

*Referrals*  
*Formal Session*  
*9-3-19*

**NEIGHBORHOOD  
AND COMMUNITY  
SERVICES STANDING  
COMMITTEE**

**MAYOR'S OFFICE COORDINATORS REPORT**

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

Petition #: 1057 Event Name: Patriot Ruck 2019

Event Date : September 8, 2019

Street Closure: None

Organization Name: Wins for Warriors

Street Address: 1001 Woodward Detroit, MI 48226

Receipt date of the <b>COMPLETED</b> 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)

Justin Verlander's foundation Wins for Warriors will host its annual walk/run at Hart Plaza and the Detroit Riverwalk from 9:00am - 3:00pm.

**\*\* 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 Camouflage Security to Provide Private Security Services
	DFD/EMS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	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"/>	<b>No Permits Required</b>

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"/>	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: B. Auer

Date: 8-28-19

City of Detroit  
OFFICE OF THE CITY CLERK

Janice M. Winfrey  
City Clerk

Andre P. Gilbert II  
Deputy City Clerk

**DEPARTMENTAL REFERENCE COMMUNICATION**

*Thursday, August 29, 2019*

*To: The Department or Commission Listed Below*

*From: Janice M. Winfrey, Detroit City Clerk*

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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.

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

**1057**    *Wins for Warriors, request to hold "Patriot Ruck 2019" at Hart Plaza on September 8, 2019 from 9:00 am to 3:00 pm with setup on 9/7/19 and teardown to be completed on the event date, 9/8/19.*

9/8/19

### 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.

#### Section 1- GENERAL EVENT INFORMATION

Event Name: Patriot Ruck 2019 -

Event Location: Hart Plaza

Is this going to be an annual event?  Yes  No

#### Section 2- ORGANIZATION/APPLICANT INFORMATION

Organization Name: Wins for Warriors

Organization Mailing Address: 1001 Woodward Ave. 5<sup>th</sup> Floor, Detroit, MI 48226

Business Phone: 734-775-3433 Business Website: www.PatriotRuckDetroit.com

Applicant Name: Mary Anne Pacheco

Business Phone: 734-775-3433 Cell Phone: 734-775-3433 Email: maryannepblm@gmail.com

#### Event On-Site Contact Person:

Name: Mary Anne Pacheco

Business Phone: 734-775-3433 Cell Phone: 734-775-3433 Email: maryanncpblm@gmail.com

#### 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: Ruck - walk/run

#### Please provide a brief description of your event:

Justin Verlanders' Wins for Warriors 3<sup>rd</sup> Annual Military Ruck is a 3 mile and 6 mile walk/run carrying a weighted backpack. The event will start and finish in Hart Plaza. Start time is 10am. Following the Ruck will be family fun activities and lunch, ending at 3pm. All proceeds benefit military families, veterans and first responders.

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

Begin Set-up Date : 9/7/19      Time: noon – 2pm      Complete Set-up Date: 9/7/19      Time: 3pm

Event Start Date: 9/8/19      Time: 9am      Event End Date: 9/8/19      Time: 3pm

Begin Tearing Down Date: 9/8/19      Complete Tear Down Date: 9/8/19

Event Times (If more than one day, give times for each day):  
9/8/19 – 9am – 3pm

**Section 3- LOCATION/SITE INFORMATION**

Location of Event:

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: DJ

\_\_\_\_\_

\_\_\_\_\_

Will a sound system be used?     Yes     No

If yes, what type of sound system? Speakers for announcements and music

Describe specific power needs for entertainment and/or music:  
None.

\_\_\_\_\_

\_\_\_\_\_

How many generators will be used? 0 \_\_\_\_\_

How will the generators be fueled? N/A \_\_\_\_\_

Name of vendor providing generators:

Contact Person: Hotz Catering and Rental

Address: 20752 Ryan Road

Phone: 800-990-1599

City/State/Zip : Warren, MI 48091

### 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: Food Trucks

### Section 6- PUBLIC SAFETY & PARKING INFORMATION

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

Contact Person: Joel Grissom, Camouflage Security

Address:

Phone: 313-717-2381

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? Parking information will be on the event website.

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**Section 7- COMMUNICATION & COMMUNITY IMPACT INFORMATION**

How will your event impact the surrounding community (i.e. pedestrian traffic, sound carryover, safety)? No adverse effect

\_\_\_\_\_

\_\_\_\_\_

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

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

\_\_\_\_\_

**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)	<u>4</u>	10x10 pop ups _____
Canopy (open on all sides)	<u>0</u>	_____
Staging/Scaffolding	<u>1</u>	<u>8'x8' riser 12" high</u>
Bleachers	<u>0</u>	_____

**Section 9- COMPLETE ALL THAT APPLY**

**Emergency medical services?**

Contact Person: Adam Gottlieb Hart Medical 248-789-3648 \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

**Name of company providing port-a-johns. Parkway Services, Inc** \_\_\_\_\_

Contact Person: Michelle \_\_\_\_\_

Address: 2876 Tyler Road \_\_\_\_\_ Phone: 734-482-7633 \_\_\_\_\_

City/State/Zip: Ypsilanti, MI 48198 \_\_\_\_\_

**Name of private catering company? Food Trucks** \_\_\_\_\_

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:** none

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

CLOSURE DATES: \_\_\_\_\_ BEG TIME: \_\_\_\_\_ END TIME: \_\_\_\_\_

REOPEN DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

**STREET NAME:** none

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

CLOSURE DATES: \_\_\_\_\_ BEG TIME: \_\_\_\_\_ END TIME: \_\_\_\_\_

REOPEN DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

**STREET NAME:** none

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

CLOSURE DATES: \_\_\_\_\_ BEG TIME: \_\_\_\_\_ END TIME: \_\_\_\_\_

REOPEN DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

**STREET NAME:** none

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

CLOSURE DATES: \_\_\_\_\_ BEG TIME: \_\_\_\_\_ END TIME: \_\_\_\_\_

REOPEN DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

**STREET NAME:** none

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**

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## 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.

