PH5

VOTE 10/9/18

Benson, Chair

NEW BUSINESS



MAYOR'S OFFICE COORDINATORS REPORT

OVERALL STATUS (ple	OVERALL STATUS (please circle): APPROVED DENIED N/A CANCELED							
Petition #: 538	etition #: 538 Event Name: Beacon Park Winter Events							
Event Date : October 12	- Dec	ember 16, 20	18					
Street Closure: None								
	Organization Name: Downtown Detroit Partnership							
Street Address: 1 Campus Martius Suite 380 Detroit, MI 48226								
Receipt date of the COMPLETED Special Events Application:								
Date of City Clerk's Department	nental F	Reference Comm						
Due date for City Departmen								
Due date for the Coordinato	rs Repo	ort to City Clerk:						
Event Elements (check all the	nat appl	y):						
Walkathon Ca	ırnival/0	Circus	Concer	t/Performance Run/Marathon				
Bike Race Re	ligious	Ceremony	Political	l Ceremony Festival				
Filming Pa	rade		Sports/I	Recreation Rally/Demonstration				
Fireworks Co	nventio	on/Conference	✓ Other: _	Park Programming				
24-Hour Liquor License								
	Pet	ition Communic	cations (inc	clude date/time)				
Park Programming for Bea	acon P	ark which inclu	des interac	ctive art display, park lighting, and holiday				
parties for the 2018 holida	y seas	on.						
** <u>ALL</u> _permi	ts and I	icense requirem	ents must b	be fulfilled for an approval status **				
Date Department	N/A	APPROVED	DENIED	Additional Comments				
DPD		✓		DPD will Provide Special Attention; Contracted with Eagle Security to Provide Private Security Services				
DFD/ EMS		\checkmark		Pending Inspections; Contracted with Hart Medical to Provide Private EMS Services				
DPW		✓		No Permits Required				
Health Dept.		✓		Temporary Food License Required				

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

MAYOR'S OFFICE

Signature: <u>Bethanie Lushier</u> Date: <u>September 26, 2018</u>

City of **B**etroit

Janice M. Winfrey
City Clerk

OFFICE OF THE CITY CLERK

Caven West
Deputy City Clerk/Chief of Staff

DEPARTMENTAL REFERENCE COMMUNICATION

Tuesday, September 25, 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 POLICE DEPARTMENT
FIRE DEPARTMENT BUSINESS LICENSE CENTER
DPW - CITY ENGINEERING DIVISION
BUILDINGS SAFETY ENGINEERING

Downtown Detroit Partnership, request to hold "Beacon Park Winter Events" at 1901 Grand River, hosting various events with various dates from October 12, 2018 thru December 16, 2018.

538

City of Detroit Special Events Application

SINDIAN PA SES STOZNISTO ALIO

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.

Sec	tion 1- GENERAL EVENT	INFORMATION
Event Name: BEACON PARK WINTER	EVENTS	
Event Location: 1901 GRAND RIVER		
Is this going to be an annual event? Y	es 🗆 No	
Section 2-	ORGANIZATION/APPL	ICANT INFORMATION
Organization Name: DOWNTOWN DET	ROIT PARTNERSHIP	
Organization Mailing Address: 1 CAMPU	S MARTIUS, SUITE 380, DETROIT	, MI 48226
Business Phone: 313-715-9944	Business W	ebsite: 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)	9	
[] Walkathon	[] Carnival/Circus	[] Concert/Performance
[] Run/Marathon	[] Bike Race	[] Religious Ceremony
[] Political Event	[] Festival	[] Filming
[] Parade	[] Sports/Recreation	[] Rally/Demonstration
[] Convention/Conference	[] Fireworks	[] Other: PARK PROGRAMMING
Please provide a brief description of 10/12 – 11/19, Interactive Public Art, I 11/16 Light up Beacon Park, 5p – mid 11/24 Home for the Holidays, 5p – mid	Daily night	ą.

12/15 & 16, Selfies with Santa, (Family Fun), 1p - 5p

Begin Set-up Date :	Time:	Complete Set-up Date	T	me:			
Event Start Date:	Time:	Event End Date:	Ti	me:			
Begin Tearing Down Date:		Complete Tear Down	Date:				
Event Times (If more than one day USING TENT CURRENTLY CO			L PROGRAMMING				
	I N S	LOCATION/SITE I					
Location of Event: BEACON PAI Facilities to be used (circle): S	RK, 1901 GRANL	O RIVER, DETROIT, MI 482 Sidewalk	26 Park	City			
Facility	illot	Sidewalk	1 dix	City			
Please attach a copy of Port-a-John anticipated layout of your event in			nts as well as a site plan wh	ich illustrates the			
-Public entrance and exit		-Locat	on of First Aid				
-Location of merchandising booths	S		on of fire lane				
-Location of food booths			sed route for walk/run ion of tents and canopies				
-Location of garbage receptacles -Location of beverage booths			on of tents and canopies of street closure				
-Location of sound stages		4	ion of bleachers				
-Location of hand washing sinks		-Location of press area					
Location of hand washing sinks		-Sketch of proposed light pole banners					
-Location of portable restrooms		-Sketci	of proposed light pole ban	ners			
	S			ners			
-Location of portable restrooms		ection 4- ENTERTA		ners			
-Location of portable restrooms		ection 4- ENTERTA		neis			
-Location of portable restrooms		ection 4- ENTERTA		nets			
Location of portable restrooms Describe the entertainment for this	s year's event: A	ection 4- ENTERTA		nets			
-Location of portable restrooms Describe the entertainment for this Will a sound system be used?	s year's event: A	ection 4- ENTERTA TTACHED. No Diffied sound.	INMENT	iicis			
Location of portable restrooms Describe the entertainment for this Will a sound system be used? If yes, what type of sound system? Describe specific power needs for any are	s year's event: A' Yes House sound, ampentertainment and	ection 4- ENTERTA ITACHED. No Diffied sound. /or music:	INMENT				
Describe the entertainment for this Will a sound system be used? f yes, what type of sound system? Describe specific power needs for the power.	s year's event: A' Yes House sound, ampentertainment and	ection 4- ENTERTA ITACHED. No Diffied sound. /or music:	INMENT				
Describe the entertainment for this Will a sound system be used? f yes, what type of sound system? Describe specific power needs for a content of the power.	s year's event: A' Yes House sound, ampentertainment and	ection 4- ENTERTA TTACHED. No Diffied sound. /or music:	INMENT				
Describe the entertainment for this Will a sound system be used? f yes, what type of sound system? Describe specific power needs for each power.	Yes House sound, ampentertainment and	ection 4- ENTERTA ITACHED. No Diffied sound. /or music:	INMENT				

Contact Person:	
Address:	Phone:
City/State/Zip	
Section 5- SALES INFORM	ATION
Will there be advanced ticket sales?	
Will there be on-site ticket sales?	
Will there be vending or sales?	
[X] Food [] Merchandise [X] Non-Alcoholic Beverages	[X] Alcoholic Beverages
Indicate type of items to be sold:	
5	
Section 6- PUBLIC SAFETY & PARKING	GINFORMATION
Name of Private Security Company: Existing park contract security will be used.	
Contact Person: EAGLE SECURITY/ MATT WARNER	
Address:	Phone:734-306-4871
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?	
WEBSITE	

Section 7- C	OMMUNICATIO	ON & COMMUNITY	IMPAC'	T INFORMAT	TON
How will your event impact the	surrounding community	(i.e. pedestrian traffic, sound	carryover, sa	fety)?	
					
Have local neighborhood groups			☐ Yes	□ No	
Indicate what steps you have or	will take to notify them	of your event:			
-					
	Sec	tion 8- EVENT SET-U	J P	Y 1/1 1	
Complete the appropriate categories	that apply to the event S	Structure			
	How Many?	Size/Height			
Booth					
Tents (enclosed on 3 sides)	13	S ***			
Canopy (open on all sides)	λ 				
Staging/Scaffolding	-	<u> </u>	-		
Bleachers		<u> </u>			
	Section 9- COM	PLETE ALL THAT	APPLY	1-12-11	
Emergency medical services?	Section 5 Com		WILI		
Contact Person: Hart Medical for Ligh	nt up Beacon Park				
Address: 220 Bagley, Suite 912					
City/State/Zip: Detroit, MI 48226					
Name of company providing port-a-j	ohns. Scotty's Potties	as needed			
Contact Person: Lori Proctor					
Address: PO Box 530845		Phone	734-421-14	100	
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 propo		
STREET NAME:		
FROM:	TO:	
CLOSURE DATES:	BEG TIME:	END TIME:
REOPEN DATE:	TIME:	
STREET NAME:		
FROM:		
CLOSURE DATES:	BEG TIME:	END TIME:
REOPEN DATE:	TIME:	
STREET NAME:		
FROM:	TO:	
CLOSURE DATES:	BEG TIME:	END TIME:
REOPEN DATE:	TIME:	
STREET NAME:	akre is a second of the contract of	<u></u>
FROM:	TO:	
CLOSURE DATES:	BEG TIME:	END TIME:
REOPEN DATE:	TIME:	
STREET NAME:		<u>u</u>
FROM:	TO:	
CLOSURE DATES:	BEG TIME:	END TIME:
REOPEN DATE:	TIME	

PLE	ASE 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.

4Bade	9/10/18			
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:	Event Date:
Event Organizer:	
Applicant Signature:	Date:





2018 Programming | Beacon Park |

1.DESCRIPTION OF THE ARTWORK

Name:

Prismatica

Туре:

Interactive light installation

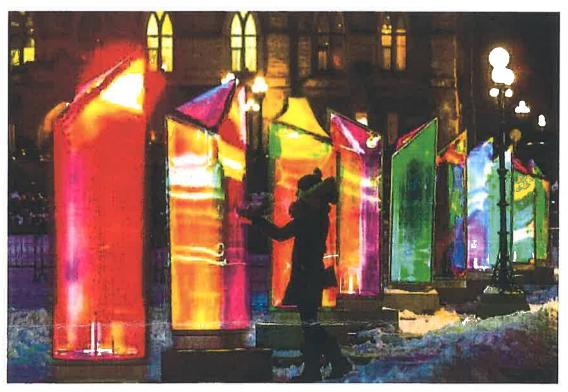
Location:

Outdoors / Indoors

Description:

A modern ice palace. Prismatica turns heads with the countless colourful reflections made by its giant prisms. Visitors can walk among them to see city life in every colour of the spectrum, and turn the prisms to make the colours dance. After sunset, the enormous interactive kaleidoscope's illusory effects reach a crescendo.

Prismatica is a participatory installation comprising 25 pivoting prisms more than two meters tall. Each one is made of panels covered with a dichroic film that reflects the colours of the rainbow, varying with the light source and viewing angle. Each prism is mounted on a base containing a projector that gives the installation a new dimension after nightfall. The rotation of the prisms triggers variable-intensity bell music.



