

**NEIGHBORHOOD
AND COMMUNITY
SERVICES
STANDING
COMMITTEE**

36

MAYOR'S OFFICE COORDINATORS REPORT

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

Petition #: 1212 Event Name: Hot Chocolate 15/5K

Event Date : April 18, 2020

Street Closure: Various

Organization Name: RAM Racing

Street Address: 951 Corporate Grove Drive Buffalo Grove, IL 60089

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

Event Elements (check all that apply):

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

Petition Communications (include date/time)

The 2nd Annual Hot Chocolate 15/5K to benefit the Make A Wish Foundation will be located at West Riverfront Park to Belle Isle from 7:00am - 11:00am.

**** 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"/>	DPD Assisted Event; Contracted with Cover 3 Protective Services to Provide Private Security Services
	DFD/EMS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pending Inspections; Contracted with Superior Ambulance to Provide Private EMS Services
	DPW	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	DPD Assisted; No 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"/>	Barricades Required
	Recreation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Application Received & Approved by the Riverfront Conservancy
	Bldg & Safety	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Permits for Tents & Generators Required
	Bus. License	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Permit 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. Ausher

Date: 2-12-2020

City of Detroit

Janice M. Winfrey
City Clerk

OFFICE OF THE CITY CLERK

Andre P. Gilbert II
Deputy City Clerk

DEPARTMENTAL REFERENCE COMMUNICATION

Friday, February 14, 2020

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

1212 *Running Away Enterprises dba RAM Racing, request to hold "Hot Chocolate 15/5 K" beginning at West Riverfront Park on April 18, 2020 from 7:00 AM to 11:00 AM with some temporary street closures based on the approved route.*

2 Woodward Ave. Coleman A. Young Municipal Center Rm. 200, Detroit, MI 48226

(313) 224 - 3260 | Fax: (313) 224 - 1466

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: Hot Chocolate 15/5K

Event Location: West Riverfront Park

Is this going to be an annual event? Yes No

Section 2- ORGANIZATION/APPLICANT INFORMATION

Organization Name: Running Away Enterprises dba RAM Racing

Organization Mailing Address: 951 Corporate Grove Drive Buffalo Grove, IL 60089

Business Phone: 312 259-2496 Business Website: ramracing.org

Applicant Name: Brandon Presern

Business Phone: 312 259-2496 Cell Phone: 312 259-2496 Email: bpresern@ramracing.org

Event On-Site Contact Person:
Name: Brandon Presern

Business Phone: 312 259-2496 Cell Phone: 312 259-2496 Email: bpresern@ramracing.org

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: 5000

Please provide a brief description of your event:
5K & 15K race benefiting Make A Wish foundation.

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

Begin Set-up Date : 4/16/20 Time: 7 am Complete Set-up Date: 4/18/20 Time: 5 am

Event Start Date: 4/18/20 Time: 7 am Event End Date: 4/18/20 Time: 11:00 am

Begin Tearing Down Date: 4/18/20 Complete Tear Down Date: 4/18/20

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

Race will start around 7 am and finish up around 11 am

Section 3- LOCATION/SITE INFORMATION

Location of Event: West Riverfront Park

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

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

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

Section 4- ENTERTAINMENT

Describe the entertainment for this year's event:

DJ plays music in post race party

Will a sound system be used? Yes No

If yes, what type of sound system? Speaker on sticks

Section 5- SALES INFORMATION

Will there be advanced ticket sales? Yes No Race registration will be sold in advance
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: Sports clothing, T-shirts, hats, etc.

Will there be food trucks? Yes No

If yes, please list how many: _____

Will there be a charge for parking? Yes No

If yes, please describe the amount: _____

How will you advise attendees of parking options? Through our web site and dedicated info emails

Section 6- PUBLIC SAFETY & PARKING INFORMATION

Name of Private Security Company:

Contact Person: Cover 3 Protective Serices

Address: 19491 Snowden

Phone: 313-204-0932

City/State/Zip: Detroit, MI 48235

Number of Private Security Personnel Hired Per Shift: 3

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

- Licensed Armed Bonded

Section 7- COMMUNICATION & COMMUNITY IMPACT INFORMATION

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

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

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

We will post event sigagne prior to the race to notify residents.

Section 8- EVENT SET-UP

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

Describe specific power needs for entertainment and/or music. If generators will be used, described how many and how they will be fueled:

We will use about 4 generators for power. They will be fueled by gasoline.

Name of vendor providing generators: Contact Person:

Address: 13404 W Star Dr,

Phone: 586 244 9515

City/State/Zip Shelby Twp, MI, United States

	How Many?	Size/Height
Booth		
Tents (enclosed on 3 sides)	4	30x80, 30x60, 10x20, 30x40
Canopy (open on all sides)	4	10x10
Staging/Scaffolding		
Bleachers		

Section 9- COMPLETE ALL THAT APPLY

Emergency medical services? Superiour Ambluance

Contact Person: Karl Kuester

Address: 395 W Lake St

City/State/Zip: Elmhurst, IL 60126

Name of company providing port-a-johns.

