

**PUBLIC HEALTH
AND SAFETY
STANDING
COMMITTEE**

MAYOR'S OFFICE COORDINATORS REPORT

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

Petition #: 1206 Event Name: Fireball Whisky Experience - Tiger's Opening Day

Event Date : March 30, 2020

Street Closure: None

Organization Name: Archrival

Street Address: 720 O Street Lincoln, NE 68508

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: Experiential Marketing
- 24-Hour Liquor License**

Petition Communications (include date/time)

Harry's Detroit will host a Tiger's Opening Day event at 2482 Clifford Street and the adjacent parking lot from 8:00am - 6:00pm; with a skee-ball fire activation.

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

Date	Department	N/A	APPROVED	DENIED	Additional Comments
	DPD	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	DPD will Provide Special Attention; Contracted with Harry's Security to Provide Private Security Services
	DFD/EMS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pending Inspections; DFD Fire Watch Required for Entirety of Event
	DPW	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	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"/>	Fencing & 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 Tent & Flame Permit 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 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. Justice

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

1206 *Archrival, request to hold "Fireball Whisky Experience/Tiger's Opening Day" at Harry's Detroit, 2482 Clifford on March 30, 2020 from 8:00 AM to 6:00 PM.*

3/30/2020

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: Fireball Whisky Experience // Tiger's Opening Day

Event Location: Harry's Detroit 2482 Clifford St, Detroit MI 48201

Is this going to be an annual event? Yes No

Section 2- ORGANIZATION/APPLICANT INFORMATION

Organization Name: Archrival

Organization Mailing Address: 720 O Street, Lincoln, NE 68508

Business Phone: 503-575-8643

Business Website: Archrival.com

Applicant Name: Nick Krzeminski

Business Phone: 503-575-8643

Cell Phone: 503-575-8643

Email: nick.krzeminski@archrival.com

Event On-Site Contact Person:

Name: Nick Krzeminski

Business Phone: 503-575-8643

Cell Phone: 503-575-8643

Email: nick.krzeminski@archrival.com

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: experiential marketing |

Projected Number of Attendees: 3000

Please provide a brief description of your event:

We are representing our client, Fireball Whisky, with a Fire Skee-Ball activation + photo opportunity and sampling onsite at Harry's Bar on Clifford St. The fire skee-ball lanes were created for Burning Man Arts Festival in 2013 and are contracted nationally by various brands for experiential marketing campaigns. The lanes are owned and operated by Fired Up Management by pyro certified and compliant onsite technicians.

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

Begin Set-up Date 03/29/2020 Time:08:00 Complete Set-up Date:03/29/2020 Time:16:00

Event Start Date:03/30/202 Time:08:00 Event End Date:03/30/202 Time:18:00

Begin Tearing Down Date:03/31/2020 Complete Tear Down Date:03/31/2020

Event Times (If more than one day, give times for each day):
one day, 10 hour activation with pre/post times included

Section 3- LOCATION/SITE INFORMATION

Location of Event: 2482 Clifford St, Detroit MI 48201 [all contained within Harry's fenced in parking lot]

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:

Fire skee-ball gameplay lanes.

Will a sound system be used? Yes No

If yes, what type of sound system? basic emcee audio package [2 ev speakers on sticks + microphone]

Describe specific power needs for entertainment and/or music:

4 grounded 110v dedicated outlets, Harry's to provide shore power

How many generators will be used? 3

How will the generators be fueled?
gasoline jugs by dedicated event crew

Name of vendor providing generators:

Contact Person: Nick Krzeminski

Address: 720 O Street

Phone: 503-575-8643

City/State/Zip: Lincoln, NE 68508

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:

nothing will be sold, samples of Fireball Whisky will be distributed by TIPS certified brand ambassadors per Harry's event liquor license and Fireball Whisky's event liquor team.

Section 6- PUBLIC SAFETY & PARKING INFORMATION

Name of Private Security Company: Harry's Detroit to provide onsite security

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?

Harry's to handle as this is a preexisting, annual event that we are joining.

Section 7- COMMUNICATION & COMMUNITY IMPACT INFORMATION

How will your event impact the surrounding community (i.e. pedestrian traffic, sound carryover, safety)?
it will not affect any of the above

Have local neighborhood groups/businesses approved your event?

Yes No

Indicate what steps you have or will take to notify them of your event:
Harry's to promote the 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)	1	10' x 10' x 8' Mastertent with wind rated weights
Canopy (open on all sides)		
Staging/Scaffolding		
Bleachers		

Section 9- COMPLETE ALL THAT APPLY

Emergency medical services?

Contact Person: Event Medic

Address: 901 North Broadway

City/State/Zip: North Massapequa, NY 11758

Name of company providing port-a-johns.

Contact Person: Harry's to provide

Address:

Phone:

City/State/Zip:

Name of private catering company?

Contact Person: n/a

Address:

Phone:

City/State/Zip:

SPECIAL USE REQUESTS

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

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

STREET NAME: n/a Harry's private parking lot will be utilized

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**

Please reach out directly to me with any/all questions as I can walk you through the onsite process and ROS + all safety precautions we take to execute this event; it is part of a national marketing program for the brand. We have a fire effects package PDF for your review. Please let me know where to send it.

Nick Krzeminski [Senior Event Producer // Archival] 503-575-8643 [nick.krzeminski@archival.com]

Josh Levine [Owner // Fired Up Management] 310-424-8801 [josh@firedupmanagement.com]

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 via DocuSign
Nicholas John Krzeminski
DocuSign Envelope ID: 33F4A1C8D774923A-475A-D391765

01/29/2020

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: Fireball Whisky Fire Skee-Ball **Event**
Date: March 30, 2020

Event Organizer:
Archrival // Nick Krzeminski

Signature via DocuSign
Nicholas John Krzeminski
DocuSign Envelope ID: 33F4A1C8D774923A-475A-D391765
Applicant Signature:

Date: 01/29/2020

SKEE-BALL LANES

TOURNAMENT SCOREBOARD

PHOTO OP AREA

PHOTO OP ATTENDANT

SCOREBOARD ATTENDANT

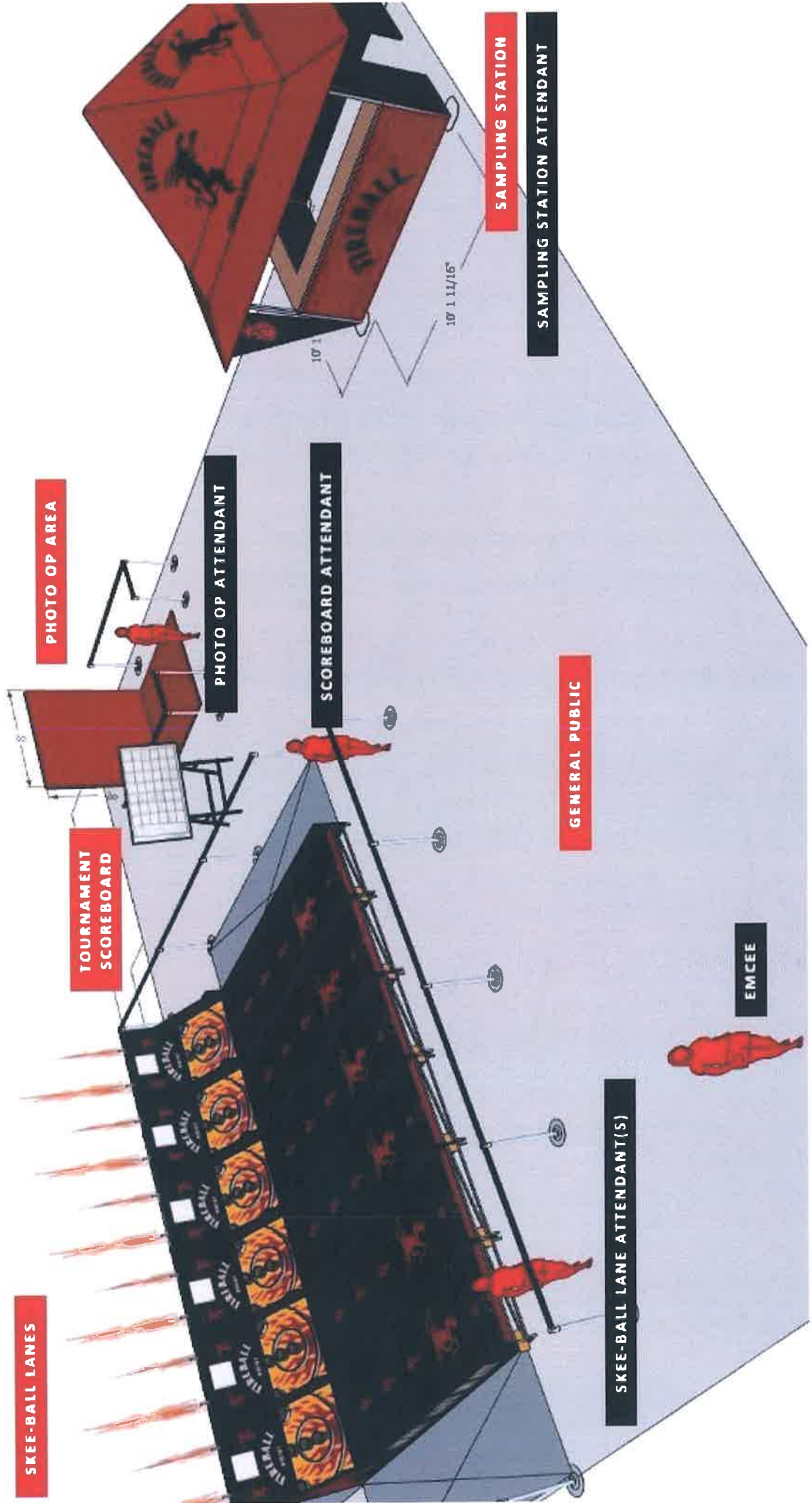
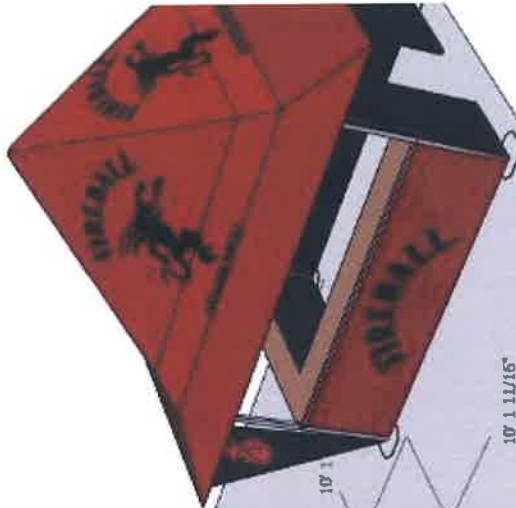
GENERAL PUBLIC

EMCEE

SKEE-BALL LANE ATTENDANT(S)

SAMPLING STATION

SAMPLING STATION ATTENDANT



FIRE SKEE BALL INFORMATION

Harry's

3-30-2020

The intent of the following information is to address the requirements Fireball Skee Ball Installation. It is meant to accompany the Temporary Activity Permit application for the use of flame effects before an audience at the Harpoon Harry's Beachfront Restaurant

1. Organization Responsible: Fireball Whiskey / Archrival

2. Dates: 3/30/2020

3. Production Location: Harry's 2482

Clifford St. Detroit Mi 48201

313-964-1575

4. NFPA Part 160 Annex B information: (Please see documentation below)

5. Flame Effect Classification: Group III Flame Effect— An attended temporarily installed for a specific production with limited operation and fixed time for removal.

6. General Site Plan and Flame Effect Description:

Below is a diagram of a general proposed location and general site plan, with the location of the temporary activity



(935) · \$\$

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1 for pre-game grub eats offers a free & a covered roof deck.

24 hour food · Late-night food

Clifford St, Detroit, MI 48201

F Detroit, Michigan

troit.com

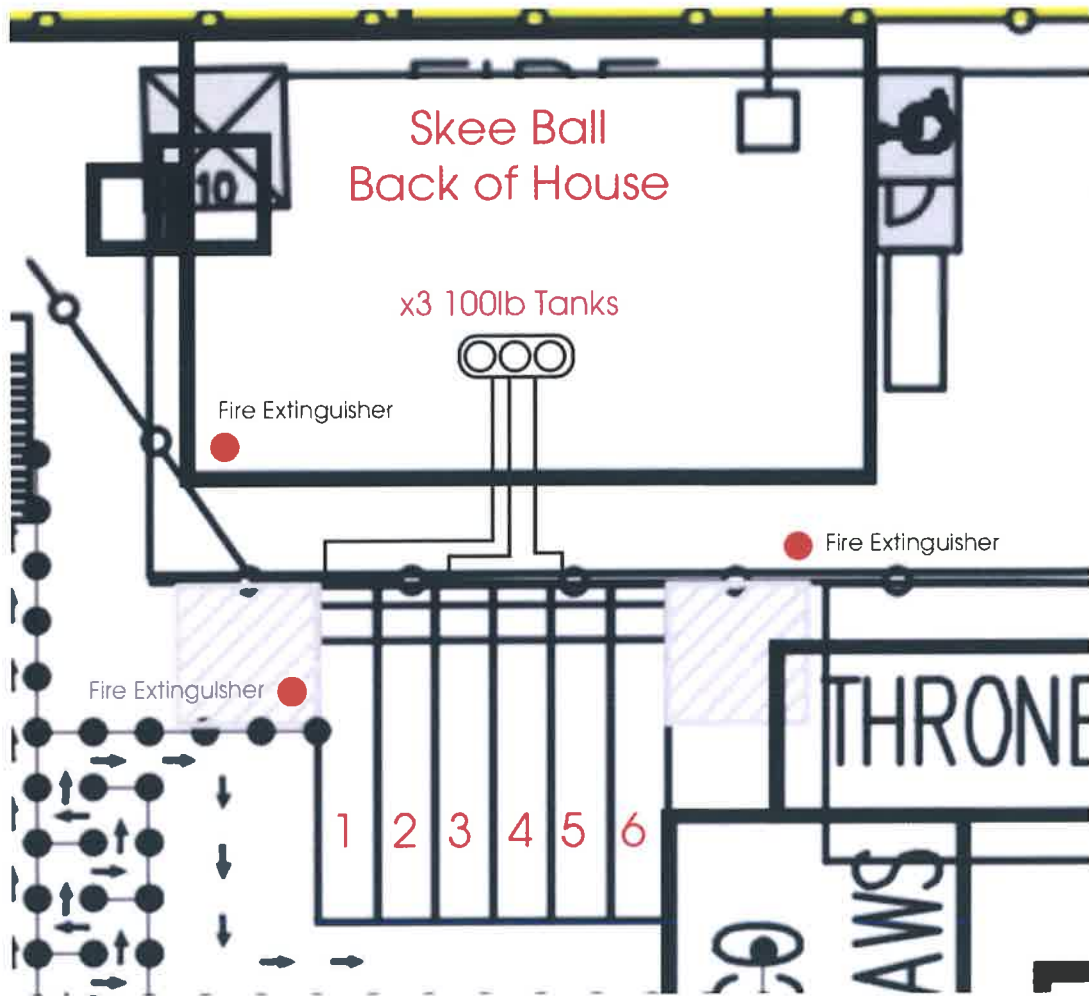
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W: 11AM-2AM