Ottawa 2016

Credit: Doublespace Photography

Public Art Display 10/12 - 11/19

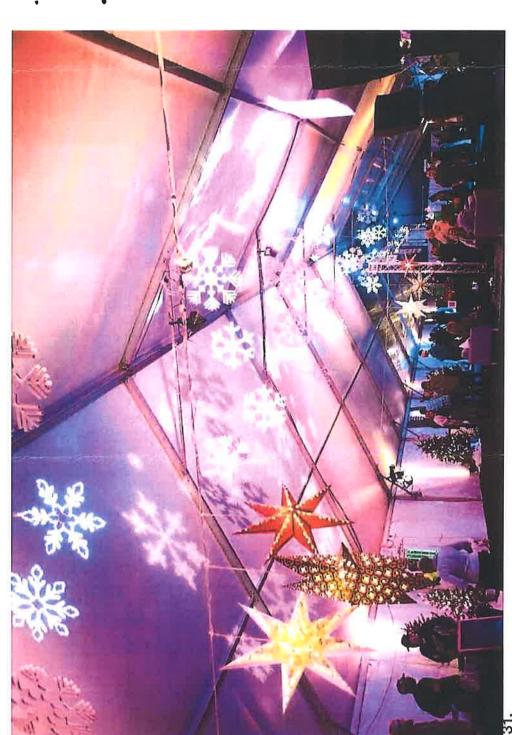
November 16, 2018

Contemporary Holiday Lighting Light Up Beacon Park

 Holiday lighting reveal ornaments, interactive including oversized attractions + winter attractions

- Winter Lodge at Beacon Selfies with Santa in the Park
- Live performances and DJ
- Live streaming of Tree Lighting celebration
- beverage supported by Fire pits, food and IImen





Events in tent:

- . Howe for the Holidays November 24, 2018 . Selfles with SANta December 15 & 16, 2018
 - Beacon Park Heated Clear Panel Tent The Winter Lodge at

(BULT IN OCTOBER)

- 100x**163** heated tent $8^{b'}$ Clear paneled and decorated
- Extends programming beverage events, and leagues, food and season for music, potential rental collaborations

Petition of Downtown Detroit
Partnership, request to hold "Beacon
Park Winter Events" at 1901 Grand
River, hosting various events with
various dates from October 12, 2018
thru December 16, 2018.

REFERRED TO THE FOLLOWING DEPARTMENT(S)

MAYOR'S OFFICE POLICE DEPARTMENT
FIRE DEPARTMENT BUSINESS LICENSE CENTER
DPW - CITY ENGINEERING DIVISION
BUILDINGS \$AFETY ENGINEERING

MAYOR'S OFFICE COORDINATORS REPORT

Petition #: 530	OVERAL	OVERALL STATUS (please circle): APPROVED DENIED N/A CANCELED								
Street Closure: Various Organization Name: Downtown Detroit Partnership 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		Petition #: 530 Event Name: 2018 Winter Magic Events								
Organization Name: 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: 24-Hour Liquor License Petition Communications (include date/time) Downtown Detroit Partnership's Winter Season which encompasses load-in/out for Christmas Tree & Salvation Army Red Kettle, Tree Lighting and Carriage Rides. *** ALL permits and license requirements must be fulfilled for an approval status ** Date Department N/A APPROVED DENIED Additional Comments Contracted with Eagle Security to Provide Private Security Services DFD/ EMS DPW ROW Permit Required for Tree Load-In & Tree Lighting Ceremony	Event Date	Event Date : November 5, 2018 - January 21, 2019								
Street Address: 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:					w/					
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										
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	Street Addr									
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) Downtown Detroit Partnership's Winter Season which encompasses load-in/out for Christmas Tree & Salvation Army Red Kettle, Tree Lighting and Carriage Rides. *** ALL permits and license requirements must be fulfilled for an approval status ** Date Department N/A APPROVED DENIED Additional Comments DPD Contracted with Eagle Security to Provide Private Security Services DFD/ Private Security Services DPD Remain Inspections; Contracted with Hart EMS to Provide Private EMS Services ROW Permit Required for Tree Load-In & Tree Lighting Ceremony	Date of City Due date for Due date for	Date of City Clerk's Departmental Reference Communication: Due date for City Departments reports:								
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) Downtown Detroit Partnership's Winter Season which encompasses load-in/out for Christmas Tree & Salvation Army Red Kettle, Tree Lighting and Carriage Rides. ** ALL permits and license requirements must be fulfilled for an approval status ** Date Department N/A APPROVED DENIED Additional Comments DPD D DENIED Contracted with Eagle Security to Provide Private Security Services DFD/ EMS DPW Red Kettle, Tree Lighting Ceremony Red Kettle, Tree Lighting Ceremony Red Kettle, Tree Lighting Ceremony					٦, ,					
Filming Parade Sports/Recreation Rally/Demonstration Fireworks Convention/Conference Other: 24-Hour Liquor License Petition Communications (include date/time) Downtown Detroit Partnership's Winter Season which encompasses load-in/out for Christmas Tree & Salvation Army Red Kettle, Tree Lighting and Carriage Rides. *** ALL permits and license requirements must be fulfilled for an approval status ** Date Department N/A APPROVED DENIED Additional Comments DPD COntracted with Eagle Security to Provide Private Security Services DFD/EMS Pending Inspections; Contracted with Hart EMS to Provide Private EMS Services ROW Permit Required for Tree Load-In & Tree Lighting Ceremony	Walkath	on Ca	arnival/C	Circus	_					
Petition Communications (include date/time) Downtown Detroit Partnership's Winter Season which encompasses load-in/out for Christmas Tree & Salvation Army Red Kettle, Tree Lighting and Carriage Rides. ** ALL permits and license requirements must be fulfilled for an approval status ** Date Department N/A APPROVED DENIED Additional Comments	Bike Ra	ce Re	eligious	Ceremony	Political	I Ceremony Festival				
Petition Communications (include date/time) Downtown Detroit Partnership's Winter Season which encompasses load-in/out for Christmas Tree & Salvation Army Red Kettle, Tree Lighting and Carriage Rides. ** ALL permits and license requirements must be fulfilled for an approval status ** Date Department N/A APPROVED DENIED Additional Comments DPD COntracted with Eagle Security to Provide Private Security Services DFD/ EMS Pending Inspections; Contracted with Hart EMS to Provide Private EMS Services ROW Permit Required for Tree Load-In & Tree Lighting Ceremony	Filming	Pa	arade		Sports/F	Recreation Rally/Demonstration				
Petition Communications (include date/time) Downtown Detroit Partnership's Winter Season which encompasses load-in/out for Christmas Tree & Salvation Army Red Kettle, Tree Lighting and Carriage Rides. ** ALL permits and license requirements must be fulfilled for an approval status ** Date Department N/A APPROVED DENIED Additional Comments DPD COntracted with Eagle Security to Provide Private Security Services DFD/EMS Pending Inspections; Contracted with Hart EMS to Provide Private EMS Services ROW Permit Required for Tree Load-In & Tree Lighting Ceremony	Firework	ks Co	onventio	n/Conference	Other: _					
Downtown Detroit Partnership's Winter Season which encompasses load-in/out for Christmas Tree & Salvation Army Red Kettle, Tree Lighting and Carriage Rides. *** ALL permits and license requirements must be fulfilled for an approval status ** Date Department N/A APPROVED DENIED Additional Comments DPD COntracted with Eagle Security to Provide Private Security Services DFD/ EMS Pending Inspections; Contracted with Hart EMS to Provide Private EMS Services ROW Permit Required for Tree Load-In & Tree Lighting Ceremony	24-Hou	r Liquor License	9							
Downtown Detroit Partnership's Winter Season which encompasses load-in/out for Christmas Tree & Salvation Army Red Kettle, Tree Lighting and Carriage Rides. *** ALL permits and license requirements must be fulfilled for an approval status ** Date Department N/A APPROVED DENIED Additional Comments DPD COntracted with Eagle Security to Provide Private Security Services DFD/ EMS Pending Inspections; Contracted with Hart EMS to Provide Private EMS Services ROW Permit Required for Tree Load-In & Tree Lighting Ceremony										
Date Department N/A APPROVED DENIED Additional Comments DPD ✓ Contracted with Eagle Security to Provide Private Security Services DFD/ EMS ✓ Pending Inspections; Contracted with Hart EMS to Provide Private EMS Services DPW ✓ ROW Permit Required for Tree Load-In & Tree Lighting Ceremony		Downtown Detroit Partnership's Winter Season which encompasses load-in/out for Christmas Tree &								
DPD Contracted with Eagle Security to Provide Private Security Services DFD/ EMS Pending Inspections; Contracted with Hart EMS to Provide Private EMS Services ROW Permit Required for Tree Load-In & Tree Lighting Ceremony		The state of the s								
DPD Private Security Services Pending Inspections; Contracted with Hart EMS to Provide Private EMS Services ROW Permit Required for Tree Load-In & Tree Lighting Ceremony	Date	Department	N/A	APPROVED	DENIED					
DFD/ EMS EMS to Provide Private EMS Services ROW Permit Required for Tree Load-In & Tree Lighting Ceremony		DPD		✓						
DPW Tree Lighting Ceremony				\checkmark						
Health Dept. No Permits Required		DPW		✓		· ·				
		Health Dept.		√		No Permits Required				

ENTERED OCT 04 2018 M. T. F. under NB (RCL) 2-0 (MS; RCL) OT: OTHER T LOG STOZ X83373 ALIO (Grant)

				DENIED	A dalida wal O amara anta
Date	Department	N/A	APPROVED	DENIED	Additional Comments
	TED		\checkmark		Type III Barricades Required for Street Closures
	Recreation		V		Application Received & Approved as Presented
	Bldg & Safety		V		Permits Required for Electrical & Propane
	Bus. License		✓		No Permits Required
	Mayor's Office		✓		All Necessary permits must be obtained prior to event. If permits are not obtained, departments can enforce closure of event.
	Municipal Parking		✓		Purchase of Parking Meters Required for Monroe & Cadillac Square Closures
	DDOT		✓		Low Impact on Buses

MAYOR'S OFFICE

Signature: Bethanie Lucher Date: September 26, 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, September 19, 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 PLANNING AND DEVELOPMENT DEPARTMENT
MAYOR'S OFFICE BUSINESS LICENSE CENTER
RECREATION DEPARTMENT MUNICIPAL PARKING DEPARTMENT
POLICE DEPARTMENT FIRE DEPARTMENT

Downtown Detroit Partnership, request to hold "2018 Winter Magic Events" at various locvations on various dates beginning November 5, 2018 and ending January 21, 2019 with set up beginning 11-1-18 and tear down complete 1-25-19.

