00. The total project cost is \$751,253.00.

The FY 2018 Built To Play grant will enable the department to build a skate park at Riverside Park. If granted, the project will allow children in the community to utilize a skate park.

We respectfully request your approval to submit the grant application by adopting the attached resolution.

Sincerely,

Ryan Friedrichs
Director, Office of Development and Grants

CC:
Katerli Bounds, Deputy Director, Grants
Sajjiah Parker, Assistant Director, Grants

GF

RESOLUTION

Council Member _____

WHEREAS, the General Service Department has requested authorization from City Council to submit a grant application to the Tony Hawk Foundation for the FY 2018 Built To Play Grant, in the amount of \$250,000.00, to build a skate park at Riverside Park; and

WHEREAS, the General Service Department has \$501,253.00 available in its FY 2019 Departmental allocation for the City match requirement for the Built To Play Grant, now therefore be it

RESOLVED, that the General Services Department is hereby authorized to submit a grant application to the Tony Hawk Foundation.

**Office of Grants Management
Grant Application Request Form**



In order to secure the Office of Grants Management approval required under Section 18-4-2 of the Detroit City Charter, this form is to be filled out by City Departments as soon as possible upon learning of an opportunity that the Department would like to pursue. This form must be submitted not later than 20 business days prior to the application deadline.

Please submit this form to Sajjiah Parker Associate Director of Public Safety and Health, Office of Development and Grants at parkerso@detroitmi.gov.

City Department	General Services/Parks & Recreation Department
Date	June 6 2018
Department Contact Name	Donna Miller
Department Contact Phone	313-224-1158
Department Contact Email	mlleado@detroitmi.gov
Grant Opportunity Title	Built To Play
Grant Opportunity Funding Agency	Tony Hawk Foundation
Web Link to Opportunity Information	www.tonyhawkfoundation.org/built-to-play
Award Amount (that Department will apply for)	\$250,000.00
Application Due Date	June 13 2018
Duration of Grant Award	one year
Anticipated Proposed Budget Amount	\$751,253.00
Match Requirement Amount	\$501,253.00
Source of Match (Include Appropriation Number, Cost Center, and Object Code)	4524-20315-470012-644124-470007
List of programs/services/activities to be funded and the Amount of Funding Requested for Each <i>Sample:</i> - ABC Afterschool program: \$150,000 - XYZ Youth leadership program: \$100,000 - Salary/Benefits: \$95,000 - Supplies: \$5,000	Funding will be used to build a skatepark at Riverside Park
Brief Statement of Priorities/Purpose for the Application <i>Sample: To support expansion of promising youth development programs in MNO neighborhood.</i>	Purpose of the application is to raise funding to support building a skatepark at Riverside Park
Key Performance Indicators to be Used to Measure the Programs/Services/Activities <i>Sample:</i> # of kids newly enrolled in ABC and XYZ # of kids who complete ABC and XYZ % of kids from ABC who demonstrate improved educational performance % of kids from XYZ who demonstrate improved leadership skills	-completion of the skatepark -community kids using the skatepark


Director's Signature

6-5-18
Date



CITY OF DETROIT
RECREATION DEPARTMENT
ADMINISTRATION OFFICE

102-103

18100 MEYERS
DETROIT, MICHIGAN 48235
(313) 224-1100 • TTY:711
(313) 224-3544
WWW.DETROITMI.GOV

August 8, 2018

Honorable City Council;

Re: Authorization to accept a donation of park improvements at Rouge Park from Back Country Hunters and Anglers

Detroit General Services Department requests authorization from your Honorable Body to accept a donation of park improvements from Back Country Hunters and Anglers to be installed at the archery range inside Rouge Park. These improvements are valued at \$1,500.00.

Park improvements will consist of the following:

- Re-painting shooting platform
- Re-pair and re-paint bow racks
- Mount range rules sign to shooting platform
- Re-stone the walkway
- Install permanent arrow quivers
- Clean-up

We respectfully request your authorization to accept this donation of park improvements with a Waiver of Reconsideration

Sincerely,

Janet H. Anderson

Janet Anderson
Director



Resolution

Council Member _____

Whereas, the General Services Department-Parks and Recreation Division is requesting authorization to accept a donation of park improvements from the Back Country Hunters & Anglers to be installed at Rouge Park – Archery Range. Improvements are valued at \$1,500.00.

Whereas, the improvements will consist of re-painting the shooting platform, repair and re-paint bow racks, mount range rules sign to shooting platform, re-stone walkway, install permanent arrow quivers, and general cleanup of the area

Resolved, the General Services Department – Parks and Recreation Division is authorized to accept a donation of park improvements from the Back Country Hunters & Anglers to be installed at Rouge Park – Archery Range.