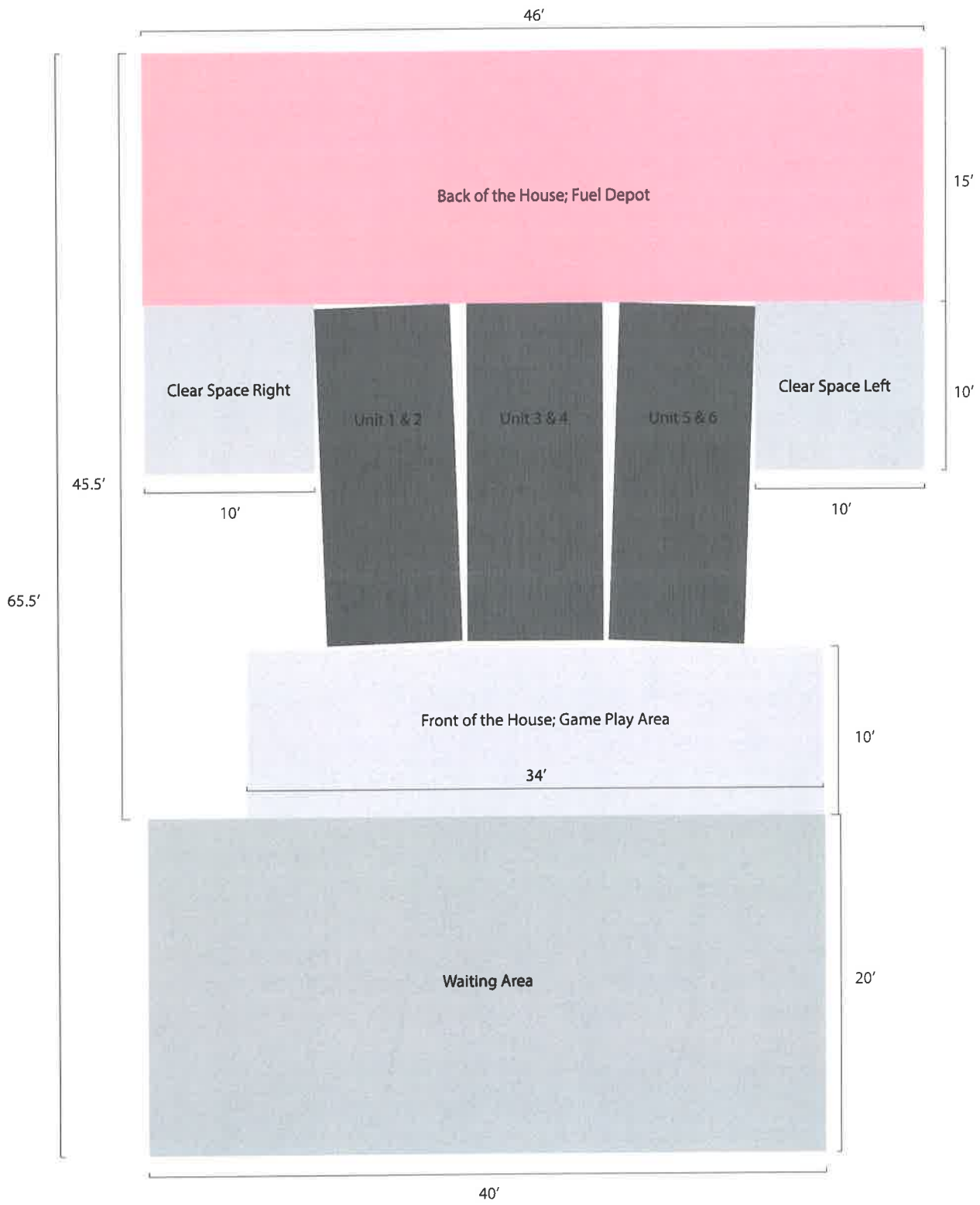
[arrysdetroit.com](#)

[tel](#)

Imagery ©2020 Google, Map data ©2020, Map data ©2020, United States, Terms, Send feedback



The fuel used for the effect will be propane in vapor form. The plan of operation is to run the system for about four to five hours. Estimated consumption is approximately three hundred pounds each of the three evening shims throughout the events. Above is a diagram of the fuel placement as well as strategically placed fire extinguishers.



Proposed Fire Skee Ball location and General Site Plan (Not To Scale)

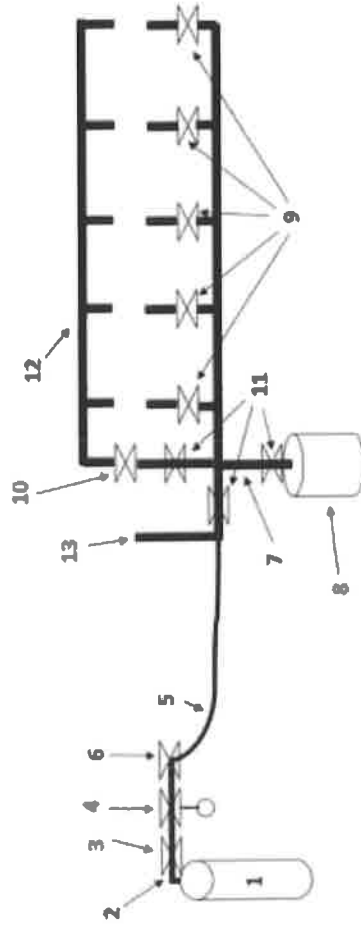
Fire Skee Ball is generically based on the arcade game, Skee Ball. As the name implies, fire is used to add another dimension to the game experience. Fire Skee Ball is a modification of the Riskee Ball base design implemented at the Burning Man 2013 Charcade by Christopher Guard / Site 3 Fire Arts, and Seth Hardy of Propane and Electrons. This system includes six participant lanes, fabricated in two lane pairs. The lane pairs can be deployed side-by-side and interconnected to one propane supply system for all six. Each pair of lanes would be independently functional, so that depending on the venue any multiple of two lanes could be set up and operated. The lanes themselves are 20 feet long, with aluminum frames. The ball rolling surface is marine plywood, and the sides are aluminum sheet metal. The "Headframe," the system component that is mounted at the end of the lane, contains the microprocessor-controlled flame effect system and scoring display. It is also fabricated with an aluminum frame and sheet metal. The flame effect mechanism is designed in accordance with NFPA Part 160. All piping within the game itself is Schedule 40 black pipe or LPG rated hose, with LPG-rated solenoid valves containing Viton seals. When a ball is rolled with sufficient accuracy, and lands in one of the target holes, a switch is activated that is detected by the microprocessor in the control system. The system in turn

actuates the adjacent solenoid, releasing propane for a predetermined period of time (on the order of 1/2 or one second). This release is ignited by pilot lights that are constantly lit.