Mary Anne Pacheco  
Signature of Applicant

8/5/19  
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)

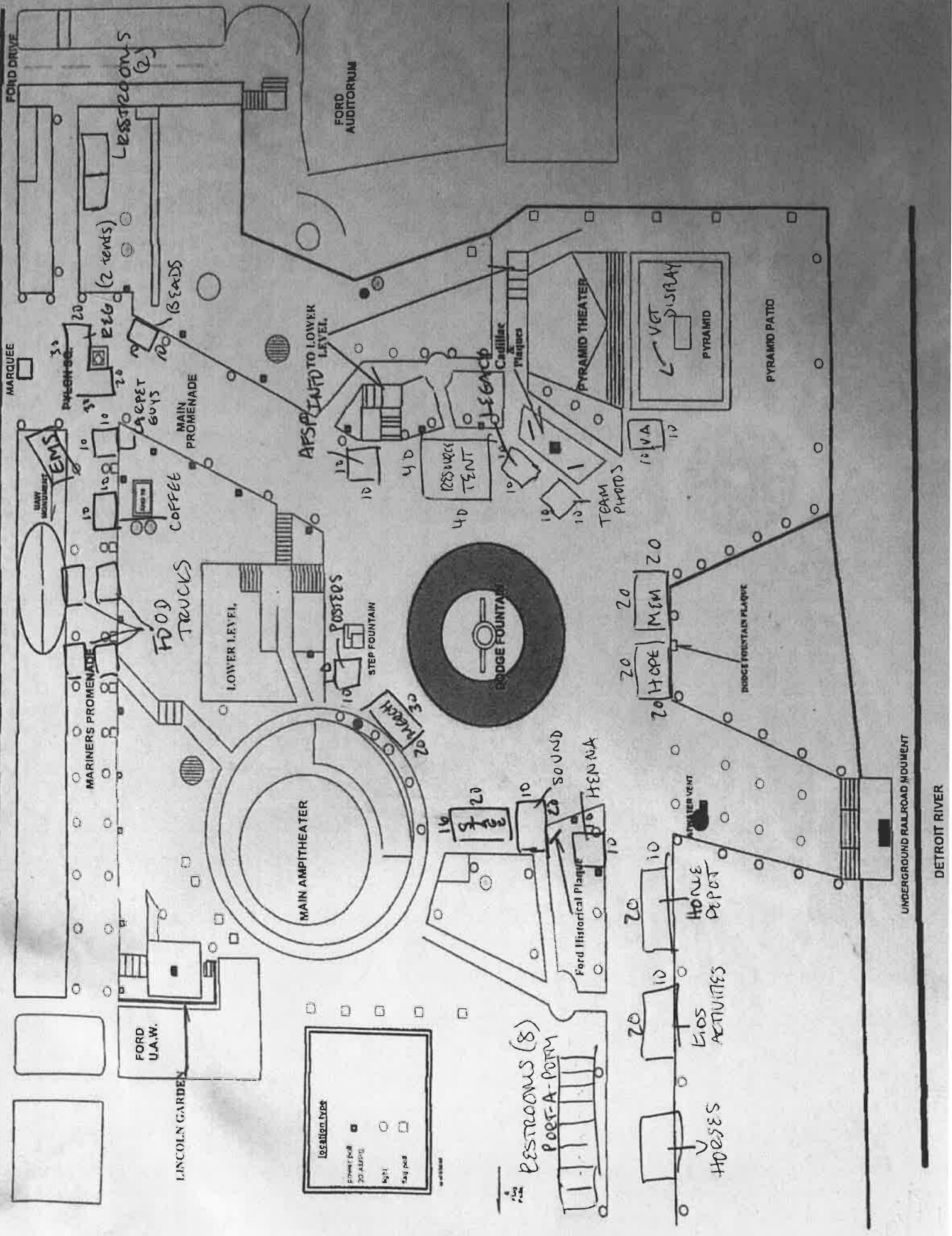
Event Name: 2019 Patriot Ruck Event Date: 9/8/19

Event Organizer: Mary Anne Pacheco

Applicant Signature: Mary Anne Pacheco Date: 8/6/19

JEFFERSON AVE

FORD DRIVE



Location Type

Stage	□
20 AUDIT	○
Light	□
Stage post	○

RESTROOMS (8)  
POET-A-POMY

HORSES  
KIOS ACTIVITIES  
HOME DEPOT

HOPE  
MEM

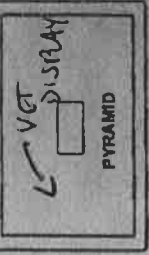


DETROIT RIVER

UNDERGROUND RAILROAD MONUMENT

PYRAMID PATIO

PYRAMID THEATER



RESERVED TENT

CADILLAC Plaques

APRIL TO LOWER LEVEL

FORD AUDITORIUM

RESTROOMS (2)

BEADS

MAIN PROMENADE

COFFEE

FOOD TRUCKS

LOWER LEVEL

POSTERS

STEP FOUNTAIN

MAIN AMPITHEATER

MARRIERS PROMENADE

FORD U.A.W.

LINCOLN GARDEN

MARQUEE

PAPER BOY

EMERGENCY SERVICES

EMERGENCY SERVICES

EMERGENCY SERVICES

EMERGENCY SERVICES

EMERGENCY SERVICES

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EMERGENCY SERVICES

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EMERGENCY SERVICES

EMERGENCY SERVICES

EMERGENCY SERVICES

EMERGENCY SERVICES

BEADS

CAPET BOYS

EMERGENCY SERVICES

EMERGENCY SERVICES

EMERGENCY SERVICES

EMERGENCY SERVICES

EMERGENCY SERVICES

EMERGENCY SERVICES

EMERGENCY SERVICES

EMERGENCY SERVICES



**CONFIDENTIAL**

**HART EMS MEDICAL SERVICES PLLC**

**1636 W. Fort St.  
Detroit, MI 48216  
313-366-4278 Fax- 313-216-1771**

August 2, 2019

This is to confirm that **HART EMS MEDICAL SERVICES PLLC (HART)** will provide on-site medical service for: **2019 Wins for Warriors in Detroit, Michigan** on the following date and time(s):

September 8, 2019 10:00 am – 2:00 pm

**HART EMS MEDICAL SERVICES PLLC will provide these on-site standby services:**

- One (1) Life Support Ambulance @ \$200.00 /hr 10:00 am – 2pm
- One (1) Golf Cart Ambulance @ \$90.00/hr 10:00am- 12pm

In kind donation= 250.00

Total cost for event = \$730.00

Additional hours will be calculated accordingly.