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.

patting of Branch Section	Section 1- GENE	KAL EVENT IN	FORMATIC	DN		
Event Name: 2018 WINTER MAG	IC EVENTS					
Event Location: DDP OPERATED DOWNTOWN CITY PARKS AND PUBLIC SPACES						
Is this going to be an annual event?	7 🗆 Yes 🗆 No					
Section 2- ORGANIZATION/APPLICANT INFORMATION						
Organization Name: DOWNTOW	N DETROIT PARTNERSH	IP				
Organization Mailing Address: 1 CAMPUS MARTIUS, SUITE 380, DETROIT, MI 48226						
Business Phone: 313-715-9944 Business Website: DowntownDetroitParks.com				pitParks.com		
Applicant Name: HEATHER BAD	RAK					
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: davi	d.cowan@downtowndetroit.org		
Event Elements (check all that ap	ply)					
[] Walkathon	[] Carnival/Circ	us	[] Concert/Pe	rformance		
[] Run/Marathon	[] Bike Race		[] Religious (Ceremony		
[] Political Event	[] Festival		[] Filming			
[] Parade	[] Sports/Recrea	tion	[] Rally/Demo	onstration		
[] Convention/Conference	[] Fireworks		[] Other: <u>PA</u>]	RK PROGRAMMING		
Please provide a brief descript	ion of your event:					
11/5/18: TREE ARRIVAL						
11/16/18: DETROIT'S TREE LIGHTING						
11/9/18 – 11/11/18: RINK PREVIEW WEEKEND (WEATHER PERMITTING)						
11/16/18 – 3/3/19: THE RINK 11/16/18 – 1/31/19: THE SALVATION ARMY RED KETTLE						
11/10/10 - 1/31/19: THE SALV			NEC (± 12/26 (RO IE ELINDED)		

1/7/19 - 2/26/19: BROOMBALL LEAGUE

11/16/18 - 1/1/19: KIDS ACTIVITIES ON WEEKENDS (TBD - IF FUNDED)

11/16/18 - 1/1/19: STREET PERFORMERS ON WEEKENDS (TBD - IF FUNDED)

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

Begin Set-up Date: 11/1/18

Time:

Complete Set-up Date:

11/1/18

Time:

4P

Event Start Date: 11/5/18

Time: NOON

Event End Date: 1/21/19

Time: 10P

Begin Tearing Down Date: 1/25/19

Complete Tear Down Date: 1/25/19

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

PREPARATION FOR TREE ARRIVAL, TREE DISPLAYED 24/7 THROUGH 1/21/19

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

Begin Set-up Date: 11/7/18

Time: 5A

Complete Set-up Date: 11/7/18

Time: 7A

Event Start Date: 11/16/18

Time: 5P

Event End Date:

1/31/19

Time: 5A

Begin Tearing Down Date:

1/31/19

Complete Tear Down Date: 1/31/19.

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

SALAVATION RED KETTLE DISPLAYED DAILY FROM 11/16/18 – 1/31/19

What are the projected set-up, event and tear down dates and times (must be completed)? **DETROIT'S TREE LIGHTING**

Begin Set-up Date: 11/15/18

Time: 11P

Complete Set-up Date: 11/16/18

Time: 4PM

Event Start Date: 11/16/18

Time: 5P

Event End Date:

11/16/18

Time: MIDNIGHT

Begin Tearing Down Date: 11/16/18

Complete Tear Down Date 8A, 11/17/18

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

11/16/18, 5P - MIDNIGHT

Section 3- LOCATION/SITE INFORMATION

Location of Event: CAMPUS	MARTIUS PARK, CAD	ILLAC SQUARE, GI	RAND CIRCUS PARK, ESPL	ANADE AND CAPITOL PARK
Facilities to be used (circle): Facility	Street	Sidewalk	Park	City
Please attach a copy of Port-a- anticipated layout of your ever	John, Sanitation, and Emo nt including the following	ergency Medical Agre ;:	ements as well as a site plan wl	nich illustrates the
-Public entrance and exit -Location of merchandising be -Location of food booths -Location of garbage receptacl -Location of beverage booths -Location of sound stages -Location of hand washing sin -Location of portable restroom	ks as	-L -Pi -L -SI -L -SI	ocation of First Aid ocation of fire lane roposed route for walk/run ocation of tents and canopies ketch of street closure ocation of bleachers ocation of press area ketch of proposed light pole bar	nners
经常是经济的企业技术	Sec	tion 4- ENTER	TAINMENT	
Describe the entertainment for	this year's event: ATT	ACHED.		
N-1				
Will a sound system be used?	□ Yes □ N	0		
If yes, what type of sound syste	em? House sound, amplif	ied sound.		
Describe specific power needs Park power.	for entertainment and/or	music:		
How many generators will be u		N		
Name of vendor providing g	enerators:			
Contact Person: JAMES WEI	RHLE, XYZ POWER			
Address: 3549 ALIDA AVE.			Phone: 248-875-6	070
City/State/Zip ROCHESTER	HILLS, MI 48309			
	Section	n 5- SALES INI	FORMATION	
Will there be advanced ticket s If yes, please describe:				
Will there be on-site ticket sale If yes, list price(s): PREFERR		No ELIGHTING AND RI	NK ADMISSION	
Will there be vending or sales? If yes, check all that apply:	Yes [□ No		
[X] Food [] Merc	chandise [X]No	on-Alcoholic Beverage	es [X] Alcoholic Beve	erages

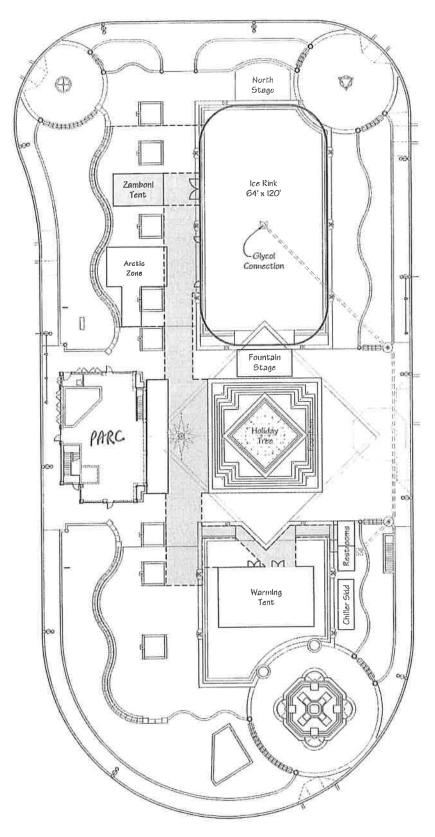
Indicate type of items to be sold: FOOD TRUCKS, WORKING WITH PARC TO ADD-A-BAR ON MICHIGAN

Section 7- COMMUNICATION & COMMUNITY IMPACT INFORMATION					
How will your event impact the surrounding community (i.e. pedestrian traffic, sound carryover, safety)? ROAD CLOSURE FOR TREE LIGHTING					
Have local neighborhood groups/businesses approved your event?					
Indicate what steps you have or will take to notify them of your event:	_				
DDP COMMUNITY OUTREACH WITH ROAD CLOSURES FOR TREE LIGHTING					
Section 8- EVENT SET-UP					
Complete the appropriate categories that apply to the event Structure					
Complete the appropriate energelies that apply to the event of the event					
How Many? Size/Height					
Booth					
Tents (enclosed on 3 sides)					
 (1) 10' x 10' Sound tent by Rink (2) 10' x 10' Bar tent, 3 sides, open front, on Michigan (1) 10' x 10' tent, north end of CMP, in street, 3 side wall, open front, (2) 10' x 20' tent, north end of CMP, in park, 3 side wall, open front, (1) 20' X 40' Salvation Army Sponsor Tent on Monroe (1) 20' X 30' Salvation Army Family Fun Tent on Monroe (1) 15' x 15' Food prep tent behind Parc on Woodward 					
Canopy (open on all sides)					
Staging/Scaffolding					
Bleachers					
Section 9- COMPLETE ALL THAT APPLY	1				
Emergency medical services?					
Contact Person: Hart Medical for Detroit's Tree Lighting					
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					
ddress: PO Box 530845 Phone: 734-421-1400					
City/State/Zip: Livonia, MI 48153					
Name of private catering company? N/A					

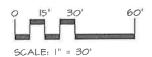
SPECIAL USE REQUESTS

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: WOODWARD FROM: STATE TO: LARNED CLOSURE DATES: 11/15/18 BEG TIME: 11P END TIME: REOPEN DATE: 11/17/18 TIME: 8A STREET NAME: MICHIGAN FROM: GRISWOLD TO: WOODWARD CLOSURE DATES: 11/15/18 BEG TIME: 11P END TIME: ____ REOPEN DATE: 11/17/18 TIME: 8A STREET NAME: MONROE TO: WOODWARD FROM: FARMER CLOSURE DATES: 11/15/18 BEG TIME: 11P END TIME: _____ REOPEN DATE: 11/17/18 TIME: 8A STREET NAME: EAST & WESTBOUND CADILLAC SQUARE TO: WOODWARD FROM: BATES CLOSURE DATES: 11/15/18 BEG TIME: 11P END TIME: _____ REOPEN DATE: 11/17/18 TIME: 8A STREET NAME: FROM: ________TO: _____ CLOSURE DATES: BEG TIME: _____ END TIME: ____ REOPEN DATE: _____TIME: _____