Contact Person: Scotty's Potties

Address: P.O. BOX 530845

Phone: (734) 421-1400

City/State/Zip: LIVONIA, MI 4815

Name of private catering company?

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.**

Will there be street closures? Yes No

If yes, please complete the street closure information below and attach a map or sketch of the proposed area for closure.

STREET NAME: TBD based on approved route

FROM: _____ **TO:** _____

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

REOPEN DATE: _____ **TIME:** _____

STREET NAME: _____

FROM: _____ **TO:** _____

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

REOPEN DATE: _____ **TIME:** _____

STREET NAME: _____

FROM: _____ **TO:** _____

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

REOPEN DATE: _____ **TIME:** _____

STREET NAME: _____

FROM: _____ **TO:** _____

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

REOPEN DATE: _____ **TIME:** _____

STREET NAME: _____

FROM: _____ **TO:** _____

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

REOPEN DATE: _____ **TIME:** _____

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

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

AUTHORIZATION & AFFADAVIT OF APPLICANT

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

Signature of Applicant _____ Date _____

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

HOLD HARMLESS AND INDEMNIFICATION


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

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

(Please Print)

Event Name: Hot Chocolate 15/5K _____ Event
Date: 4/18/20 _____

Event Organizer: RAM Racing _____

Applicant Signature:  _____
Date: 5-19-19 _____





Hot Chocolate Detroit 5k Course Description
Saturday April 18, 2020
7:00AM

Start: On Atwater St

Mile 0.0 - Begin heading West on Atwater St in Eastbound lanes

Mile 0.02 - Turn Right onto Rivard St heading North

Mile 0.1 - Turn Left onto Franklin St heading West

Mile 0.3 - Turn Right onto St Antoine heading North

Mile .4 - Turn Right onto Woodbridge heading East

Mile .6 - Turn Right onto Rivard St heading South

Mile .8 - Turn Left onto Atwater St heading East in the West bound lanes

Mile 1.6 - Turn Left onto Joe Campau heading North

Mile 1.7 - Turn Right onto Wright St heading East

Mile 2 - Turn Right onto Aldair St heading South

Mile 2.2 - Turn Right onto Detroit River walk

Mile 2.5 - Turn Right onto Joe Campua heading North

Mile 2.3 - Turn Left onto Atwater St running West in the Eastbound Lanes

Mile 3.1, Finish: On Atwater St just West of Dequindre Cut



Hot Chocolate Detroit 15k Course Description

Saturday April 18, 2020

7:45 AM

Start: On Atwater St

Mile 0.0 - Begin heading West on Atwater St Eastbound lanes

Mile 0.02 - Turn Right onto Rivard St heading North

Mile 0.1 - Turn Left onto Franklin St heading West

Mile 0.3 - Turn Right onto St Antoine heading North

Mile .4 - Turn Right onto Woodbridge heading East

Mile .6 - Turn Right onto Rivard St heading South

Mile .8 - Turn Left onto Atwater St heading East in the West bound lanes

Mile 1.6 - Turn Left onto Joe Campau heading North

Mile 1.7 - Turn Right onto Wright St heading East

Mile 2 - Turn Right onto Aldair St heading South

Mile 2.2 - Turn Left onto Detroit River walk, run East on the walk to Mt Elliot

Mile 2.6 - Turn Left onto Mt Elliott St heading North

Mile 2.8 - Turn Right onto E Jefferson running East in the East bound Lane

Mile 3.1 - Turn Right onto E Grand Blvd/McArthur Bridge heading South

Mile 3.3 - Turn Left onto Riverbank Dr heading East

Mile 4.2 - Turn Right onto Inselruche Ave heading South

Mile 4.3 Turn left onto Central heading East

Mile 4.4 Make a Right U-Turn on Central to head West

Mile 4.9 Turn left on Picnic Way heading South

Mile 5.0 - Turn Left on Loiter Way heading East



Mile 5.1 – Turn right on Picnic Way heading South

Mile 5.3 – Turn right onto The Strand, take the Strand around Belle Isle (clockwise) to Sunset Dr

Mile 6.7 – Turn left on E Grand/MacArthur Bridge heading North

Mile 7 – Turn left on E Jefferson running West in the East bound North Lane

Mile 7.5 – Turn left on Mt Elliott heading South

Mile 7.6 – Turn right onto Detroit River Walk heading South/East

Mile 8.0 – Turn right onto Joe Campau heading North

Mile 8.1 – Turn left onto Atwater heading West in the Eastbound Lanes

Mile 9.3 – Finish on Atwater just West of the Dequindre Cut



HOT Chocolate 15k/5k.

April 18th, 2020



2020-02-14

1212

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dba RAM Racing, request to hold "Hot
Chocolate 15/5 K" beginning at West
Riverfront Park on April 18, 2020
from 7:00 AM to 11:00 AM with some
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approved route.*

REFERRED TO THE FOLLOWING DEPARTMENT(S)

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