Wins for Warriors will provide

- **Location for Ambulance parking with appropriate egress route**
- **Location for personnel parking**
- **Any necessary credentials**
- **Parking Passes for all HART EMS MEDICAL SERVICES PLLC staff vehicles**
- **Bathroom Facilities**
- **Contact Person name**
- **Ice & Water for patient use**
- **Secure Location and Structure for First Aid**
- **Communications with onsite staff**

It is understood that all on-site medical facilities and ambulances have a limited capacity and should other emergency resources be called in by mutual agreement of both HART EMS MEDICAL SERVICES PLLC and Wins for Warriors that HART EMS MEDICAL SERVICES PLLC will be held harmless for any overtaxing of its resources and will not be held responsible for other costs incurred. It is further understood that the request for services is as outlined above and designed Wins for Warriors. HART EMS MEDICAL SERVICES PLLC assumes no responsibility for the planning and accuracy of it. Should the request for transport result in overtaxing of resources contracted for, HART EMS MEDICAL SERVICES PLLC., will at its' discretion, call for transport via city or private provider. HART EMS MEDICAL SERVICES PLLC assumes no responsibility for availability or response capabilities of outside ambulance services. It is understood by the parties that HART EMS MEDICAL SERVICES PLLC is held accountable for medical treatments by the governing county agencies and must adhere to all policies and procedures pertaining to medical provision. HART EMS MEDICAL SERVICES PLLC, its staff, and agents shall be held harmless for any incidents arising from this event. Furthermore any treatment provided by other contracted, volunteer agencies or employees will not be the responsibility of HART EMS MEDICAL SERVICES PLLC and will be held harmless for any liability resulting in treatment by other agencies, either contracted or volunteered. Premature termination of the event shall not result in discount or refund of any kind from HART EMS MEDICAL SERVICES PLLC.

**Payment is due within 10 days of invoice**

**AGREED:**

\_\_\_\_\_  
Adam Gottlieb  
HART EMS MEDICAL SERVICES PLLC

\_\_\_\_\_  
Authorized Signature  
Wins for Warriors

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

2019-08-29

**1057**

**1057** *Petition of Wins for Warriors, request to hold "Patriot Ruck 2019" at Hart Plaza on September 8, 2019 from 9:00 am to 3:00 pm with setup on 9/7/19 and teardown to be completed on the event date, 9/8/19.*

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**REFERRED TO THE FOLLOWING DEPARTMENT(S)**

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

99

**MAYOR'S OFFICE COORDINATORS REPORT**

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

Petition #: 1018 Event Name: Murals in the Market

Event Date : September 14, 2019

Street Closure: Division Street

Organization Name: PAXAHAU, Inc.

Street Address: 1551 Rosa Parks Suite A Detroit, MI 48216

Receipt date of the <b>COMPLETED</b> 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 5 Annual Murals in the Market will take place on Division Street between Orleans & St. Aubin and the adjacent parking lot from 1:00pm - 1:00am.

**\*\* 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"/>	7th Precinct Assisted Event; Contracted with Private Security Company
	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"/>	ROW Permit Required for Street Closures
	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"/>	Type III Barricades Required
	Recreation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Jurisdiction
	Bldg & Safety	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Permits Required for Tents, Stages & 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Parking Signs Required
	DDOT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Impact on Buses

**MAYOR'S OFFICE**

Signature: B. Auster

Date: 8-28-19

Janice M. Winfrey  
City Clerk

City of Detroit  
OFFICE OF THE CITY CLERK

Caven West  
Deputy City Clerk/Chief of Staff

## DEPARTMENTAL REFERENCE COMMUNICATION

*Monday, August 5, 2019*

*To: The Department or Commission Listed Below*

*From: Janice M. Winfrey, Detroit City Clerk*

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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.

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

**1018**    *Paxahau, Inc./IxRun, request to hold "2019 Murals in the Market Block Party" at Eastern Market on September 14, 2019 from 1:00 PM to 1:00 AM on 9-15-19 with temporary closure of Division St. from Orleans to St. Aubin.*

9/15/19

### 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.

#### Section 1- GENERAL EVENT INFORMATION

Event Name: 2019 Murals In The Market Block Party

Event Location: Eastern Market - Division St. Between Orleans and St. Aubin

Is this going to be an annual event?  Yes  No

#### Section 2- ORGANIZATION/APPLICANT INFORMATION

Organization Name: Paxahau, Inc/1xRun

Organization Mailing Address: 1551 Rosa Parks Blvd. Suite A. Detroit, MI. 48216

Business Phone: 5865969463 Business Website: www.paxahau.com

Applicant Name: Sam Fotias

Business Phone: 5865969463 Cell Phone: 586-596-9463 Email: sam@paxahau.com

**Event On-Site Contact Person:**

Name: Sam Fotias

Business Phone: 5865969463 Cell Phone: 5865969463 Email: sam@paxahau.com

**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: \_\_\_\_\_

Projected Number of Attendees: 2000

**Please provide a brief description of your event:**

The 5th annual Murals in the Market public art festival held in Eastern Market each September will host an all ages block party with dry goods, food and beverage vendors, games for kids & adults and a stage with entertainment. This event will help support Murals in the Market and will offset the costs of the annual block party event.

9/14/19

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

Begin Set-up Date 09/13/2019 Time: 6:00 am Complete Set-up Date: 9/14/2019 Time: 10:00 am

Event Start Date: 9/14/2019 Time: 1:00 pm Event End Date: 09/15/2019 Time: 1:00 am

Begin Tearing Down Date: 9/15/2019 Complete Tear Down Date: 9/15/2019

Event Times (If more than one day, give times for each day):  
event will run from 1pm until 1 am

**Section 3- LOCATION/SITE INFORMATION**

Location of Event: Division St between Orleans and Division

Facilities to be used (Check) Street  Sidewalk  Park \_\_\_\_\_ City

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

**You will be prompted to upload these attachments upon submitting this form**

**Section 4- ENTERTAINMENT**

Describe the entertainment for this year's event:

DJ PREMIER, J ROCC AND A WIDE SELECTION OF LOCAL AND REGIONAL DJ'S AND BANDS

Will a sound system be used?  Yes  No

If yes, what type of sound system? Line array

Describe specific power needs for entertainment and/or music:

two 30kw generators

How many generators will be used? two

How will the generators be fueled?  
they will come to the site full of fuel

Name of vendor providing generators:

Contact Person: Mike Phelps - GenDrop

Address: 15440 Windmere St.