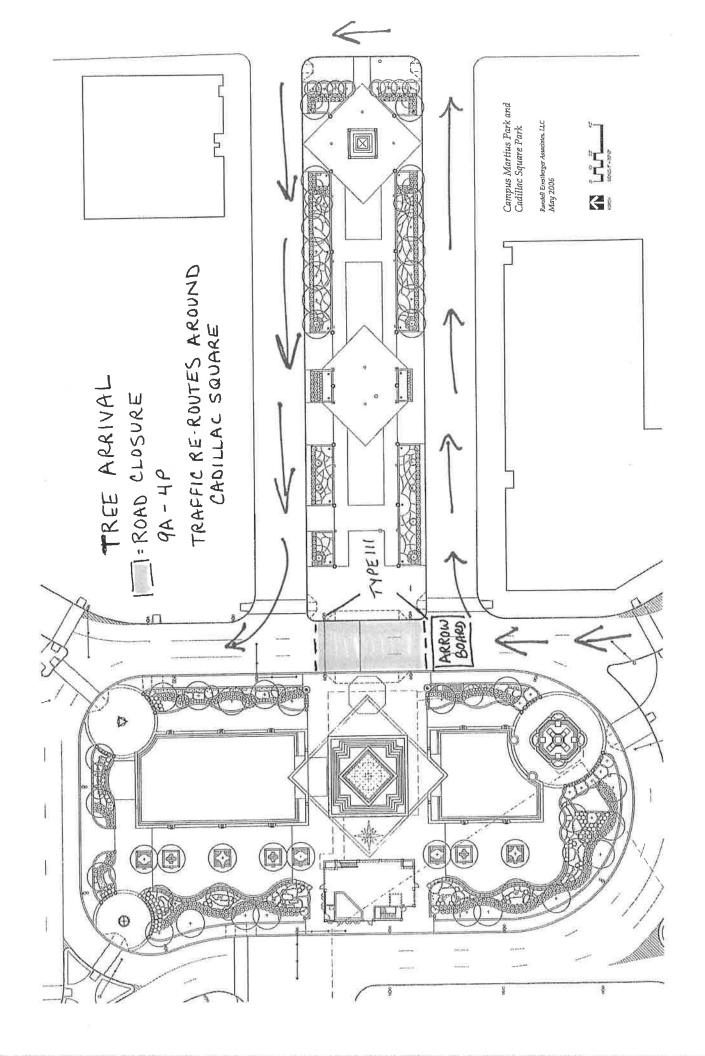


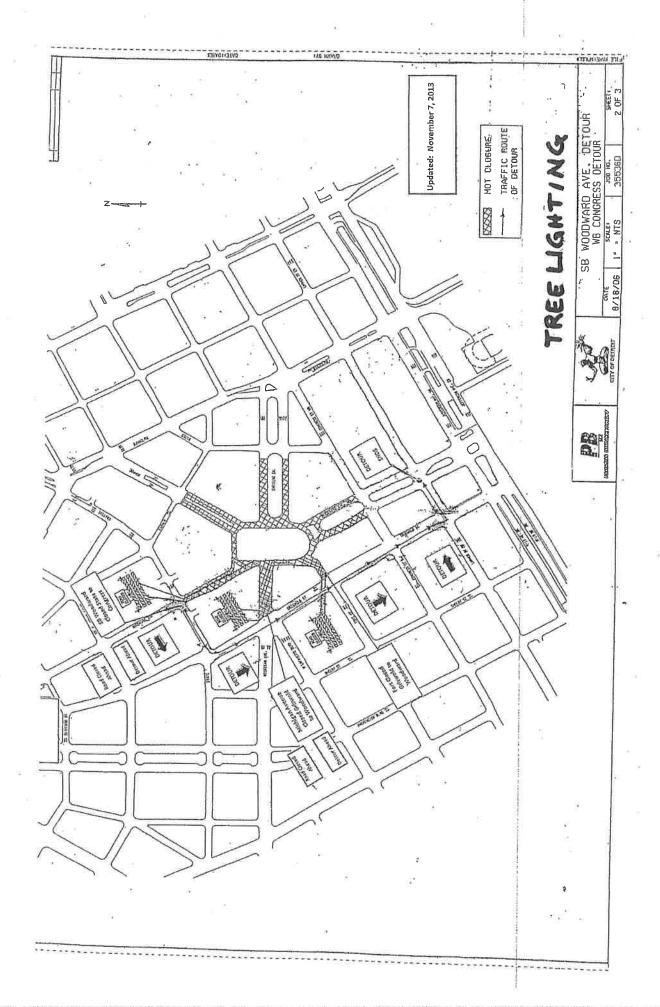


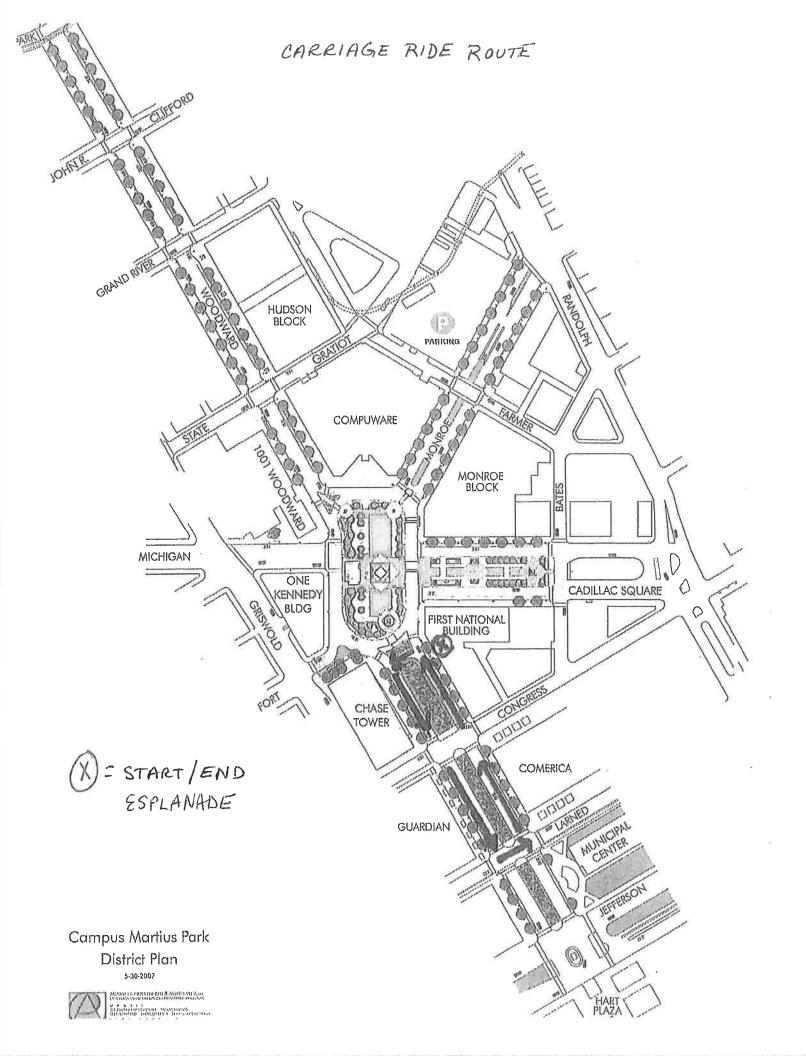


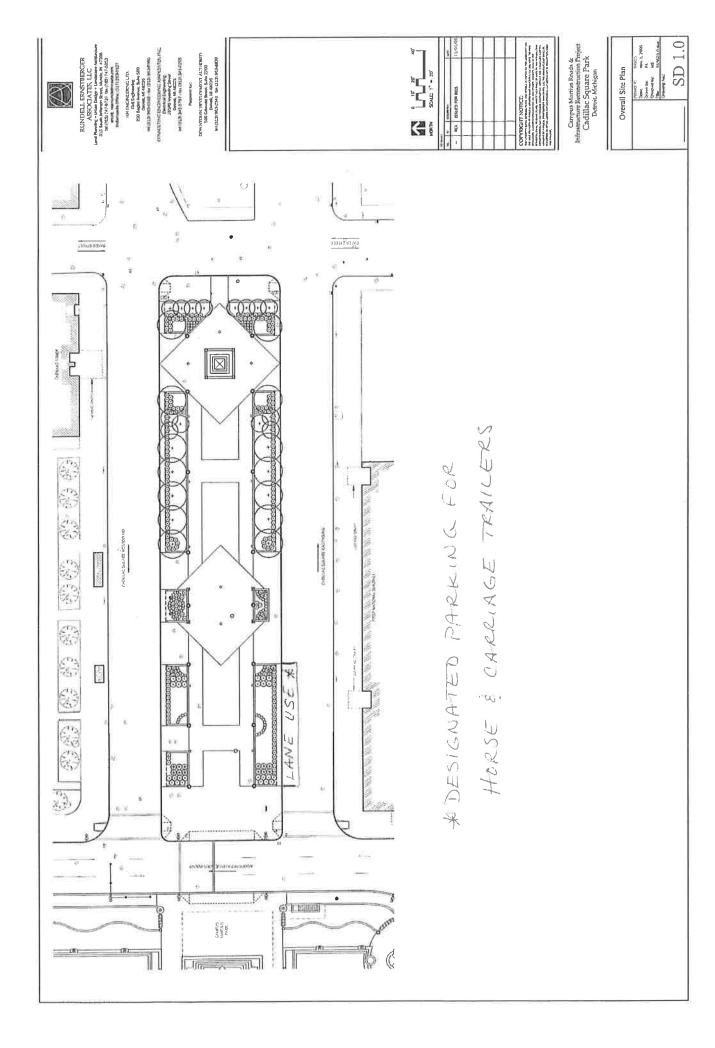
LAYOUT FOR:
ICE RINK & ASSOCIATED ACTIVITIES
CAMPUS MARTIUS PARK
DETROIT, MICHIGAN
9/22/2004











1)	CERTIFICATE OF INSURANCE – ON FILE	
2)	EMERGENCY MEDICAL AGREEMENT	
3)	SANITATION AGREEMENT - BLOCK BY BLOCK, PARTNER OF DDP	
4)	PORT-A-JOHN AGREEMENT	
5)	COMMUNITY COMMUNICATION	

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

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.

4Badr 9/12/1	8
Signature of Applicant Date	
NOTE: Completion of this form does not constitute approval of your even Management Team, you will be notified of any requirements, fees, and/or	t. Pending review by the Special Events restrictions pertaining to your event.
HOLD HARMLESS AND INDEMNIFICATION	
The Applicant agrees to indemnify and hold the City of Detroit (which officials, appointed officials and employees) harmless from and against claims in respect of the foregoing including claims for personal injurreasonable outside attorney's fees) arising from activities associated with this to the gross negligence or intentional act or omission of the City.	injury, loss, damage or liability (or any y and death, damage to property, and
Applicant affirms that Applicant has read and understands the Hold Harn agrees to the terms expressed therein.	nless and Indemnification provision and
(Please Print)	
Event Name: 2018 WINTER MAGIC	Event Date: NOV - MAIZ
Event Organizer: DOWNTOWN BETROIT PARTNE	251-118

Date: 9/12/18

Applicant Signature:

SEASON OF WINTER MAGIC 2018 WILL INCLUDE THE FOLLOWING ACTIVITIES PRODUCED BY DETROIT 300 CONSERVANCY, AN AFFILIATE OF DOWNTOWN DETROIT PARTNERSHIP:

DETROIT'S TREE LIGHTING, NOVEMBER 16, 5P - MIDNIGHT

THE RINK AT CAMPUS MARTIUS

- PREVIEW WEEKEND: NOVEMBER 9 11
- O OPEN EVERY DAY NOVEMBER 16 MARCH 3, EVEN HOLIDAYS.
 - MON THUR. 11AM 10PM
 - FRIDAY 11AM MIDNIGHT
 - SATURDAY 10AM MIDNIGHT
 - SUNDAY NOON 10PM
- ARCTIC ZONE (RINK CONCESSIONS) AREA WILL BE ON THE WEST SIDE OF THE RINK, POTENTIALLY A DOUBLE DECKER TENT STRUCTURE WITH A BAR ON SECOND FLOOR
- o BROOMBALL LEAGUE: MONDAYS & TUESDAYS, 6PM 10PM, BEGINNING JANUARY 7, 2019

CADILLAC SQUARE ACTIVATION

o THE SALVATION ARMY RED KETTLE, NW CORNER OF CADILLAC SQUARE.