Only the immediate area around the headframe is affected by the effect, as it fires at a slight angle from vertical out of the headframe. The audience will be positioned out in front of the game. As the ball runways are 16 feet long, the audience is maintained sufficiently distant from the effect. The sides of the effect will be barricaded at least 15 feet from the effect to prevent audience ingress to the vicinity of the effect. The system operator will have an E-stop button that can be pressed to immediately shut down the system in the event of unauthorized participant ingress.

The six lanes will be located in the center of the lot. A conceptual crowd control is depicted at the lower part of the proposed layout, with barricades around the perimeter. This is not necessarily the final configuration for the crowd control concept, pending additional evaluation.

Fire Suezball Piping Diagram



1	Propane supply Cylinder (2 each)	8	20 lb. accumulator propane tank, current certification
2	M-FCC 1/2" M-APT, 7/8" Wm (Propane Supply)	9	Electric Solenoid Valve, Brass/Viton (NOS) 1/2" DC 0.00V (Electrich)
3	1/4" NPT WCC Self Port Brass Ball Valve (Propane Supply)	10	Low pressure adjustable regulator for pilot flames
4	Fisher 10 Press. Adj. Regulator - 1/2" (NPT Inlet/Outlet) & gauge (Propane Supply)	11	1/4" NPT 600 WCC Full Port Brass Ball Valve
5	1/2" to 3/8" F190 LP-4mm Valve (Propane Supply)	12	1/4" Schedule 40 black pipe manifold for pilot flames for propane
6	1/2" Electric Solenoid Valve, Brass/Viton (NOM) 120 V AC (Electrich)	13	Schedule 40 black pipe and LP-rated gas hose manifold to other lanes
7	Schedule 40 black pipe interconnection between accumulator and valves		

Supplemental fire protection features: An emergency stop button that removes power from all systems is included in the system. A solenoid valve at the supply is deenergized, cutting off propane supply to the system as well. 1/4 turn shutoff valves are placed throughout the system in the event that a malfunctioning part of the system needs to be isolated by the operator.

Inclement weather such as rain or winds above 25 mph would necessitate the suspension of operations for these circumstances.

Clearance to combustibles: No combustibles have been identified inside the area other than the incidental plastics in the mechanism and the marine plywood of the lanes themselves. A minimum of two 2-A:10B:C rated fire extinguisher will be on hand at all times.

Operator participation: The certified/registered operator currently identified in this document is not the designers or assembler of this flame effect system. This operator has worked this system in the past and has knowledge of its functionality. They will be in position to immediately press the stop button when an off-normal situation is identified, such as equipment malfunction or unauthorized ingress into the restricted area around the effect. Helpers may be on hand for assistance with the effect and/or crowd control, and will be trained in the system's behavior, location of shutoff valves, fire extinguishers and observational awareness. The operator

will conduct a tailgate safety briefing daily before the startup of operation, and operational checks will be made as part of the startup process. Shutdown will be a general reverse of the startup process.

Emergency response procedures: Off-normal occurrences will be handled on a case-by-case basis. In the event of a minor equipment malfunction, the response may be no more than isolating a particular part of the system and turning off the controller. For a major malfunction, the Emergency Stop button would be pressed by the operator, and, safety permitting, manual system valving would be closed, and participants would be directed to egress. Emergency response notifications would be made immediately through proper chain of command emergency response system depending on the situations.

The Operator is identified for the system will be determined from the Orlando Florida area.

EQUIPMENT NEEDED

on both dates:

3/28 -3/30

1x Forklift w/8” forks to remove lanes from trailer.

RUN OF SHOW

Estimated

Saturday March 28th 2020

11AM- Arrival of FSB Lanes onsite.

Sunday March 29th 2020

9 AM - Artist/Crew arrive for Build

Monday March 30th 2020

8AM - 8PM SHOW DAY

Mon-Wed 3/28-3/30 – SECURITY ONSITE ONLY

Onsite Contacts:

Josh Levine 310-424-8801 / Aldo Ramon 305-212-4047



2020-02-14

1206

1206 *Petition of Archival, request to hold
"Fireball Whisky Experience/Tiger's
Opening Day" at Harry's Detroit,
2482 Clifford on March 30, 2020 from
8:00 AM to 6:00 PM.*

REFERRED TO THE FOLLOWING DEPARTMENT(S)

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

45

MAYOR'S OFFICE COORDINATORS REPORT

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

Petition #: 1207 Event Name: Tiger's Opening Day Event - Dino Drop

Event Date : March 30, 2020

Street Closure: None

Organization Name: Dino Drop, Inc.

Street Address: 22740 Woodward Avenue Ferndale, MI 48220

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: Opening Day Party
- 24-Hour Liquor License**

Petition Communications (include date/time)

Dino Drop will host a private Tiger's Opening Day Party at the parking lot located at 401 - 405 Gratiot from 10:00am - 4:00pm.

**** 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 will Provide Special Attention; Contracted with Archangel Security to Provide Private Security Services
	DFD/EMS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pending Inspections
	DPW	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No 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"/>	Fencing & 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 & Generators
	Bus. License	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Vendors License & Liquor License Required
	Mayor's Office	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	All Necessary permits must be obtained prior to event. If permits are not obtained, departments can enforce closure of event.
	Municipal Parking	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Jurisdiction
	DDOT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Impact on Buses

MAYOR'S OFFICE

Signature: B. Kushier

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

1207 *Dino Drop Inc., request to hold "Tigers Opening Day Event - Dino Drop" at 401 - 405 Gratiot on March 30, 2020 from 10:00 AM to 4:00 PM.*

3/30/2020

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: Tigers Opening Day Event - Dino Drop

Event Location: 401-405 Gratiot Lot

Is this going to be an annual event? Yes No

Section 2- ORGANIZATION/APPLICANT INFORMATION

Organization Name: Dino Drop Inc.

Organization Mailing Address: 22740 Woodward Ave. Ferndale 48220

Business Phone: 248-591-3466 Business Website: _____

Applicant Name: Dean Bach

Business Phone: 248-591-3466 Cell Phone: 248-284-3029 Email: laurenkcurrier@gmail.com

Event On-Site Contact Person:

Name: Dean Bach

Business Phone: 248-591-3466 Cell Phone: 248-444-7970 Email: dino@dinoslounge.com

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>Opening Day Party</u> |

Projected Number of Attendees: 1,000

Please provide a brief description of your event:

A one day private Tigers Opening Day Tailgate event.

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

Begin Set-up Date : 3/29/20 Time: 10AM Complete Set-up Date: 3/30/20 Time: 10AM

Event Start Date: 3/30/20 Time: 10AM Event End Date: 3/30/20 Time: 4pm

Begin Tearing Down Date: 3/30/20 Complete Tear Down Date: 3/31/20

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

Just one day

Section 3- LOCATION/SITE INFORMATION

Location of Event: 401-405 Gratiot Parking Lot

Facilities to be used (circle): 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

Section 4- ENTERTAINMENT

Describe the entertainment for this year's event:

Flat Screen T.V's for watching the Tigers Game.

Will a sound system be used? Yes No

If yes, what type of sound system? EV SX200/300 Two Way Speaker

Section 5- SALES INFORMATION

Will there be advanced ticket sales? Yes No

If yes, please describe: Membership 100 person access wristbands

Will there be on-site ticket sales? Yes No

If yes, list price(s): probably not.