Phone: 313-595-8702

City/State/Zip Southgate, MI. 48195

### 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:

Art, Tshirts, Hats, Street Trucks, Alcoholic and Non Alcoholic Beverages

### Section 6- PUBLIC SAFETY & PARKING INFORMATION

Name of Private Security Company: TBD

Contact Person:

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 multiple social media outlets and web sites for the event

## Section 7- COMMUNICATION & COMMUNITY IMPACT INFORMATION

How will your event impact the surrounding community (i.e. pedestrian traffic, sound carryover, safety)?  
 Impact will be nominal as the set up in the street and street closures will not impact local market traffic.  
 There is little to no residential around the site so sound impact will be nominal,

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

Indicate what steps you have or will take to notify them of your event:  
 there have been and will continue to be meetings with business owners around the event site to inform them and work along with them to mitigate large impact to their daily business.

## Section 8- EVENT SET-UP

Complete the appropriate categories that apply to the event Structure

	How Many?	Size/Height
Booth	10	10x10
Tents (enclosed on 3 sides)	0	
Canopy (open on all sides)	2	40x40
Staging/Scaffolding	1	24x24
Bleachers	0	

## Section 9- COMPLETE ALL THAT APPLY

**Emergency medical services?**

Contact Person: Adam Gottleib - Hart Medical - 248-789-3648

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

**Name of company providing port-a-johns. TBD**

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

**Name of private catering company? NA**

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:** Division

**FROM:** Orleans **TO:** St Aubin

**CLOSURE DATES:** 9/13/2019 **BEG TIME:** 8 pm **END TIME:**

**REOPEN DATE:** 9/15/2019 **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**





2019-08-05

**1018**

**1018** *Petition of Paxahau, Inc./IxRun,  
request to hold "2019 Murals in the  
Market Block Party" at Eastern  
Market on September 14, 2019 from  
1:00 PM to 1:00 AM on 9-15-19 with  
temporary closure of Division St. from  
Orleans to St. Aubin.*

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**REFERRED TO THE FOLLOWING DEPARTMENT(S)**

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

### MAYOR'S OFFICE COORDINATORS REPORT

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

Petition #: 1020 Event Name: Eastern Market After Dark

Event Date : September 19, 2019

Street Closure: Alfred, Division, Adelaide

Organization Name: Eastern Market Corporation

Street Address: 2934 Russell Street Detroit, MI 48207

Receipt date of the <b>COMPLETED</b> 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: Annual Open House
- 24-Hour Liquor License**

**Petition Communications** (include date/time)

Eastern Market Businesses will host their annual open house from 7:00pm - 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"/>	7th Precinct Assisted Event; Contracted with Eastern Market Security to Provide Private Security Services
	DFD/EMS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pending Inspections & EMS Confirmation
	DPW	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ROW Permit Required for Street Closures
	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"/>	Type III Barricades & Road Closure Signage Required
	Recreation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Jurisdiction
	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"/>	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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Purchase of Parking Meters Required
	DDOT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Low Impact on Buses

**MAYOR'S OFFICE**

Signature: B. Aushier

Date: 8-28-19

# City of Detroit

OFFICE OF THE CITY CLERK

Janice M. Winfrey  
City Clerk

Caven West  
Deputy City Clerk/Chief of Staff

## DEPARTMENTAL REFERENCE COMMUNICATION

*Monday, August 5, 2019*

*To: The Department or Commission Listed Below*

*From: Janice M. Winfrey, Detroit City Clerk*

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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.

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

**1020**    *Eastern Market Corporation, request to hold "Eastern Market After Dark" at Eastern Market on September 19, 2019 from 7:00 PM to 11:00 PM with temporary closures of Alfred, Division, and Adelaide Streets.*

9/19/19

## 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.

### Section 1- GENERAL EVENT INFORMATION

Event Name: Eastern Market After Dark

Event Location: At private businesses throughout Eastern Market District.

Is this going to be an annual event?  Yes  No

### Section 2- ORGANIZATION/APPLICANT INFORMATION

Organization Name: Eastern Market Corporation

Organization Mailing Address: 2934 Russell St Detroit MI 48207

Business Phone: 313 833-9300 ext. 224 Business Website: Easternmarket.org

Applicant Name: Melissa Thomas

Business Phone: 313 833-9300 ext. Cell Phone: 313 740-1462 Email: mthomas@easternmarket.org

Event On-Site Contact Person:

Name: Melissa Thomas

Business Phone: 313 833-9300 ext. Cell Phone: 313 740-1462 Email: mthomas@easternmarket.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>Annual open house where</u> |

Projected Number of Attendees: 10,000

Please provide a brief description of your event:

This is an organized open house for businesses in the EMC District to stay open and attract attention to their business. It is sponsored by the Detroit Design Festival. This open house will operate like a smaller version of a regular weekend market, only in the evening.

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

Begin Set-up Date September Time: 5:00pm Complete Set-up Date: September 19, Time: 7:00pm

Event Start Date: September 19, Time: 7:00pm Event End Date: September 19, 2019 Time: 11:00pm

Begin Tearing Down Date: September 19, 2019 Complete Tear Down Date: September 19, 2019

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

**Section 3- LOCATION/SITE INFORMATION**

Location of Event: At private businesses throughout the Eastern Market District

Facilities to be used (Check) Street Sidewalk  Park City

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

**You will be prompted to upload these attachments upon submitting this form**

**Section 4- ENTERTAINMENT**

Describe the entertainment for this year's event:

DIME (Youth Music Ensemble (Various Students)) performing on the Plaza

Will a sound system be used?  Yes  No

If yes, what type of sound system? Amplifier

Describe specific power needs for entertainment and/or music:

Standard 20 amp circuits (provided by Eastern Market)

How many generators will be used? NA

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:

### Section 6- PUBLIC SAFETY & PARKING INFORMATION

Name of Private Security Company: Eastern Market Corp. & DPD

Contact Person: Darius Dawson (Manager of Customer Support & Security)

Address: 2934 Russell St.