Detroit
Parks & Recreation
Department

Park Improvement Authorization Form

Today's Date: 08/02/2018

18100 Meyers Road, Upper Level
Detroit, MI 48235

Requesting Organization Name: Backcountry Hunters & Anglers
 Contact Name: Zach Snyder or Eric Tomlinson DPRD Property Name: Rouge Park
 Phone #: 313-618-0373 Fax #: _____ Property #: _____ District #: _____
 Address: 9362 Carter, Allen Park, MI Property Address: _____
 Email: cash413@gmail.com Location of Improvement in Park: Archery Range

- Information Included with Request Submission:
- Letter of Request
 - Site Plan
 - Sketch
 - Other: _____

Improvement / Project Description:
Re-paint shooting platform, repair & repaint bow racks, mount Range rules sign to shooting platform, Re-stone walkway, install permanent arrow quivers, general cleanup. New boards on bench.

Estimated Value of Improvement / Project: \$1500.00

FUNDING SOURCE (optional)

- Have you already raised any money for this improvement?
- My group used a crowdfunding platform (see ioby.org/detroit for more information)
 - We received a grant
 - My group collected donations from the community without using a digital platform
 - Other Funder

If using a crowdfunding platform to fundraise for this improvement, provide the URL for your campaign page below:

REQUIRED MAINTENANCE

N/A

- General Services Dept. - Design Plan Reviewed
- General Services Dept. - Maintenance Required

GSD Project Coordinator: Jubina Justice GSD General Manager: Janet Anderson
 Date: 8/16/2018 Date: _____

By submitting this request I/We/Our Organization agree(s) to abide by all rules and policies of the City of Detroit and the Detroit Recreation Department. I/We also agree that all information submitted in this Park Improvement Authorization Form is true and accurate to the best of my/our knowledge and I/We hereby request that the Detroit Recreation Department consider my/our Project for approval. I/We agree at my/our own expense to defend, indemnify, save and hold harmless the City of Detroit, its officers, employees and agents against and from any and all liabilities, obligations, damages, penalties, claims, costs, charges, and expenses (including without limitation, fees and expenses of attorneys, expert witnesses and other consultants) which may be imposed upon, incurred by or asserted against myself/us and/or the City of Detroit by reason of or resulting from my/our use of the DRD Property named above and construction of this Project as described herein.

Signature: 

Print Name: Zachary J. Snyder

On behalf of Organization: Backcountry Hunters & Anglers

Date: 08/02/2018

**** FOR DETROIT PARKS & RECREATION DEPARTMENT USE ONLY ****

- Project Approved as Submitted
- Project Approved w/ Changes (See Below)
- Project Denied

* Approved By DPRD Director: Janet Anderson Date: August 7, 2018

* Requesting Group shall not have approval to make the requested park improvement without the approval of the Parks & Recreation Department Director

CHANGES REQUIRED FOR APPROVAL



ELITE ARCHERY ACADEMY
 Founder, Eric L. Tomlinson
 e-mail: elitearchery49@gmail.com
 SUPPORT & PROMOTE
 THE OLYMPIC SPORT OF ARCHERY
 Web: www.elitearcheryjoad.com

"ALL INSTRUCTIONS ARE CERTIFIED"

Eric L. Tomlinson, Director
 Cell: 313.475.8905
 Office: 313. 940-7129

20162 Northrop
 Detroit, MI 48219

103 ~~104~~

**OFFICE OF CONTRACTING AND
PROCUREMENT**

August 30, 2018

HONORABLE CITY COUNCIL:

The Office of Contracting and Procurement recommends a Contract with the following firm(s) or person(s):

6000571 100% Federal Funding – AMEND #1 – 2015-2016 CDBG/NOF - To Provide Public Facility Rehabilitation for Building located at 1423 Field St. for Adult Well Being Services. – Contractor: Adult Well-Being Services, 1423 Field St., Detroit, MI 48214 – Contract Period: Upon City Council Approval through January 31, 2019 – Total Contract Amount: \$325,331.28. **HOUSING AND REVITALIZATION**

This Amendment is an Extension for Time Only. Original Contract Terms August 31, 2016 through September 1, 2018

Respectfully submitted,

Boysie Jackson, Chief Procurement Officer
Office of Contracting and Procurement

BY COUNCIL MEMBER _____ **TATE** _____

RESOLVED, that Contract No. 6000571 referred to in the foregoing communication dated August 30, 2018 be hereby and is approved.