KIDZ ZONE

DATE & TIME TBD: OUTDOOR INTERACTIVE FUN (SPONSOR DEPENDANT)

HORSE &CARRIAGE RIDES

- o (6) WEEKENDS NOVEMBER 16 DECEMBER 22
 - FRIDAYS & SATURDAY: 6PM MIDNIGHT
 - ADDITIONAL DATES BETWEEN THE HOLIDAYS, DEC 26, 27, 28, 29, 30 (SPONSOR DEPENDANT)

STREET PERFORMANCES

- WEEKENDS NOVEMBER 16 JANUARY 1 OF POP-UP PERFORMANCES ON VARIOUS STREET CORNERS AND PLAZA AREAS IN THE CAMPUS MARTIUS DISTRICT TO PROVIDE ENTERTAINMENT AND EXCITEMENT FOR THE DOWNTOWN VISITORS
 - FRIDAYS, SATURDAY & SUNDAYS: TIMES VARY (SPONSOR DEPENDANT)

THE SALVATION ARMY RED KETTLE

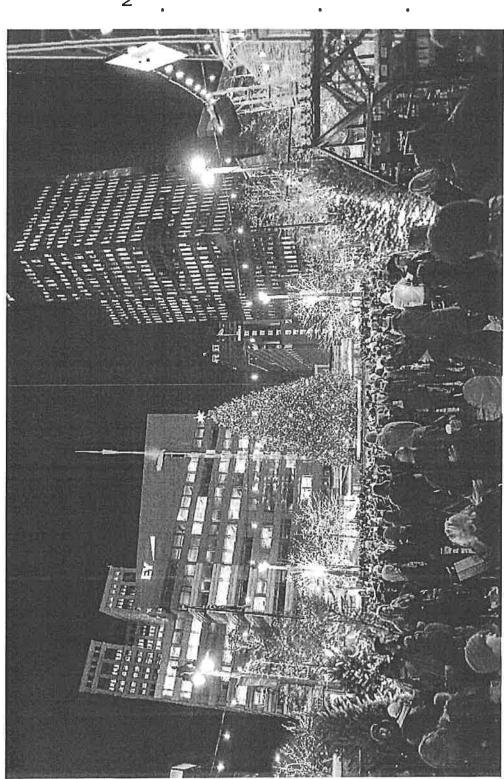
- PLACEMENT ON CADILLAC SQUARE, NOVEMBER 5
- o NOVEMBER 16 JANUARY 31

ADDITIONAL HOLIDAY LIGHTING & DECOR

- CAMPUS MARTIUS PARK WILL BE SHINING WITH 142,000 LED TWINKLE LIGHTS THAT ARE INSTALLED ON 80
 TREES
- ADDITIONAL HOLIDAY DECOR IN CAPITOL PARK, GRAND CIRCUS PARK, ESPLANADE AS BUDGET PERMITS

LOAD IN/OUT DETAIL

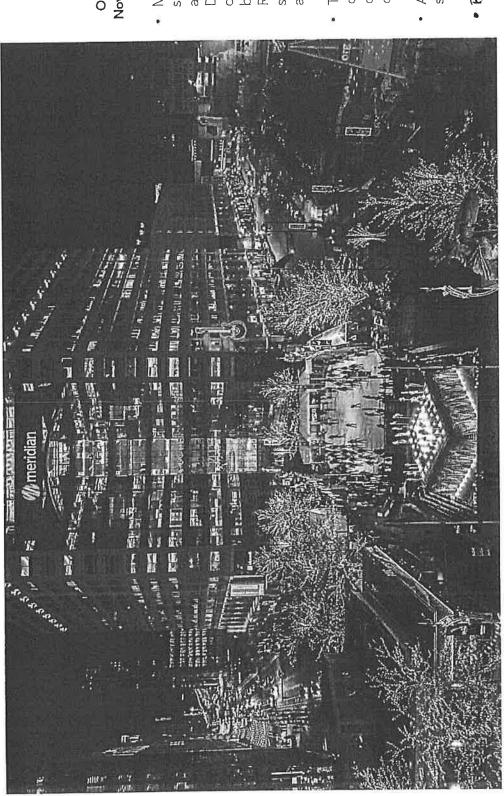
- 11/1: LOAD IN TREE PLATFORM, PEDESTRIAN SIDEWALK CLOSED, LANE CLOSED NEXT TO CMP, 9AM 4PM
- 11/5: ROAD CLOSES 9AM, LOAD-IN TREE (SEE TREE ARRIVAL MAP)
 - WORKING WITH TRAFFIC MANAGEMENT INC. TO COORDINATE CLOSURE WITH QLINE
 - O CRANE IS PLACED IN ROAD BETWEEN CAMPUS MARTIUS AND CADILLAC SQUARE. TRAFFIC ROUTES AROUND CADILLAC SQUARE
 - LOAD OUT CRANE, ROAD OPENS 4PM
- 11/7: RED KETTLE INSTALL,
 - o 5A LOAD IN CRANE CURBSIDE WESTBOUND CADILLAC SQUARE, LOAD OUT FOR CRANE 7AM
- 11/15:
 - O NORTHBOUND AND SOUTHBOUND WOODWARD CLOSES, 11PM
 - LOAD-IN TENTS FOR TREE LIGHTING EVENT
 - TENTS FOR TREE LIGHTING
 - (1) 10' x 10' Sound tent by Rink
 - (2) 10' x 10' Bar tent, 3 sides, open front, on Michigan
 - (1) 10' x 10' tent, north end of CMP, in street, 3 side wall, open front,
 - (2) 10' x 20' tent, north end of CMP, in park, 3 side wall, open front,
 - (1) 20' X 40' Salvation Army Sponsor Tent on Monroe
 - (1) 20' X 30' Salvation Army Family Fun Tent on Monroe
 - (1) 15' x 15' Food prep tent behind Parc on Woodward
- 11/16: LOAD OUT TENTS, WOODWARD, OPEN BY 8A, 11/17
- FRIDAYS AND SATURDAYS NOVEMBER 16 DECEMBER 22, + 12/26-30 HORSE &CARRIAGE TRAILER
 - o LOAD IN, CURBSIDE AT CADILLAC SQUARE AT 4PM TO PREPARE FOR 6PM START ON ESPLANADE.
 - LOAD OUT, MIDNIGHT
- 1/22 1/24: LOAD OUT TREE, NO ROAD CLOSURE NEEDED
- 1/25: LOAD OUT TREE PLATFORM, PEDESTRIAN SIDEWALK CLOSED, LANE CLOSED NEXT TO CMP, 9AM 4PM
- 1/31: LOAD OUT RED KETTLE, 5AM 7AM (or sooner depending on Winter Blast Load-in)



Christmas Tree

November 5, 2018 - January 22, 2019

- The Michigan-grown tree stands as the focal point of the holiday season in the heart of Downtown Detroit. Once placed in Campus Martius Park the tree is decorated with 19,000 multi-colored lights and ornaments.
- Target Demographic
 - Families
- Metro Detroit Residents
 - Tourists and Visitors
- Attracting crowds of 1M annually

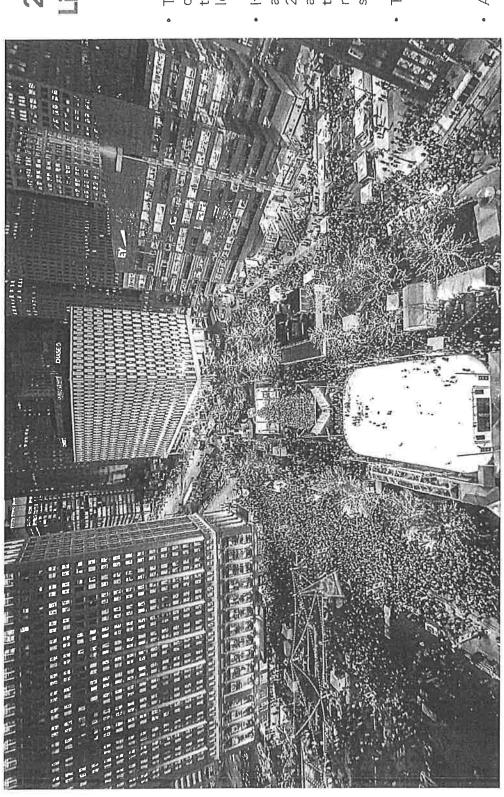


The Rink

Campus Martius Park

Open everyday, including holidays November 16, 2018 - March 3, 2019

- Michigan premier outdoor skating experience, The Rink acts as the centerpiece of Detroit's Gathering Place during winter season. Framed by Detroit's iconic skyline, The Rink plays host to first time skaters, Olympic champions and everyone in between
- Target Demographic
 - o Families
- o Detroit Residents
- o Tourists and Visitors
- Attracting crowds of 70,000+ seasonally
- Broomball League 1/7/19 - 2/26/19



2018 Detroit Tree Lighting Ceremony

Friday, November 16, 2018

- This cherished annual event is one of the region's top family traditions and includes dynamic local and national entertainment.
- It is the largest single-day event at Campus Martius Park and in 2017, it set an all-time record by attracting over 50,000 attendees throughout the Downtown and representative of the diversity in southeast Michigan.
- Target Demographic
 - Families
- Metro Detroit Residents
 - Tourists and Visitors
- Attracting crowds of 50,000+

2018-09-19

November 5, 2018 and ending January Petition of Downtown Detroit 21, 2019 with set up beginning 11-1-Winter Magic Events" at various 18 and tear down complete 1-25-19. locvations on various dates beginning Partnership, request to hold "2018

REFERRED TO THE FOLLOWING DEPARTMENT(S)

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

(19) y

MAYOR'S OFFICE COORDINATORS REPORT

OVERAL	L STATUS (ple	ease ci	rcle): 🗸 API	PROVED	DENIED N/A CANCEL D
Petition #:	537	_ Eve	nt Name; Slow	Your R	Role on Violence
Event Date	October 2	0, 20	18	 :	
Street Clos	_{ure:} None				
Organizatio	n Name: Still	Stanc	ding		
Street Addr	_{ess:} <u>Still Sta</u>	nding	1		
			Special Events A Reference Comm		
	or City Department or the Coordinato				
	ents (check all th				1
Walkath	on Ca	arnival/C	Circus	Concert	rt/Performance Run/Marathon
Bike Ra	ce Re	eligious	Ceremony	Political	al Ceremony Festival
Filming	Pa	rade		Sports/F	Recreation Rally/Demonstration
Firework	ks Co	onventic	on/Conference	Other: _	
24-Hou	r Liquor License	€			
157					
Malle to no:		77.	ition Communic		
10:00am -		on viole	ence from New	Center Pa	ark to Spirit Plaza along city sidewalks from
					be fulfilled for an approval status **
Date	Department	N/A	APPROVED	DENIED	Additional Comments
	DPD		\checkmark		DPD will Provide Special Attention
	DED.				No Permits Required
	DFD/ EMS		V		
	DPW		\checkmark		No Permits Required; W
	Health Dept.	✓		1.0	No Jurisdiction

Date	Department	N/A	APPROVED	DENIED	Additional Comments
	TED		✓		No Barricades Required
	Recreation		V		Application Received & Approved as Presented
	Bldg & Safety	√			No Jurisdiction
	Bus. License	√			No Jurisdiction
	Mayor's Office		✓		All Necessary permits must be obtained prior to event. If permits are not obtained, departments can enforce closure of event.
	Municipal Parking	√			No Jurisdiction
	DDOT		V		No Impact on Buses

MAYOR'S OFFICE

Signature: <u>Bethanie Lucher</u>
Date: <u>September 21e, 2018</u>

City of Detroit OFFICE OF THE CITY CLERK

Janice M. Winfrey City Clerk

Caven West Communication Communication Clark/Chief of Staff

DEPARTMENTAL REFERENCE COMMUNICATION

Tuesday, September 25, 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 POLICE DEPARTMENT
BUSINESS LICENSE CENTER
DPW - CITY ENGINEERING DIVISION FIRE DEPARTMENT
BUILDINGS SAFETY ENGINEERING

537 Still Standing, request to hold "Slow Your Role on Violence" at New Center Park area on 10/20/18 at 10:00 AM to 1:00 PM.