Phone: 313 833-9300

City/State/Zip:

Detroit, MI 48207

Number of Private Security Personnel Hired Per Shift:

12- 15 Patrolling parking lots and around district businesses

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

Licensed

Armed

Bonded

How will you advise attendees of parking options?



**Section 7- COMMUNICATION & COMMUNITY IMPACT INFORMATION**

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

This is an evening open house for district businesses. Little impact as it will be about as busy as a slow Saturday Market in winter. Also, most of the businesses participate and are involved in the event.

Have local neighborhood groups/businesses approved your event?

Yes  No

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

All neighboring locations are notified through our "one call now" phone notice system, also monthly district business meetings. Main contact method has been by the Detroit Design Festival actively seeking out businesses to stay open and participate.

**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)		
Staging/Scaffolding		
Bleachers		

**Section 9- COMPLETE ALL THAT APPLY**

**Emergency medical services?**

Contact Person: NA

Address:

City/State/Zip:

**Name of company providing port-a-johns. NA**

Contact Person:

Address: Phone:

City/State/Zip:

**Name of private catering company? NA**

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: Alfred Street

FROM: Shed 4 TO: Russell

CLOSURE DATES: September 19, 2019 BEG TIME: 5:00pm END TIME:

REOPEN DATE: September 19, 2019 TIME:

STREET NAME: Division Street

FROM: Shed 3 TO: Russell Street

CLOSURE DATES: September 19, 2019 BEG TIME: 5:00p END TIME:

REOPEN DATE: September 19, 2019 TIME:

STREET NAME: Adelaide Street

FROM: Market Street TO: Russell Street

CLOSURE DATES: September 19, 2019 BEG TIME: 5:00pm- END TIME:

REOPEN DATE: September 19, 2019 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**

This is an organized open house for businesses in the EMC District to stay open and attract attention to their businesses. It is sponsored by the Detroit Design Festival. This open house will operate like a smaller attended regular weekend market, only in the evening.

**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.

©Copyright 2012 City of Detroit  
*Melissa Thomas*  
My #108411028000014740440001701

07/25/2019

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.

**Event Name:** Eastern Market After Dark **Event**  
**Date:** September 19, 2019

**Event Organizer:**  
Melissa Thomas

©Copyright 2012 City of Detroit  
*Melissa Thomas*  
My #108411028000014740440001701

**Applicant Signature:** \_\_\_\_\_  
**Date:** 07/25/2019

2019-08-05

**1020**

**1020**

*Petition of Eastern Market Corporation, request to hold "Eastern Market After Dark" at Eastern Market on September 19, 2019 from 7:00 PM to 11:00 PM with temporary closures of Alfred, Division, and Adelaide Streets.*

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**REFERRED TO THE FOLLOWING DEPARTMENT(S)**

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

**MAYOR'S OFFICE COORDINATORS REPORT**

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

Petition #: 1058 Event Name: 1st Annual Giddy Up Pup

Event Date : September 22, 2019

Street Closure: Various

Organization Name: Michigan Humane Society

Street Address: 30300 Telegraph Suite 220 Bingham Farms, 48025

Receipt date of the <b>COMPLETED</b> 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 Michigan Humane Society will host its 1st Annual Giddy Up Pup event from Eastern Market with a 5 - Mile Route for Mounted Police & Equestrians and a 1 - Mile Walk for Dog Owners.

**\*\* 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; Detroit Mounted Police will Provide Private Security Services
	DFD/EMS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contracted with Community EMS to Provide Private EMS Services
	DPW	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	DPD Assisted Event; No ROW Permit 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"/>	Type III Barricades Required
	Recreation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Jurisdiction
	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"/>	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: B. Austin

Date: 8-28-19

City of Detroit  
OFFICE OF THE CITY CLERK

Janice M. Winfrey  
City Clerk

Andre P. Gilbert II  
Deputy City Clerk

**DEPARTMENTAL REFERENCE COMMUNICATION**

*Thursday, August 29, 2019*

*To: The Department or Commission Listed Below*

*From: Janice M. Winfrey, Detroit City Clerk*

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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  
FIRE DEPARTMENT    POLICE DEPARTMENT  
PLANNING AND DEVELOPMENT DEPARTMENT    BUSINESS LICENSE CENTER  
TRANSPORTATION DEPARTMENT    MUNICIPAL PARKING DEPARTMENT

**1058**    *Michigan Humane Society, request to hold "1st Annual Giddy Up Pup" at Eastern Market and Greater Downtown Area on September 22, 2019 from 8:00 am to 12:00 pm with setup on 9/22/19 and teardown to be completed on the event date 9/22/19.*



1058

9/22/19

### 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.

#### Section 1- GENERAL EVENT INFORMATION

Event Name: 1st Annual Giddy Up Pup (Fundraising Walk for Michigan Humane Society)

Event Location: Eastern Market Neighborhood / Walking Tour of Greater Downtown Area - 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 Road, Suite 220, Bingham Farms MI 48025

Business Phone: 866- mhumane 866- Business Website: www.michiganhumane.org

Applicant Name: Sarah Shackelford

Business Phone: 248-283-5639 Cell Phone: 248-904-9207 Email: sshackelford@michiganhumane.org

#### Event On-Site Contact Person:

Name: Greg Harris

Business Phone: 248-283-5628 Cell Phone: 313-407-1010 Email: gharris@michiganhumane.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: \_\_\_\_\_

Projected Number of Attendees: 500

#### Please provide a brief description of your event:

Michigan Humane Society is going back to our 1877 equestrian roots by inviting the public to join the Detroit Mounted Police in a horse led walk through a 5-mile route, starting and ending at Eastern Market, shed 6. This event will begin the rebranding of MHS's former Mega March. This walk will be open to humans with their dogs. Estimated expected participation up to 1,500. Equestrian participation not to exceed 60 with an early bird fee of \$55 and then after \$65 per horse (late fee will apply one month from launch of event site/MHS will handle this marketing). Walk participants to pay an early bird fee of \$15 and the \$25.00 after. Both can fund raise through the event website and donate event day. Both fees will include a t-shirt, BBQ, music, and an adult beer and Bloody Mary tent. MHS will be soliciting

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

Begin Set-up Date 09/22/19 Time:06:00AM Complete Set-up Date:09/22/2019 Time:07:00AM

Event Start Date:09/22/19 Time:08:00AM Event End Date:09/22/19 Time:12:00PM

Begin Tearing Down Date:09/22/2019 Complete Tear Down Date:09/22/19

Event Times (If more than one day, give times for each day):  
8AM-12PM

**Section 3- LOCATION/SITE INFORMATION**

Location of Event: Eastern Market Neighborhood / Walking Tour of Greater Downtown Area

Facilities to be used (Check) Street Sidewalk  Park City

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

**You will be prompted to upload these attachments upon submitting this form**

**Section 4- ENTERTAINMENT**

Describe the entertainment for this year's event:

BBQ, music, beer and Bloody Mary tent

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:

Battery powered speakers

How many generators will be used? 2 generators: Honda 2000 Honda

How will the generators be fueled?  
Gasoline filled prior to the event.