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: All Inclusive

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? local lots and/or public transportation

Section 6- PUBLIC SAFETY & PARKING INFORMATION

Name of Private Security Company: Archangel Security

Contact Person: Dale

Address: 15465 Rhoades Lane Phone: (810) 820-1635

City/State/Zip: Fenton MI 48430

Number of Private Security Personnel Hired Per Shift: 5

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)?

It will not. Will be in a private, fenced secured lot.

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 are no neighbors near our location.

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:

One generator will be used. Will be fueled by gasoline. Company supplying: PM Technologies 29395 Wau St. Wixom MI 48393

Name of vendor providing generators: Contact Person: Bob Thackeray, PM Technologies

Address: 29395 Wall St.

Phone: 800-419-5199

City/State/Zip: Wixom MI 48393

How Many?

Size/Height

Booth

Tents (enclosed on 3 sides)

12

10 - 20'x20'x15' height

1 - 20'x40'x15 height
1 - 20'x30'x15 height.

Canopy (open on all sides)

Staging/Scaffolding

Bleachers

(tables)

8' banquet tables - 20 6' banquet tables - 5 36" cocktail tables -

100

Section 9- COMPLETE ALL THAT APPLY

Emergency medical services?

Contact Person

Address:

City/State/Zip:

Name of company providing port-a-johns.

Parkway Services, Inc.

Contact Person:

parkwayservicesinc@yahoo.com

Address:

2876 Tyler Rd.

Phone:

734-482-7633

City/State/Zip:

Ypsilanti MI 48198

Name of private catering company?

Dino's Catering

Contact Person:

Dean Bach

Address:

22740 Woodward Ave

Phone:

(248) 591-3466

City/State/Zip:

Ferndale, MI 48220

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: _____

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.

Dean Bach 1/25/2020
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: TIGERS OPENING DAY Event
Date: 3/30/2020

Event Organizer: DEAN BACH

Applicant Signature: Dean Bach
Date: 1/25/2020



DINOLOU-01

KMCCANN

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
1/22/2020

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

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

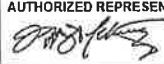
PRODUCER The Huttenlocher Group 1007 W. Huron Street Waterford, MI 48328	CONTACT NAME: Kathy McCann
	PHONE (A/C, No, Ext): (248) 203-1837 FAX (A/C, No):
	E-MAIL ADDRESS: kmccann@epi-ins.com
	INSURER(S) AFFORDING COVERAGE NAIC #
	INSURER A : Cincinnati Insurance Company 10677
	INSURER B : The Cincinnati Casualty Company 28665
	INSURER C : Accident Fund National Insurance Company 12305
	INSURER D :
	INSURER E :
	INSURER F :

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVO	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	X		EPP 0157454	8/28/2019	8/28/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Per occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:							
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY			EBA0157454	8/28/2019	8/28/2020	COMBINED SINGLE LIMIT (Per accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY						
A	UMBRELLA LIAB EXCESS LIAB			EPP 0157454	8/28/2019	8/28/2020	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
	DED <input checked="" type="checkbox"/> RETENTION \$ 0						
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in MI)		N/A	WCV6182053	2/5/2019	2/5/2020	PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Park Rite Inc. is named additional insured as regards general liability.

CERTIFICATE HOLDER Park Rite Inc. 1426 Times Square Detroit, MI 48226	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE 

Parkway Services, Inc.

We're There
When You Gotta Go



Portable Toilets & Septic Service
2876 Tyler Road
Ypsilanti, MI 48198

Ph: 734-482-7633

Fax: 734-482-7632

Service Address
Monroe Parking Lot Tigers Opening Day 401 Gratiot Ave DETROIT, MI 48226

Billing Address
Dino's Lounge Atten:Accts.Payable 22740 Woodward Ave. FERNDAL, MI 48220

Phone: (248) 591-3466

Contact: Patrick Vincent

Phone: (248) 444-7970

Contact: Dean Bach

Order #: 106546 - 0

106546 01

Site #	Cust #	Sched Date	Day	Time	Clerk	Req Date	Route	P.O.#	Terms	Sales Source/Cred	Mrkt/Tier
20146	DINOLOUN	Mar 29, 20	Sun	00:00:00	ST	Mar 29, 20	1		COD	/	SP/

ORDER CONFIRMATION - Ord# 106546

Driver=DH Route=1 Stop=0 Truck=___ Trailer=___

SN# =

Page 1 / 1

Invoice Note: Deliver 13 hand sanitizer units
for Opening Day March 30, 2020
Del.Sun/Pickup Tues
Total: \$1300.00
Ordered by Lauren on 1-27-20

Units: PTZ 13

Existing Units:

Serial# _____

Message	**Sign White office copy below & return to us.** Email to: parkwayservicesinc@yahoo.com
Map:	Lat = 42.3361183 Long = -83.0445275
Directions:	Gratiot Ave./Brush St. *Monroe parking lot*
Driver Notes:	13 ptz call upon arrival Patrick or Lauren Currier 248-284-3029

Customer Signature: _____ Print Name: _____ Driver: _____ Date: _____



2020-02-14

1207

1207 *Petition of Dino Drop Inc., request to hold "Tigers Opening Day Event - Dino Drop" at 401 - 405 Gratiot on March 30, 2020 from 10:00 AM to 4:00 PM.*

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

46

MAYOR'S OFFICE COORDINATORS REPORT

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

Petition #: 1208 Event Name: Jacoby's Tent Event

Event Date : March 17 & March 26, 2020

Street Closure: None

Organization Name: 1904 Enterprise, LLC

Street Address: 624 Brush Street Detroit, MI 48226

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

Event Elements (check all that apply):

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

Petition Communications (include date/time)

Jacoby's will erect a 40x40 tent at 600 Brush Street to host additional attendees from 9:00am - 10:00pm both event dates.

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

Date	Department	N/A	APPROVED	DENIED	Additional Comments
	DPD	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	DPD will Provide Special Attention; Contracted with Common Industries to Provide Private Security Services
	DFD/EMS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pending Inspections
	DPW	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No 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"/>	Fencing & 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 & Generator
	Bus. License	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Vendors License & Liquor License Required
	Mayor's Office	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	All Necessary permits must be obtained prior to event. If permits are not obtained, departments can enforce closure of event.
	Municipal Parking	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Jurisdiction
	DDOT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Impact on Buses

MAYOR'S OFFICE

Signature: 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
BUSINESS LICENSE CENTER PLANNING AND DEVELOPMENT DEPARTMENT
TRANSPORTATION DEPARTMENT MUNICIPAL PARKING DEPARTMENT

1208 *1904 Enterprise LLC, request to hold "Jacoby's Tent Event" at 600 Brush Street on March 17 and 26, 2020 from 9:00 AM to 10:00 PM on each day.*

3/17 and 3/26/2020

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: Jacobys Tent Event

Event Location: 600 Brush St. Detroit MI 48226

Is this going to be an annual event? Yes No

Section 2- ORGANIZATION/APPLICANT INFORMATION

Organization Name: 1904 Enterprise LLC

Organization Mailing Address: 624 Brush St. Detroit MI 48226

Business Phone: (313) 962-7067 Business Website: Jacobysdetroit.com

Applicant Name: Adam Gilezan

Business Phone: (313) 962 7067 Cell Phone: (586) 601-6161 Email: adamg619@gmail.com

Event On-Site Contact Person:

Name: Adam Gilezan

Business Phone: (313) 962-7067 Cell Phone: (586) 601-6161 Email: adamg619@gmail.com

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>Event</u> |

Projected Number of Attendees: 100 people

Please provide a brief description of your event:

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

Begin Set-up Date: 3-17-20 Time: 6AM Complete Set-up Date: 3-17-20 Time: 9AM

Event Start Date: 3-17-20 Time: 9AM Event End Date: 3-17-20 Time: 10PM

Begin Tearing Down Date: 3-17-20 Complete Tear Down Date: 3-17-20

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

Also 3-26-20 with the same times as above.