City of Detroit Special Events Application Statement Details Stor Meetic All

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 EVEN	NT INFORMATION
Event Name: Still Standing presents:	Slow Your Role on Violence	
Event Location: New Center Park ar	ea	
Is this going to be an annual event?	x□ Yes □ No	
Sect	ion 2- ORGANIZATION/APP	LICANT INFORMATION
Organization Name: Still Standing		
Organization Mailing Address: 7310	Woodward Ave Suite 445 Detroit MI 4820	2
Business Phone: 313 744 5697	Busine	ss Website: stillstandingredeemed.org
Applicant Name: Shari Ware		
Business Phone: 313 744 5697	Cell Phone: 313 510	0733 Email: sware.stillstanding@gmail.com
Event On-Site Contact Person:		
Name: Shari Ware		
Business Phone:	Cell Phone: 313 510 0733	Email:sware.stillstanding@gmail.com
Event Elements (check all that app	ly)	
[] Walkathon	[] Carnival/Circus	[] Concert/Performance
[] Run/Marathon	[] Bike Race	[] Religious Ceremony
[] Political Event	[] Festival	[] Filming
[] Parade	[] Sports/Recreation	[] Rally/Demonstration
[] Convention/Conference	[] Fireworks	Other: Awareness Walk
Please provide a brief description We would like to host a	on of your event: walk that's focus is to bring awarenes	s to violence.

What are the projected set-up, e	vent and tear d	own dates and 1	times (must be com	pleted)?		
Begin Set-up Date : NA	Time:	Com	plete Set-up Date:		Time:	
Event Start Date: 10/20/18	Time:	10:00am	Event End Date:	10/20/18		Time: 1:00p
Begin Tearing Down Date: NA		Complete Tear	Down Date:			
Event Times (If more than one day, gi	ve times for each of	day):				
4 5 7 7 , 7 7	Section 3- I	OCATION/	SITE INFORM	ATION		
Location of Event: New Center One a Martius).					Blvd. to Jefferso	on (Campus
Facilities to be used (circle): Stree	et)	Sidewalk	Park		City	
Please attach a copy of Port-a-John, S		ergency Medical A	greements as well as a	site plan which	illustrates the	
anticipated layout of your event include	ling 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	ling the following	:	-Location of First Aid -Location of fire lane -Proposed route for w -Location of tents and -Sketch of street closu -Location of bleachers -Location of press are -Sketch of proposed li	alk/run canopies ire s		
-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 First Aid -Location of fire lane -Proposed route for w -Location of tents and -Sketch of street close -Location of bleachers -Location of press are	alk/run canopies ire s		7 5
-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 Describe the entertainment for this year	Sec		-Location of First Aid -Location of fire lane -Proposed route for w -Location of tents and -Sketch of street closu -Location of bleachers -Location of press are -Sketch of proposed li	alk/run canopies ire s		
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	Sec		-Location of First Aid -Location of fire lane -Proposed route for w -Location of tents and -Sketch of street closu -Location of bleachers -Location of press are -Sketch of proposed li	alk/run canopies ire s		
-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 Describe the entertainment for this ye	Sec ear's event: NA	tion 4- ENTE	-Location of First Aid -Location of fire lane -Proposed route for w -Location of tents and -Sketch of street closu -Location of bleachers -Location of press are -Sketch of proposed li	alk/run canopies ire s		
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 Describe the entertainment for this year	Sec	tion 4- ENTE	-Location of First Aid -Location of fire lane -Proposed route for w -Location of tents and -Sketch of street closu -Location of bleachers -Location of press are -Sketch of proposed li	alk/run canopies ire s		

Contact Person: Address: NA Phone: City/State/Zip: Jumber of Private Security Personnel Hired Per Shift: Live the private security personnel (check all that apply): [] Licensed [] Armed [] Bonded How will you advise attendees of parking options? articipants will be advised where to park when registering for event, details will be posted through marketing			
Name of vendor providing generators: Contact Person: NA Address: Phone: Section 5- SALES INFORMATION Will there be advanced ticket sales? x yes No yes, please describe: Will there be on-site ticket sales? x yes No S25.00 yes, please describe: Will there be vending or sales? Yes No S25.00 yes, please describe: Will there be vending or sales? yes No S25.00 yes, sheek all that apply: Food [] Merchandise [] Non-Alcoholic Beverages [] Alcoholic Beverages andicate type of items to be sold: Section 6- PUBLIC SAFETY & PARKING INFORMATION ame of Private Security Company: ontact Person: ddress: NA Phone: ity/State/Zip: amber of Private Security Personnel Hired Per Shift: to the private security personnel (check all that apply): [] Licensed [] Armed [] Bonded ow will you advise attendees of parking options? riticipants will be advised where to park when registering for event, details will be posted through marketing	How many generators will be used? —————		
Contact Person: NA Address: Phone: Section 5-SALES INFORMATION Will there be advanced ticket sales? x	How will the generators be fueled?		
Section 5=SALES INFORMATION Will there be advanced ticket sales? x Yes No	Name of vendor providing generators:		
Section 5- SALES INFORMATION Will there be advanced ticket sales? x	Contact Person: NA		
Section 5- SALES INFORMATION Will there be advanced ticket sales? x yes No If yes, please describe: Will there be on-site ticket sales? x yes No If yes, ist 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: Section 6- PUBLIC SAFETY & PARKING INFORMATION Name of Private Security Company: Contact Person: Address: NA Phone: City/State/Zip: Lumber of Private Security Personnel Hired Per Shift: The the private Security Personnel (check all that apply): [] Licensed [] Armed [] Bonded How will you advise attendees of parking options? articipants will be advised where to park when registering for event, details will be posted through marketing	Address		Phone*
Section 5-SALES INFORMATION	T Red Cool		1 Hollos
Will there be advanced ticket sales? x Yes No If yes, please describe: Will there be on-site ticket sales? x 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: Section 6- PUBLIC SAFETY & PARKING INFORMATION Name of Private Security Company: Contact Person: Address: NA Phone: City/State/Zip: Lumber of Private Security Personnel Hired Per Shift: The the private Security personnel (check all that apply): [] Licensed [] Armed [] Bonded How will you advise attendees of parking options? articipants will be advised where to park when registering for event, details will be posted through marketing	City/State/Zip		
Will there be advanced ticket sales? x Yes No If yes, please describe: Will there be on-site ticket sales? x 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: Section 6- PUBLIC SAFETY & PARKING INFORMATION Name of Private Security Company: Contact Person: Address: NA Phone: City/State/Zip: Lumber of Private Security Personnel Hired Per Shift: The the private Security personnel (check all that apply): [] Licensed [] Armed [] Bonded How will you advise attendees of parking options? articipants will be advised where to park when registering for event, details will be posted through marketing			
If yes, please describe: Will there be on-site ticket sales? X		Section 5- SALES INFO	ORMATION
If yes, list price(s): Will there be vending or sales?		□ No	
If yes, check all that apply: [] Food [] Merchandise [] Non-Alcoholic Beverages [] Alcoholic Beverages Indicate type of items to be sold: Section 6- PUBLIC SAFETY & PARKING INFORMATION		□ No \$25.00	
Section 6- PUBLIC SAFETY & PARKING INFORMATION Name of Private Security Company: Contact Person: Address: NA Phone: City/State/Zip: umber of Private Security Personnel Hired Per Shift: re the private security personnel (check all that apply): [] Licensed [] Armed [] Bonded How will you advise attendees of parking options? articipants will be advised where to park when registering for event, details will be posted through marketing	9	□	
Section 6- PUBLIC SAFETY & PARKING INFORMATION Name of Private Security Company: Contact Person: Address: NA Phone: City/State/Zip: Tumber of Private Security Personnel Hired Per Shift: The the private security personnel (check all that apply): [] Licensed [] Armed [] Bonded How will you advise attendees of parking options? articipants will be advised where to park when registering for event, details will be posted through marketing	[] Food [] Merchandise [] Non-Alcoholic Beverages	[] Alcoholic Beverages
Name of Private Security Company: Contact Person: Address: NA Phone: City/State/Zip: fumber of Private Security Personnel Hired Per Shift: re the private security personnel (check all that apply): [] Licensed [] Armed [] Bonded How will you advise attendees of parking options? articipants will be advised where to park when registering for event, details will be posted through marketing	Indicate type of items to be sold:		
Name of Private Security Company: Contact Person: Address: NA Phone: City/State/Zip: Jumber 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? articipants will be advised where to park when registering for event, details will be posted through marketing			
Name of Private Security Company: Contact Person: Address: NA Phone: City/State/Zip: Jumber 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? articipants will be advised where to park when registering for event, details will be posted through marketing			
Contact Person: Address: NA Phone: City/State/Zip: fumber of Private Security Personnel Hired Per Shift: tree the private security personnel (check all that apply): [] Licensed [] Armed [] Bonded How will you advise attendees of parking options? articipants will be advised where to park when registering for event, details will be posted through marketing	Section 6- PUB	LIC SAFETY & PAR	KING INFORMATION
Address: NA Phone: City/State/Zip: Sumber of Private Security Personnel Hired Per Shift: The private security personnel (check all that apply): [] Licensed [] Armed [] Bonded How will you advise attendees of parking options? articipants will be advised where to park when registering for event, details will be posted through marketing	Name of Private Security Company:		
City/State/Zip: Sumber of Private Security Personnel Hired Per Shift: re the private security personnel (check all that apply): [] Licensed [] Armed [] Bonded How will you advise attendees of parking options? articipants will be advised where to park when registering for event, details will be posted through marketing	Contact Person:		
re the private security personnel (check all that apply): [] Licensed [] Armed [] Bonded How will you advise attendees of parking options? articipants will be advised where to park when registering for event, details will be posted through marketing	Address: NA		Phone:
The the private security personnel (check all that apply): [] Licensed [] Armed [] Bonded How will you advise attendees of parking options? articipants will be advised where to park when registering for event, details will be posted through marketing	City/State/Zip:		
[] Licensed [] Armed [] Bonded How will you advise attendees of parking options? articipants will be advised where to park when registering for event, details will be posted through marketing	Sumber of Private Security Personnel Hired Per Sh	ift:	
How will you advise attendees of parking options? articipants will be advised where to park when registering for event, details will be posted through marketing	re the private security personnel (check all that ap	ply):	
articipants will be advised where to park when registering for event, details will be posted through marketing	[] Licensed	[] Armed	[] Bonded
Participants will be advised where to park when registering for event, details will be posted through marketing	How will you advise attendees of parking options?		
			nt, details will be posted through marketing

Section 7- COMMUNICATION & COMMUNITY IMPACT INFORMATION How will your event impact the surrounding community (i.e. pedestrian traffic, sound carryover, safety)? Pedestrian traffic ☐ Yes ☐ No Have local neighborhood groups/businesses approved your event? Not yet! Indicate what steps you have or will take to notify them of your event: We will personally reach out to the neighborhoods groups/businesses for their support. 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) NA NA Canopy (open on all sides) Staging/Scaffolding ___NA__ Bleachers NA Section 9- COMPLETE ALL THAT APPLY Emergency medical services? Contact Person: NA Address: City/State/Zip: Name of company providing port-a-johns. Contact Person: NA Address: Phone: City/State/Zip: Name of private catering company? Contact Person: NA Address: Phone:

SPECIAL USE REQUESTS

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

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.