Name of vendor providing generators:

Contact Person: Rafel Pouncy

Address: 30300 Telegraph Road

Phone: 248-840-7773

City/State/Zip: Bingham Farms, Mi 48180

### 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:

MHS retail items, food from COD licensed food trucks, drinks, BBQ from Bert's Marketplace. Will be filing separate liquor license for alcohol sales through MLCC.

### Section 6- PUBLIC SAFETY & PARKING INFORMATION

Name of Private Security Company: Prudential Security

Contact Person: Jeff Hartless

Address: 20600 Suite 900 Eureka Road

Phone: 734-286-6000

City/State/Zip:

Taylor Mi 48180

Number of Private Security Personnel Hired Per Shift:

2

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

Licensed  Armed  Bonded

How will you advise attendees of parking options?

Registration website communication. Email Communication. Day of Signage and wayfinding volunteers

**Section 7- COMMUNICATION & COMMUNITY IMPACT INFORMATION**

How will your event impact the surrounding community (i.e. pedestrian traffic, sound carryover, safety)?  
Minimal impact with sidewalk usage, large crowds, and riders on horseback.

Have local neighborhood groups/businesses approved your event?

Yes  No

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

Plans to attend neighborhood association meetings (Lafayette park, Rivertown, Brush park)

**Section 8- EVENT SET-UP**

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

	How Many?	Size/Height
Booth	0	0
Tents (enclosed on 3 sides)	10	10x10
Canopy (open on all sides)	5	10x10
Staging/Scaffolding	0	
Bleachers		

**Section 9- COMPLETE ALL THAT APPLY**

**Emergency medical services?**

Contact Person: General Dispatch, Community EMS

Address: 25400 Eight Mile Road,

City/State/Zip: Southfield, Mi 48033

Name of company providing port-a-johns: Scotty's Potties

Contact Person: Jill Coshat

Address: 27940 Wick Rd

Phone: 888-407-2900

City/State/Zip: Romulus

Name of private catering company: Bert's Marketplace

Contact Person:

Address: 2727 Russell St,

Phone: 313-567-2030

City/State/Zip: Detroit

**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 Sarah Shackelford

07/18/2019

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.

**Event Name:** 1st Annual Giddy Up Pup **Event**  
**Date:** 09/22/2019

**Event Organizer:**  
Michigan Humane Society

  
**Applicant Signature:** \_\_\_\_\_  
**Date:** 07/18/2019

Honda Power Equipment sets a new standard in portable power with the introduction of an all-new EU2200i inverter generator. Part of Honda Power Equipment’s Super Quiet Series of generators, the new EU2200i lineup is the perfect portable generator for work, home or play.



The all-new Honda EU2200i inverter generator offers tremendous value to users, delivering 10 percent more power (200 watts) than the outgoing EU2000i model, the company’s most popular portable model for the same price. The heart of the additional power the new generator delivers is the Honda GXR120 engine. With more power, better performance and improved ease of use and maintenance, the all-new Honda EU2200i is the perfect choice for consumers to power what they need for work, home or play.

In addition to more wattage, the all-new EU2200i delivers consumers additional user-friendly features including a fuel shut off valve that allows the engine to run with the fuel supply off, helping prevent issues related to stale fuel; a large spout and oil drain gutter for cleaner, easier oil changes; a smooth, light effort recoil; a user-friendly design that incorporates color-coded startup points to start the generator; and increased ventilation that improves airflow resulting in better cooling of key components.

<b>Model</b>	<b>EU2200i</b>
Engine	GXR120
Displacement	121cc
Compression Ratio	8.5:1
Engine Speed	4000 rpm – 4500 rpm (with Eco Throttle® switch off)
Cooling System	Forced Air
AC Output	120V / 2200W max. (18.3A); 120 / 1800W rated (15A)
Receptacles	20A 120V Duplex
DC Output	12V, 100W (8.3A)
Starting System	Recoil
Fuel Tank Capacity (gal / L)	0.95 US gal / 3.6 L
Engine Oil Capacity (oz. / L)	14 oz. / 0.44 L
Run Time per Tankful	3.2 hours @ rated load; 8.1 hours @ ¼ load
Dimensions (L x W x H - in./mm)	20 inches x 11.4 inches x 16.7 inches / 509 mm x 290 mm x 425 mm
Noise Level	62 dB @ rated load and 53 dB @ ¼ load
Dry Mass (lbs. / kg)	46.5 lbs. / 21.1 kg
Wet Weight (lbs. / kg)	53.6 lbs. / 24.04 kg
Oil Alert®	Yes
Ignition System	Full transistor
Eco Throttle®	Yes
Residential Warranty	3 Years
Commercial Warranty	3 Years





## Honda EU3000is Super Quiet Portable Inverter Generator

Super Quiet Portable Generator  
Great for RV / Camping Use!