Section 3- LOCATION/SITE INFORMATION

Location of Event:

Facilities to be used (Check) 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

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

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 & Amplifiers

Describe specific power needs for entertainment and/or music:

Power from the ~~the~~ building music & lighting

How many generators will be used? _____

How will the generators be fueled?

Name of vendor providing generators:

Contact Person:

Address:

N/A

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~~

\$10 per person

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:

Cammon industries LLC

Contact Person:

Jimmie Cammon

Address:

12094 Marlowe

Phone:

(313) 623-5135

City/State/Zip:

Detroit, MI 48227

Number of Private Security Personnel Hired Per Shift:

3

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

Licensed

Armed

Bonded

How will you advise attendees of parking options?

Pay Parking Lots around the area also street parking.

Section 7- COMMUNICATION & COMMUNITY IMPACT INFORMATION

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

It will be good for our surrounding businesses because we will be bringing more people in our area.

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

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

~~XXXXXXXXXX~~ Verbally and via event flyers

Section 8- EVENT SET-UP

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

	How Many?	Size/Height
Booth	0	
Tents (enclosed on 3 sides)	1	40 x 40 ft.
Canopy (open on all sides)	0	
Staging/Scaffolding	0	
Bleachers	0	

Section 9- COMPLETE ALL THAT APPLY

Emergency medical services?

Contact Person: _____

Address: _____

City/State/Zip: _____

Name of company providing port-a-johns. _____

Contact Person: Jay's (Katie)

Address: 2787 Greenwood Rd. Phone: (310) 214-4570

City/State/Zip: Lapeer MI 48446

Name of private catering company? _____

Contact Person: N/A

Address: _____ Phone: _____

City/State/Zip: _____

SPECIAL USE REQUESTS

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

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

STREET NAME: _____

FROM: _____ **TO:** _____

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

REOPEN DATE: _____ **TIME:** _____

STREET NAME: _____

FROM: _____ **TO:** _____

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

REOPEN DATE: _____ **TIME:** _____

STREET NAME: _____

FROM: _____ **TO:** _____

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

REOPEN DATE: _____ **TIME:** _____

STREET NAME: _____

FROM: _____ **TO:** _____

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

REOPEN DATE: _____ **TIME:** _____

STREET NAME: _____

FROM: _____ **TO:** _____

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

REOPEN DATE: _____ **TIME:** _____

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

- 1) **CERTIFICATE OF INSURANCE**
- 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.

[Handwritten Signature]

2-5-2020

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: Jacoby's Tent Event Event
Date: 3-17-20 / 3-26-20

Event Organizer: Adam Gilezan

Applicant Signature: *[Handwritten Signature]*
Date: 2-5-2020



S&R Event Rental
 22655 South Chrysler Dr, Hazel Park, MI 48030
 Phone: (248) 655-6020
 www.sreventrental.com | office@sreventrental.com

PROPOSAL

Bill To

Jacoby's
ADAM GILEZAN
 624 Brush Street
 Detroit, MI 48226
 Phone: () -
 Email: adamg619@hotmail.com

Deliver To

624 Brush Street
 Detroit, MI 48226

Contact Person

ADAM GILEZAN
 Phone: () -
 Cell Phone: (586)601-6161
 Email: adamg619@hotmail.com

Quote No: QSR1001

Quote Date: February 5, 2020

Written By: TF

Delivery: Tue, Mar 17, 2020 Early Morning

Event Starts: Tue, Mar 17, 2020 12:00 am

Event Ends: Tue, Mar 17, 2020 11:59 pm

Pick-up: Tue, Mar 17, 2020 After 10 pm

Delivery Method: Delivery

Additional Notes

Customer said the tent will be located in the parking lot next to his building. We have to use anchors, you can not stake down.

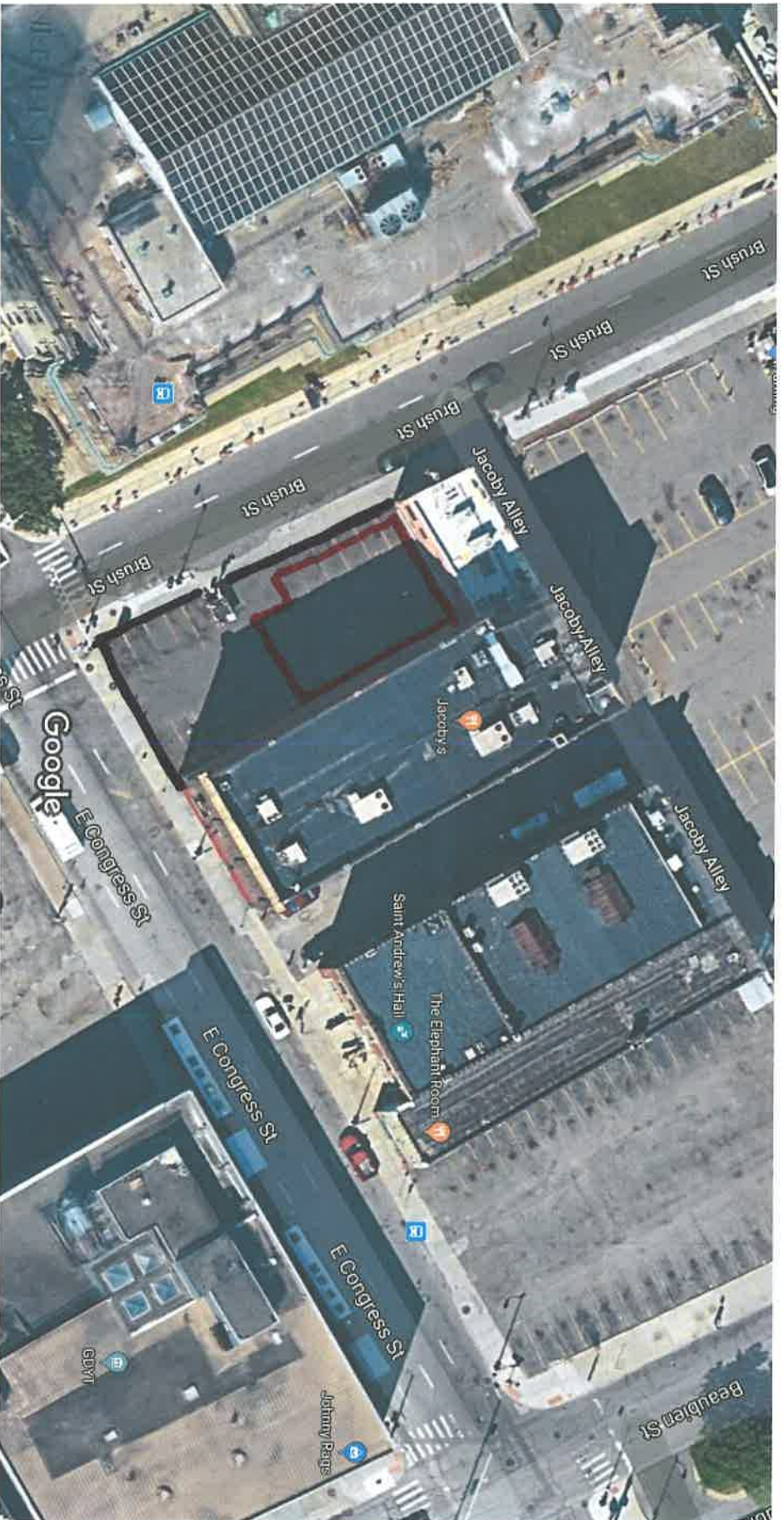
Qty	Description	Size	Unit Price	Bill. Days	Total
40 X 60 NAVI-TRAC WHITE FRAME TENT					
1	40 X 60 NAVI-TRAC WHITE FRAME TENT		\$1,550.00	1	\$1,550.00
HC HEATING AND COOLING					
120	Propane Per Gallon		\$2.75	1	\$330.00
SW SIDE WALL					
10	Tracking Wall 8' X 20' Whllte		\$25.00	1	\$250.00
AS ANCHOR SYSTEM					
10	Cement Blocks 1600 #		\$50.00	1	\$500.00
LC LABOR CHARGES					
1	Permit Fees Tbd Est. \$800 - \$1600		\$1,200.00	1	\$1,200.00
HC HEATING AND COOLING					
1	Heater Lb 350,000 Btu		\$425.00	1	\$425.00