STREET NAME: NA		
FROM:	TO:	
CLOSURE DATES:	BEG TIME:	END TIME:
	TIME:	
STREET NAME:		
CLOSURE DATES:	BEG TIME:	END TIME:
REOPEN DATE:	TIME:	
STREET NAME:		<u> </u>
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:	

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.

Shari Ware	10/10/20
Signature of Applicant	Date
NOTE C. 14 CHI C. 1	The second of second second Paradina navious by the Special Events
Management Team, you will be notified or	constitute approval of your event. Pending review by the Special Events of any requirements, fees, and/or restrictions pertaining to your event.
HOLD HARMLESS AND INDEMNIFIC	CATION
elected officials, appointed officials an liability (or any claims in respect of th to property, and reasonable outside attor	d hold the City of Detroit (which includes its agencies, officers, d employees) harmless from and against injury, loss, damage or e foregoing including claims for personal injury and death, damage ney's fees) arising from activities associated with this permit, except to nee or intentional act or omission of the City.
Applicant affirms that Applicant has read agrees to the terms expressed therein.	and understands the Hold Harmless and Indemnification provision and
(Please Print)	
Event Name: Slow your ROLE on Viole	nceEvent Date: 10/20/18
Event Organizer: Shari Ware	
Applicant Signature:	Date:



2018-09-25

537

Petition of Still Standing, request to hold "Slow Your Role on Violence" at New Center Park area on 10/20/18 at 10:00 AM : 1:00 PM.

REFERRED TO THE FOLLOWING DEPARTMENT(S)

MAYOR'S OFFICE POLICE DEPARTMENT
BUSINESS LICENSE CENTER
DPW - CITY ENGINEERING DIVISION FIRE
DEPARTMENT
BUILDINGS SAFETY ENGINEERING

OFFICE OF CONTRACTING AND PROCUREMENT



September 13, 2018

HONORABLE CITY COUNCIL:

The Purchasing Division of the Finance Department recommends a Contract with the following firm(s) or person(s):

6001636

100% City Funding – To Provide Promotional Exams for the Ranks of Sergeant, Detective, and Lieutenant. – Contractor: Industrial Organizational Solutions – Location: 1520 Kensington Rd, Suite 110, Oak Brook, IL 60523 – Contract Period: Upon City Council Approval through August 31, 2019 – Total Contract Amount: \$107,870.00. **POLICE**

Respectfully submitted,

BY COUNCIL MEMBER

Boysie Jackson, Chief Procurement Officer Office of Contracting and Procurement

RESOLVED, that Contract No. 6001636 referred to in the foregoing communication dated September 13, 2018, be hereby and is approved.

BENSON

ENTERED OCT 0 8 2018 Move To New Business - 2M(310)

OFFICE OF CONTRACTING AND PROCUREMENT



September 20, 2018

HONORABLE CITY COUNCIL:

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

6001642

100% City Funding – To Provide The Citizens of the City of Detroit with Rental Ordinances for Residents and Landlords, by Printing and Mailing Services of Brochures for the Remaining 25 Zip Codes left in the Rental Enforcement Program. – Contractor: Wolverine Solutions Group – Location: 1601 Clay Avenue, Detroit, MI 48111 – Contract Period: Upon City Council Approval through October 1, 2019 – Total Contract Amount: \$60,494.82. BUILDINGS, SAFETY ENGINEERING AND ENVIRONMENTAL DEPARTMENT

Respectfully submitted,

Boysie Jackson, Chief Procurement Officer Office of Contracting and Procurement

BY COUNCIL MEMBER BENSON

RESOLVED, that Contract No. 6001642 referred to in the foregoing communication dated September 20, 2018 be hereby and is approved.

ENTERED DET D 2018 PS 1 1000 - JA 30

ENTERED OCT 18 2018 MULLE TO NEW BISINESS - P.M. (3,7)

CITY OF DETROIT
OFFICE OF THE CFO
OFFICE OF CONTRACTING AND
PROCUREMENT

1008 COLEMAN A. YOUNG MUNICIPAL CENTER DETROIT, MICHIGAN 48226 PHONE 313*224-4600 FAX 313*628-1160

38

September 28, 2018

HONORABLE CITY COUNCIL:

CONTRACTS AND PURCHASE ORDERS SCHEDULED TO BE CONSIDERED AT THE FORMAL SESSION OF OCTOBER 2, 2018

POLICE

6001654

100% City Funding – To Provide The Detroit Police Department with Fiduciary Administrative Services. – Contractor: Black Family Development – Location: 2995 E. Grand Blvd, Detroit, MI 48202 – Contract Period: Upon City Council Approval through October 1, 2021 – Total Contract Amount: \$134,981.70.

ENTERED OCT 0 8 2018 Move To New Business-JA(3,0)

OFFICE OF CONTRACTING AND PROCUREMENT



September 27, 2018

HONORABLE CITY COUNCIL:

The Purchasing Division of the Finance Department recommends a Contract with the following firm(s) or person(s):

6001648

75% State Funding, 25% Solid Waste Funding – To Provide Recycling Outreach Services such as, but not Limited to Community Events/Recycling Workshops. – Contractor: Green Living Science – Location: 1331 Holden St., Detroit, MI 48202 – Contract Period: Upon City Council Approval through September 24, 2020 – Total Contract Amount: \$100,000.00. **DEPARTMENT OF PUBLIC WORKS**

Respectfully submitted,

Boysie Jackson, Chief Procurement Officer Office of Contracting and Procurement

BY COUNCIL	MEMBER	BENSON
DI COCHUL	2 17 HEALTH BEALT :	DETIDOTI

RESOLVED, that Contract No. 6001648 referred to in the foregoing communication dated September 27, 2018, be hereby and is approved.

ENTERED OCT 0 8 2018 Move To New Busines JA (30)

CITY OF DETROIT
OFFICE OF THE CFO
OFFICE OF CONTRACTING
AND PROCUREMENT



1008 COLEMAN A. YOUNG MUNICIPAL CENTER DETROIT, MICHIGAN 48226 PHONE 313 • 224 • 4600 FAX 313 • 628 • 1160 10

September 28, 2018

TO: HONORABLE CITY COUNCIL

Re: Contracts and Purchase Orders Scheduled to be considered at the Formal Session for October 2, 2018.

Please be advised that the Contract listed was submitted on September 20, 2018 for the City Council Agenda for September 25, 2018 has been amended as follows:

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

Submitted as:

Page 5

RECREATION

2854624 Revenue – AMEND 7 – Lease Agreement for Certain Parcels of Land along the

Detroit Riverwalk (MacArthur Bridge). - Contractor: Detroit Riverfront

Conservancy Inc. – Location: 600 Renaissance Center, Suite 1720, Detroit, MI 48243 – Contract Period: Upon City Council Approval through May 30, 2020 –

Total Contract Amount: \$0.00.

Should read as:

Page 2

RECREATION

2854624 Revenue – AMEND 7 – Lease Agreement for Certain Parcels of Land along the

Detroit Riverwalk (MacArthur Bridge). - Contractor: Detroit Riverfront

Conservancy Inc. – Location: 600 Renaissance Center, Suite 1720, Detroit, MI 48243 – Contract Period: Upon City Council Approval through **May 30, 2035** –

Total Contract Amount: \$0.00.

ENTERED OCT 04 2018 M.T.F. under NB (RCL) 2-0 (MS; RCL)

Respectfully Submitted,

Boysie Jackson

Deputy Chief Procurement Officer

BJ/CD

BY	COUNCIL MEMBER: _			

RESOLVED, that **contract #2854624** referred to in the foregoing communication dated September 28, 2018 be hereby and is approved.

NCS





September 20, 2018

HONORABLE CITY COUNCIL:

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

2854624

Revenue – AMEND 7 – Lease Agreement for Certain Parcels of Land along the Detroit Riverwalk (MacArthur Bridge). – Contractor: Detroit Riverfront Conservancy Inc. – Location: 600 Renaissance Center, Suite 1720, Detroit, MI 48243 – Contract Period: Upon City Council Approval through May 30, 2020 – Total Contract Amount: \$0.00. **RECREATION**

Respectfully submitted,

Boysie Jackson, Chief Procurement Officer Office of Contracting and Procurement

BY COUNCIL MEMBER SHEFFIELD

RESOLVED, that Contract No. 2854624 referred to in the foregoing communication dated September 20, 2018 be hereby and is approved.

ENTERED SEP 2 7 2018 BB I WK. (AS) 2-0 (MS; AS)



COLEMAN A. YOUNG MUNICIPAL CENTER 2 WOODWARD AVENUE, SUITE 1026 DETROIT, MICHIGAN 48226

PHONE: 313 • 628-2158 FAX: 313 • 224 • 0542 WWW.DETROITMI,GOV



September 7, 2018

The Honorable Detroit City Council

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

RE: Request to accept an increase in appropriation for the FY 2017 Historic Preservation Fund Certified Local Government Grant

The Michigan State Housing Development Authority – State Historic Preservation Office has awarded an increase in appropriation to the City of Detroit Historic Designation Advisory Board for the FY 2017 Historic Preservation Fund Certified Local Government Grant, in the amount of \$10,000.00. There is no longer a required cash match. This funding will increase appropriation 20415, previously approved in the amount \$25,100.00, by council on July 18, 2017, to a total of \$35,100.00.