### Generator Features & Benefits

- Honda Overhead Valve Engine
- Lightweight and Compact
- High Quality, Stable and High Power Output
- Quiet Operation
- Low Fuel Consumption
- Parallel Operation Capability
- Oil Alert\*
- Electronic Ignition
- Simultaneous AC/DC use
- Electronic Circuit Breakers
- Fuel Meter
- Inverter (Computer Friendly)
- USDA-Qualified Spark Arrestor/Muffler
- Fully Enclosed for Quieter Operation
- EcoThrottle™ (load dependent operation)
- Battery Standard

### Honda EU3000is Generator Specifications

Engine	Honda 6.5 HP, Single Cylinder, Overhead Valve, Air Cooled
Displacement	196 cc
AC Output	120V 3000W max.(25A) 2800W rated (23.3A)
Receptacles	20A 125V Duplex NEMA Plug Number: 5-20P  30A 125V Locking Plug NEMA Plug Number: L5-30P
DC Output	12V, 144W (12A) (Optional D.C. Charge Cable required)
Starting System	Recoil and Electric Start
Fuel Tank Capacity	3.4 gallons
Run Time on One Tankful	7.2 hrs. @ rated load 20 hrs. @ 1/4 load
Dimensions (L x W x H)	25.8" x 18.9" x 22.4"
Noise Level	58 dB @ rated load 49 dB @ 1/4 load (Noise level varies depending on load)
Dry Weight	134 lbs.





Brush Park

MYBF ALEM

Eastern Market

Lafayette Park

Detroit

3/5

© 2018 Google



# Michigan Humane Society—Giddy Up Pup Event Space Layout—9.22.19



2019-09-29

**1058**

**1058** *Petition of Michigan Humane Society, request to hold "1st Annual Giddy Up Pup" at Eastern Market and Greater Downtown Area on September 22, 2019 from 8:00 am to 12:00 pm with setup on 9/22/19 and teardown to be completed on the event date 9/22/19.*

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**REFERRED TO THE FOLLOWING DEPARTMENT(S)**

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

102

**OFFICE OF CONTRACTING  
AND PROCUREMENT**

August 28, 2019

HONORABLE CITY COUNCIL:

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

6001018      100% City Funding – AMEND 1 – To Provide Emergency Sand Bags. –  
Contractor: Signal USA, LLC – Location: 2490 Industrial Row, Troy, MI  
48084 – Contract Period: Upon City Council Approval through January  
31, 2020 – Contract Increase: \$1,030,639.38 – Total Contract Amount:  
\$1,280,639.38 **GENERAL SERVICES**

Respectfully submitted,

Boysie Jackson, Chief Procurement Officer  
Office of Contracting and Procurement

**BY COUNCIL MEMBER**                     **SHEFFIELD**                    

**RESOLVED**, that Contract No. 6001018 referred to in the foregoing communication dated August 28, 2019, be hereby and is approved.



CITY OF DETROIT  
RECREATION DEPARTMENT  
ADMINISTRATION OFFICE

103

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

August 7, 2019

Honorable City Council;

Re: Authorization to accept a donation of park improvements for St. Hedwig Park from the Men's Senior Baseball League and Friends of St. Hedwig.

General Services Department is requests authorization from your Honorable Body to accept a donation of park improvements from Friends of St. Hedwig on behalf of the Men's Senior Baseball League with an estimated value of \$3,000.00.

Park improvements will consist of constructing simple shelters over the dugouts in field #2 at St. Hedwig Park. The cost of materials and the construction will be assumed by the Men's Senior League. The organization will maintain the structures along with field maintenance.

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

Sincerely,

Janet Anderson  
Director



## Resolution

**Council Member** \_\_\_\_\_

**Whereas**, the General Services Department is requesting authorization to accept a donation of park improvements from Friends of St. Hedwig Park and the Men's Senior Baseball League

**Whereas**, the park improvements will consists of the construction of simple shelters over the dugout at field #2 in St. Hedwig Park

**Resolved**, the General Services Department is authorized to accept a donation of park improvements from the Friends of St. Hedwig Park and Men's Senior Baseball League; to be installed at St. Hedwig Park.





## APPLICANT SECTION

*Friends of St. Hedwig Park*

Requesting Organization Name: \_\_\_\_\_

Today's Date: 24 July 2019

Contact Name: Joan Wadsworth

DPRD Property Name: St. Hedwig Park

Phone: 248 946 9311

Property Address: Junction & Konkle

Email: joanwadsworth@gmail.com

Location within the Property: field # 2

Address: FSHP, 3245 Junction

Detroit 48210

### Improvement Type:

Park

Physical Improvement

Facility (ie Rec Center)

Not-Art ———> fill out Donation Letter

Art ———> fill out Art Donation Letter

Maintenance ———> fill out SLA Letter

### Improvement Project Description:

(Please specify if any listed funding are for an event / program, or not for a permanent, physical improvement.)

Members of the Men's Sr. league hope to construct dugout shelters for field # 2. The shelters will be built with wood, have a simple roof & concrete footings. The cost of materials is \$ 1,347.00 and the estimated cost of volunteer labor is \$ 1,500.00.

Estimated Value of Improvement: total value \$ 2,847.00

By submitting this request I/We/Our Organization agree(s) to abide by all rules and policies of the City of Detroit and the General Services Department, Parks and Recreation Division. 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 Parks and Recreation Division 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 DPRD Property named above and construction of this Project as described herein.

Signature: *Joan Wadsworth*

Date: 24 July 2019

Print Name: Joan Wadsworth

Organization on behalf of: Friends of St. Hedwig Park 3

Note: Our original request was submitted on ~~24~~ 23 July 2019. This request is signed. on 23 July



### GSD STAFF SECTION

#### Asset Information:

DPRD Property Number: 2,900 JUNCTION

Asset Value: \$ 3,000

Asset Life Cycle: 20 YEARS

Decommission Cost: \$1,000

#### Maintenance Information:

GSD Maintenance Requirements: WILL NOT

IMPACT LAWN MAINTENANCE.

PDU RESERVES THE RIGHT TO

REMOVE IF THE SHELTER FALLS INTO

DISREPAIR

GSD Operations Requirements: WILL

BENEFIT PROGRAMMING +

NOT DISRUPT ANY PLAY.

GSD Project Coordinator: JOHN DEWITER

Date: 8/1/2019

#### Authorization:

Project Denied

Project Approved as Submitted

Project Approved with Changes: \_\_\_\_\_

\*Approved by GSD Director: Janet Anderson

Date: 8-5-2019

\*Requesting Group shall not have approval to make the requested park improvement without the approval of the General Services Department Director

Drawings were submitted electronically on 3 July to Juliana.