Order Subtotal: \$4,255.00
Pick-Up Charge: \$400.00
Delivery Charge: \$400.00
Sales Tax (6%): \$183.30
CC Fee: \$157.15
TOTAL: \$5,395.45

Deposit Due: \$2,697.72

THIS IS A QUOTATION

1. Table and Chair pricing does not included setup. Additional fees required, call the office for a quote.
2. Events require a 50% deposit due at the time of scheduling. with remaining balance due at delivery.
3. Events scheduled with 6 days or less, prior to the event date need to make payment arrangements with the office, which may require payment in full at the time of scheduling.
4. Credit Card Payments are welcome, additional 3% processing fee will be applied to your total.
5. Customer Responsible for Calling "MISS DIG" #800-482-7171 2 Weeks Prior to Installation.
6. Customer Takes Full Responsibility For Any Structural Alterations After Installation.
7. The customer agrees to be responsible for and to pay the cost of any damage to the equipment rented from S&R/Ace. Customer agrees to pay such costs upon notification from S&R/Ace within five days of such notification.
8. An After hours emergency line is provided to you. In case of missing or damaged items. Please contact the office at 248.655.6020 and select option 5 to be forwarded to an emergency voicemail. No invoice will be credited for missing or damaged items that have not been reported prior to the start of the event or at the time damage incurs (if it is weather



Imagery ©2020 First Base Solutions, Maxar Technologies, Sanborn, U.S. Geological Survey, Map data ©2020 20 ft



LEASE AGREEMENT

APG PARKING INC, ALLOWES JACOBYS DETROIT TO USE THE FULL LOT LOCATED AT 600 BRUSH ST, DETROIT MI 48226 FOR BOTH ST. PATRICKS DAY TUESDAY MARCH 17 FOR THE COST OF 750\$ AND TIGERS OPENING DAY THURSDAY MARCH 27 FOR THE COST OF 850\$.

APG PARKING INC.

CEO: M, MALICK

CELL: (313) 407-1977

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MAYOR'S OFFICE COORDINATORS REPORT

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

Petition #: 1209 Event Name: 29th Annual St. Patrick's Day Celebration - Old Shillelagh

Event Date: March 14 & March 17, 2020

Street Closure: None

Organization Name: The Old Shillelagh, Inc.

Street Address: 348 Monroe Detroit, MI 48226

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

Event Elements (check all that apply):

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

Petition Communications (include date/time)

The Old Shillelagh will host their annual St. Patrick's Day celebration at 349 Monroe and the adjacent parking lot from 12:00pm - 2:00am and 6:00am - 2:00am on both dates respectively.

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

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

Date	Department	N/A	APPROVED	DENIED	Additional Comments
	TED	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fencing & 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, Staging, Generators and Heating
	Bus. License	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Vendors License & Liquor License Required
	Mayor's Office	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	All Necessary permits must be obtained prior to event. If permits are not obtained, departments can enforce closure of event.
	Municipal Parking	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Jurisdiction
	DDOT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Impact on Buses

MAYOR'S OFFICE

Signature: B. Juskie

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.

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

1209 *The Old Shillelagh, LLC, request to hold the "Old Shillelagh 29th Annual St. Patrick's Day Celebration" at 349 Monroe from March 14, 2020 to March 18, 2020 from 12:00 noon to 2:00 each day. Set up begins on 3/11/20 with complete tear down on 3/18/20.*

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

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

3/14/2020
3/17/2020

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: 29th Annual St. Patrick's Day Celebration - Old Shillelagh

Event Location: 349 Monroe

Is this going to be an annual event? Yes No

Section 2- ORGANIZATION/APPLICANT INFORMATION

Organization Name: The Old Shillelagh, LLC

Organization Mailing Address: 349 Monroe

Business Phone: 313-964-0009 Business Website: www.oldshillelagh.com

Applicant Name: Richelle Lewis

Business Phone: 313-964-0009 Cell Phone: 248-953-5811 Email: oldshillelagh@comcast.net

Event On-Site Contact Person:

Name: Monique Lazaros

Business Phone: 3139640009 Cell Phone: 248-953-5811 Email: oldshillelagh@comcast.net

Event Elements (check all that apply)

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

Projected Number of Attendees: 5000

Please provide a brief description of your event:

Two large heated tents with entertainment along with, food, alcoholic and non-alcoholic drinks.

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

Begin Set-up Date 03/11/2020 Time:4:00am Complete Set-up Date:3/13/2020 Time:5:00pm

Event Start Date:03/14/2020 Time:12:00pm Event End Date: 3/18/2020 Time:2:00am

Begin Tearing Down Date:03/18/2020 Complete Tear Down Date:03/18/2020

Event Times (If more than one day, give times for each day):
March 14, 2020 12:00pm to March 15, 2020 2:00am
March 17, 2020 6:00am to March 18, 2020 2:00am

Section 3- LOCATION/SITE INFORMATION

Location of Event: 349 Monroe Street, Detroit, MI 48226

Facilities to be used (Check) 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

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

Section 4- ENTERTAINMENT

Describe the entertainment for this year's event:

Bands performing Irish songs, covers and DJ's alternating.

Will a sound system be used? Yes No

If yes, what type of sound system? Audio System

Describe specific power needs for entertainment and/or music:

Amplified-augmented, sound increased to broaden range. No Generators will be used.

How many generators will be used? 0

How will the generators be fueled?
n/a

Name of vendor providing generators:

Contact Person: n/a

Address: n/a

Phone: n/a

City/State/Zip n/a

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:

Burgers, Hot Dogs, Nachos, French Fries, Shepards Pie, water, soda, beer and liquor.

Section 6- PUBLIC SAFETY & PARKING INFORMATION

Name of Private Security Company: Safe Provisions

Contact Person: Mitch Heard

Address: 2723 S. State Street, Ste 150

Phone: 734-657-5224

City/State/Zip:

Ann Arbor, MI 48104

Number of Private Security Personnel Hired Per Shift:

20-25

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

- Licensed
- Armed
- Bonded

How will you advise attendees of parking options?