The objective of the grant is to prepare a National Register of Historic Places Nomination for Hart Plaza in Detroit. This grant will enable the department to get an inventory of the resources in and around the Plaza, including buildings, structures, objects, open spaces and other features. This is a reimbursement grant.

I respectfully ask your approval to accept the increase in appropriations funding in accordance with the attached resolution.

Sincerely,

Ryan Friedrichs

Director, Office of Development and Grants

CC:

Katerli Bounds, Deputy Director, Grants Saijiah Park, Assistant Director, Grants

ENTERED OCT 0 4 2018 M. T.F. under NB

F. Linder NB D 2-0 (MS; RCL) OITY CLERK 2018 SEP 24 AMILIST



RESOLUTION

Council	Member_				
---------	---------	--	--	--	--

WHEREAS, the Historic Designation Advisory Board is requesting authorization to accept an increase in appropriation for the FY 2017 Historic Preservation Fund Certified Local Government Grant, from the Michigan State Housing Development Authority – State Historic Preservation Office, in the amount of \$10,000.00. The objective of this grant is to prepare a National Register of Historic Places Nomination for Hart Plaza in Detroit. This funding will increase appropriation 20415, previously approved in the amount of \$25,100.00, by council on July 18, 2017, to a total of \$35,100.00; and

WHEREAS, there is no longer a match requirement for this grant, now

THEREFORE, BE IT RESOLVED that the Director or Head of the Department is authorized to execute the modified grant agreement on behalf of the City of Detroit, and

BE IT FURTHER RESOLVED, that the Budget Director is authorized to increase the budget accordingly for appropriation number 20415, in the amount of \$10,000.00, for the FY 2017 Historic Preservation Fund Certified Local Government Grant.

STATE OF MICHIGAN

MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY

FIRST AMENDMENT

TO THE CERTIFIED LOCAL GOVERNMENT GRANT AGREEMENT

TO PREPARE NATIONAL REGISTER OF HISTORIC PLACES NOMINATION MATERIALS FOR PHILIP A. HART PLAZA

TO BE PERFORMED BY

THE CITY OF DETROIT

THIS FIRST AMENDMENT TO THE GRANT AGREEMENT (THE "FIRST AMENDMENT"), MADE BY THE MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY acting through its STATE HISTORIC PRESERVATION OFFICE, by and through the Michigan State Historic Preservation Officer, Brian D. Conway ("Grantor" or "Authority"), and the CITY OF DETROIT ("Grantee"), (collectively referred to as the "Parties"), entered into and executed a Certified Local Government grant agreement ("Agreement"), Project Number CG17-437, on July 17, 2017, for the purpose of hiring a 36 CFR 61 qualified consultant to prepare a National Register nomination for the Plaza in Detroit; and

WHEREAS, the Grantee entered into a fixed price contract (Contract No. 6001254) with Quinn Evans Architects on March 28, 2018 in the amount of Twenty Five Thousand One Hundred Dollars (\$25,100); and

WHEREAS, the Grantor originally granted fiscal year 2017 Certified Local Government grant funds to the Grantee in the amount of Twenty Five Thousand One Hundred Dollars (\$25,100), the Grantor agrees to add 2017 Certified Local Government grant funds in the amount of Ten Thousand Dollars (\$10,000), for a total Certified Local Government grant amount of Thirty Five Thousand One Hundred Dollars (\$35,100); and

WHEREAS, the Grantee originally provided Sixteen Thousand One Hundred Ninety Five Dollars (\$16,195) to match at least Forty Percent (40%) of the Grantor's financial commitment, the Grantee will not be required to provide a 40% match financial commitment for Project Number CG17-437; and

WHEREAS, the Parties, are in agreement that the Agreement should be amended to revise the project budget accordingly; and

NOW, THEREFORE, IT IS AGREED by and between the Parties that the following sections attached and incorporated into the Agreement be modified as follows:

SECTION IV PROJECT WORK FUNDING

A. Sources of Project Funding. The project work described in this Agreement shall be financed in part by federal funds to be disbursed by the Grantee and in part from other sources available to the

Subgrantee. The Grantee, subject to the further terms of this Agreement, shall commit to the project work total funds in an amount not to exceed Thirty Five Thousand One Hundred Dollars (\$35,100).

The Subgrantee, prior to the commencement of any project work activities, shall provide to the Grantee documentation of the source, availability, and binding obligation of the requisite matching funds from other sources for the specific purpose contemplated in this Agreement Inability or failure of the Subgrantee to secure and provide the required match of funds, or proper documentation of the match, shall render this Agreement void.

- B. Payment of Grant Funds. The Grantee, subject to the terms of this Agreement, shall pay to the Subgrantee for proper and altowable expenditures made by the Subgrantee in connection with this Agreement, a total reimbursement not to exceed the amount of Thirty Five Thousand One Hundred Dollars (\$35,100). The obligation of the Grantee to pay such reimbursement is conditioned upon satisfactory performance by the Subgrantee of project activities and commitments in accordance with this Agreement, upon submission by the Subgrantee of a comparison of the final budget attached and incorporated into this Agreement as Exhibit C Project Budget, and a proper claim for reimbursement which shall be supported by documentation of the expenditures claimed. No reimbursement shall be made for unallowable or improper expenditures. In making the claim for reimbursement, the Subgrantee shall use the form entitled "Request for Reimbursement" found in the Appendix to the Grantee's Historic Preservation Grant Manual.
- C. Allowable Expenditures. * * * *

Furthermore, the Subgrantee shall not be entitled to reimbursement for any costs the Grantor deems unallowable. In no event, however, shall the Grantee's obligation to provide reimbursement for allowable expenditures exceed Thirty Five Thousand One Hundred Dollars (\$35,100).

. . . .

THE PARTIES FURTHER AGREE that Exhibit B - Project Budget attached and incorporated into the Agreement be modified as follows:

STATE OF MICHIGAN MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY A G R E E M E N T

CG17-437

TO PREPARE NATIONAL REGISTER OF HISTORIC PLACES NOMINATION MATERIALS FOR PHILIP A. HART PLAZA

Page 2 of 3

TO BE PERFORMED BY

THE CITY OF DETROIT

EXHIBIT B - BUDGET

June 26, 2017

WORK ITEMS	CLG FUNDS	MATCH	PROJECT TOTAL
Consultant Expenses			Γ
Prepare a National Register of Historic Places Nomination for the Philip A. Hart Plaza	\$35,100	\$0	\$35,100
TOTALS	\$35,100	\$0	\$35,100

FINALLY, IT IS LASTLY AGREED by and between the Parties that the Agreement executed on July .17, 2017, and excepting the portion amended hereby, together with this amendatory instrument and the revised and amended provisions herein, constitute the entire agreement of the Parties and that, except as expressly modified in this First Amendment, the terms and conditions expressed within the original July 17, 2017, Agreement will remain in full force and effect.

IN WITNESS WHEREOF, the Parties have caused this First Amendment to be executed on this April 1, 2018.

GRANTOR

STATE OF MICHIGAN
MICHIGAN STATE HOUSING DEVELOPMENT

AUTHORITY

BY

STATE HISTORIC PRESERVATION OFFICER

GRANTEE

CITY OF DETROIT

BY

DIRECTOR OF LEGISLATIVE POLICY,

CITY PLANNING COMMISSION



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

September 17, 2018

Honorable City Council:

Re: Authorization to accept a donation of park equipment, a Garden Kiosk, to be installed at Romanowski Park.

Detroit General Services Department requests authorization from your Honorable Body to accept a donation of park equipment from Sacred Roots Community Heritage Garden. The park equipment consists of a Garden Kiosk, to be installed at Romanowski Park.

Sacred Roots Community Heritage Garden will borne the costs of purchasing and installing the Garden Kiosk. The equipment is valued at \$300.00. The garden kiosk will provide a space to post information about the garden and upcoming community events.

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

Sincerely,

a Juan Counts, Deputy Director

ENTERED OCT 0 4 2018 M. T. F. under NB (RCL) 2-0 (MS; RCL)



Resolution

Council Member	

Whereas, the General Services Department- Parks and Recreation Division is requesting authorization to accept a donation of park equipment, a Garden Kiosk from the Sacred Roots Community Heritage Garden to be installed at Romanowski Park. Improvements are valued at \$300.00.

Whereas, the garden kiosk will be used to post information about the garden and upcoming community events. This will be a small sign that will be both aesthetically pleasing and useful for the park and sounding community.

Resolved, the General Services Department - Parks and Recreation Division is authorized to accept a donation of park equipment, a garden kiosk, from Sacred Roots Community Heritage Garden to be installed in Romanowski Park.



Park Improvement Authorization Form

Today's Date: 7/18/18

18100 Meyers Road, Upper Level Detroit, MI 48235

Requesting Organization Name: Sacred Roots	Community Heritage Garden		
Contact Name: Rosebud Schneider	DPRD Property Name: Romanowski		
Phone #: 313~84(6~3718 Fax #:	Property Address:		
Address: 4880 Lawndale	Location of Improvement In Park:		
Detroit, M1 48210			
Email: <u>rschneider@aihfs.org</u>	Information Included with Request Submission:		
	☐ Letter of Request ☐ Site Plan ☐ Sketch		
	Other:		
Improvement / Project Description:			
garden sign Kic	sk - see attached.		
Face and the second sec			
	iprocessor (masses to a second		
Estimated Value of Improvement / Project:	\$300		
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			
U Other			
If using a crowdfunding platform to fundraise for this improvem			
			
If using a crowdfunding platform to fundraise for this improvem	ent, provide the URL for your campaign page below:		
If using a crowdfunding platform to fundraise for this improvent REQUIRED MAINTENANCE ACCUMENTATION ACCUMENTATIO	nent, provide the URL for your campaign page below:		
If using a crowdfunding platform to fundraise for this improvem REQUIRED MAINTENANCE AND AROUND PEDAIR IF BRACETI	nent, provide the URL for your campaign page below:		
If using a crowdfunding platform to fundraise for this improvem REQUIRED MAINTENANCE ACCURT BROWN General Services Dept Design Plan Reviewed General Services Dept Maintenance Required	nent, provide the URL for your campaign page below:		



8/31/18

Janet Anderson, Director Detroit Parks and Recreation Division General Services Department 18100 Meyer Rd Detroit, MI

Dear Ms. Anderson,

On behalf of the Sacred Roots Community Heritage Garden (AIHFS), I am writing to offer our full assistance in purchasing and installing a garden kiosk at the farms space in Romanowski Park. The costs, approximately \$300 are being borne by the group mentioned above. These improvements will take place October, 2018. We have worked with community representatives to ensure these improvements are desired.

The Sacred Roots will oversee construction of the kiosk and any future maintenance needed to maintain the installation. This kiosk will provide a space to post information about the garden and upcoming community events. This will be a small sign that will be both aesthetically pleasing and useful for the park and community.

Thank you for your time and consideration.

Sincerely,

Rosebud Schneider

Sacred Roots Program Asst

American Indian Health and Family Services

313-846-3718

rschneider@aihfs.org