Ms. Jan Anderson  
Director  
General Services Administration  
18100 Meyers Road  
Detroit MI 48235

Dear Ms. Anderson,

On behalf of the Friends of St. Hedwig Park and the Men's Senior Baseball League, I am writing to offer our full assistance in the construction of simple shelters over the dugouts in field 2 at St. Hedwig Park. The costs of materials and the construction will be assumed by the Men's Senior League. The cost of the materials is \$1,347.00 and the cost of labor is estimated at \$1,500.00. The construction will be done by team members who work in the construction industry. I will send a sketch of the shelters separately.

This project will begin as soon as possible. The Men's Senior League will maintain the structures, along with the field maintenance they perform.

Enrique Cabrera, 734-363-3467, will be in charge of the project. You can call me or Enrique with any questions. You can reach me at 248-946-9311 or [joanwadsworth@gmail.com](mailto:joanwadsworth@gmail.com).

We appreciate your support.

Sincerely,

Joan Wadsworth

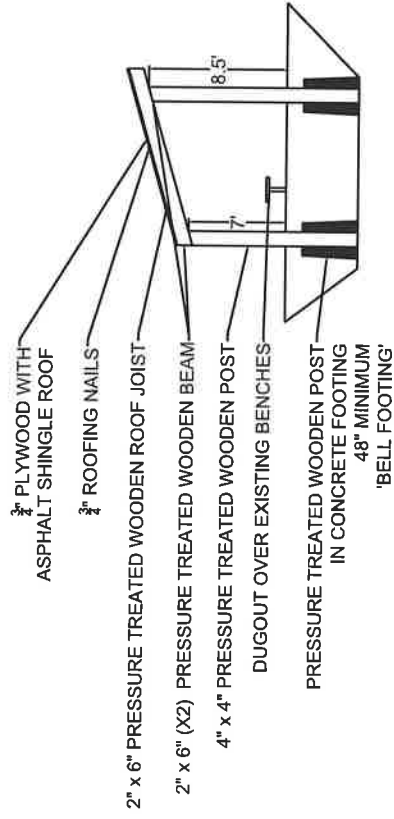


24 July 2019

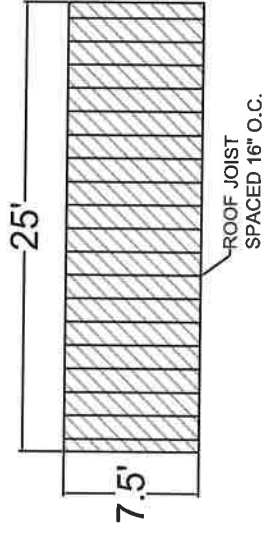
*Initial letter submitted 3 July 2019 was unsigned.*

# DUGOUT SHELTERS FOR ST. HEDWIG

## SECTION VIEW



## PLAN VIEW





CITY OF DETROIT  
RECREATION DEPARTMENT  
ADMINISTRATION OFFICE

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

104

August 21, 2019

Honorable City Council:

Re: Authorization to accept a donation of park improvements from Joy Communication Association for park space at Fitzpatrick and Longacre.

Detroit General Services/Parks & Recreation Department is requesting authorization of your Honorable Body to accept a donation of park improvements from the Joy Communication Association to purchase and install at Fitzpatrick and Longacre.

Park improvements will consists of the purchase and installation of two picnic tables, one grill, two benches, and landscaping. Park improvements have an estimated value of \$2,000.

We respectfully request your authorization to accept a donation of park improvements from the Joy Communication Association; with an estimated value of \$2,000 to be installed at Fitzpatrick and Longacre, by adapting the attached resolution with a Waiver of Reconsideration

Sincerely,

Janet Anderson  
Director

cc: File



---

## Resolution

**Council Member** \_\_\_\_\_

**Whereas**, Detroit General Services/Parks & Recreation Department is requesting authorization to accept a donation of park improvements from the Joy Communication Association to be installed at Fitzpatrick and Longacre

**Whereas**, the park improvement installation will consist of two picnic tables, one grill, two benches, and a variety of landscaping. The park improvements have an estimated value of \$2,000.00.

**Resolved**, Detroit General Services/Parks & Recreation Department has authorization to accept a donation of park improvements from the Joy Communication Association, with an estimated value of \$2,000, to be installed at Fitzpatrick and Longacre.



GENERAL SERVICES DEPARTMENT  
**Parks & Recreation  
Division**

# Improvement Authorization Form

Pag

## APPLICANT SECTION

Requesting Organization Name: Joy Community Association

Today's Date: 7/18/19

Contact Name: Angy Webb

DPRD Property Name: Fitzpatrick-Southfield Greent

Phone: (313)675-5993

Property Address: \_\_\_\_\_

Email: angy.webb@yahoo.com

Location within the Property: Longacre and Fitzpatri

Address: 8845 Rutland

### Improvement Type:

Park

Physical Improvement

Facility (ie Rec Center)

Not-Art ———> fill out Donation Letter

Art ———> fill out Art Donation Letter

Maintenance ———> fill out SLA Letter

### Improvement Project Description:

(Please specify if any listed funding are for an event / program, or not for a permanent, physical improvement.)

2 Picnic tables, flowers, 1 grill, 2 benches, and cherry blossom trees.

Estimated Value of Improvement: not sure maybe 2,000.00

By submitting this request I/We/Our Organization agree(s) to abide by all rules and policies of the City of Detroit and the General Services Department, Parks and Recreation Division. 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 Parks and Recreation Division 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 DPRD Property named above and construction of this Project as described herein.

Signature: \_\_\_\_\_

*Angy Webb*

Date: 7/18/19

Print Name: Angy Webb

Organization on behalf of: Joy Community Association and GM

**GSD STAFF SECTION**

**Asset Information:**

DPRD Property Number: 346

Asset Life Cycle: 5+ years

Asset Value: \$2,600

Decommission Cost: \_\_\_\_\_

**Maintenance Information:**

GSD Maintenance Requirements: None. Parcel  
is adopted

GSD Operations Requirements: None

GSD Project Coordinator: Raysh Lard

Date: 7/26/19

**Authorization:**

Project Denied

Project Approved as Submitted

Project Approved with Changes: \_\_\_\_\_

\*Approved by GSD Director: Janet Anderson

Date: 7-30-19

\*Requesting Group shall not have approval to make the requested park improvement without the approval of the General Services Department Director