Signs, social media and word of mouth.

Section 7- COMMUNICATION & COMMUNITY IMPACT INFORMATION

How will your event impact the surrounding community (i.e. pedestrian traffic, sound carryover, safety)?
Our neighbors look forward to our events annually.

Have local neighborhood groups/businesses approved your event?

Yes No

Indicate what steps you have or will take to notify them of your event:
Contact the following people

Ross (The well) 348-231-8191, Yanni (Exodus) 313-405 and Spiro (Baltimore and Pappy's) 313-971-3886

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)	See Attached	
Canopy (open on all sides)	See Attached	
Staging/Scaffolding	See Attached	
Bleachers		

Section 9- COMPLETE ALL THAT APPLY

Emergency medical services?

Contact Person: Hart EMS - Adam West 313-366-4278

Address: 1636 W Fort Street

City/State/Zip: Detroit, MI 48226

Name of company providing port-a-johns: Scotties Potties

Contact Person: Lori Proctor

Address: 27940 Wick Road

Phone: 734-421-1400

City/State/Zip: Romulus, MI 48174

Name of private catering company? n/a

Contact Person:

Address:

Phone:

City/State/Zip:

SPECIAL USE REQUESTS

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

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

STREET NAME: _____
FROM: _____ **TO:** _____
CLOSURE DATES: _____ **BEG TIME:** _____ **END TIME:** _____
REOPEN DATE: _____ **TIME:** _____

STREET NAME: _____
FROM: _____ **TO:** _____
CLOSURE DATES: _____ **BEG TIME:** _____ **END TIME:** _____
REOPEN DATE: _____ **TIME:** _____

STREET NAME: _____
FROM: _____ **TO:** _____
CLOSURE DATES: _____ **BEG TIME:** _____ **END TIME:** _____
REOPEN DATE: _____ **TIME:** _____

STREET NAME: _____
FROM: _____ **TO:** _____
CLOSURE DATES: _____ **BEG TIME:** _____ **END TIME:** _____
REOPEN DATE: _____ **TIME:** _____

STREET NAME: _____
FROM: _____ **TO:** _____
CLOSURE DATES: _____ **BEG TIME:** _____ **END TIME:** _____
REOPEN DATE: _____ **TIME:** _____

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

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

AUTHORIZATION & AFFADAVIT OF APPLICANT

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

Richelle Lewis
Notary Public for the State of Michigan
Exp. 11/11/2024

02/10/2020

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: 29th Annual St. Patrick's Day Celebration **Event**

Date: 03/14/2020

Event Organizer:
The Old Shillelagh, LLC

Richelle Lewis
Notary Public for the State of Michigan
Exp. 11/11/2024

Applicant Signature:

Date: 02/10/2020

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MAYOR'S OFFICE COORDINATORS REPORT

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

Petition #: 1210 Event Name: 11th Annual Marche du Nain Rouge

Event Date: March 22, 2020

Street Closure: Canfield & Second Street

Organization Name: Marche du Nain Rouge

Street Address: 34 West Bethune Detroit, MI

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

Event Elements (check all that apply):

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

Petition Communications (include date/time)

The 11th Annual Marche du Nain Rouge Parade will host their art presentation in Detroit's Historic Cass Corridor from 12:00pm - 3:00pm with a party located inside of the Masonic Temple immediately after until 8:00pm; with temporary street closures on Canfield, Second and Temple Street.

**** 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
	DFD/ EMS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pending Inspections; Contracted with Universal Macomb to Provide Private EMS Services
	DPW	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	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 & Detour 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"/>	Flame Permit Required for Fire Demonstration
	Bus. License	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Vendors License Required
	Mayor's Office	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	All Necessary permits must be obtained prior to event. If permits are not obtained, departments can enforce closure of event.
	Municipal Parking	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Parking Signs Required
	DDOT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Low Impact on Buses

MAYOR'S OFFICE

Signature: B. Jushier

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

1210 *Marche du Nain Rouge, request to hold the "11th Annual Marche du Nain Rouge" on Canfield, between Cass and Second and Second between Canfield and Temple on March 22, 2020 from 12:00 Noon to 8:00 PM with setup and teardown on the same day.*

3/22/2020

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: 11th Annual Marche du Nain Rouge

Event Location: Canfield, between Cass and Second; Second between Canfield and Temple; Temple

Is this going to be an annual event? Yes No

Section 2- ORGANIZATION/APPLICANT INFORMATION

Organization Name: Marche du Nain Rouge

Organization Mailing Address: 34 West Bethune

Business Phone: 313.717.4298

Business Website: www.marchedunainrouge.com

Applicant Name: Marche du Nain Rouge

Business Phone: 313.717.4298 Cell Phone: 313.717.4298 Email: marchedunainrouge@gmail.com

Event On-Site Contact Person:

Name: Francis Grunow

Business Phone: 313.717.4298 Cell Phone: 313.717.4298 Email: marchedunainrouge@gmail.com

Event Elements (check all that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> Walkathon | <input type="checkbox"/> Carnival/Circus | <input checked="" 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 checked="" 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>DFD Approved Flame</u> |

Projected Number of Attendees: 5,000-7,000

Please provide a brief description of your event:

The 11th Annual Marche du Nain Rouge is a community art parade and presentation in Detroit's Historic Cass Corridor. Thousands of participants come dressed in costume and become the parade, celebrating Spring and evoking Detroit's oldest legend, the Nain Rouge.

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

Begin Set-up Date 03/22/2020 Time: 8 a.m. Complete Set-up Date: 03/22/2020 Time: 11 a.m.

Event Start Date: 03/22/2020 Time: 12 p.m. Event End Date: 03/22/2020 Time: 8 p.m.

Begin Tearing Down Date: 03/22/2020 Complete Tear Down Date: 03/22/2020

Event Times (If more than one day, give times for each day):
Please note parade step off is targeted for 1:30 p.m.

Section 3- LOCATION/SITE INFORMATION

Location of Event: Canfield, Second, Temple, Cass Park, Masonic Temple

Facilities to be used (Check) 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

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

Section 4- ENTERTAINMENT

Describe the entertainment for this year's event:

There will be an hourlong Community Stage beginning at noon, with poetry, music, and approved flame

Will a sound system be used? Yes No

If yes, what type of sound system? Multiway Concert Sound

Describe specific power needs for entertainment and/or music:

10,000 Watt Max

How many generators will be used? One

How will the generators be fueled?
Diesel or Gas

Name of vendor providing generators:

Contact Person: Nick Enright (Lyve/Thunder)

Address: 4437 5th Street

Phone: 313.303.3438

City/State/Zip: Ecorse, MI 48229

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:

Merchandise - T-shirts, posters, coloring books, patches, stickers, etc.

Food - We do not have any food vendors at this time, but will direct any food vendors to submit license to City of Detroit

Section 6- PUBLIC SAFETY & PARKING INFORMATION

Name of Private Security Company: NA

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 website, social media, and earned media. Attendees are advised to use area parking and through a special deal with Wayne State University Parking

Section 7- COMMUNICATION & COMMUNITY IMPACT INFORMATION

How will your event impact the surrounding community (i.e. pedestrian traffic, sound carryover, safety)?
There is a 3-4 hour period where the Marche impacts the surrounding community. Streets are closed off and there is a loudspeaker at the beginning of the event. Thousands of costumed attendees fill the streets and sidewalks

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 work closely with Midtown Detroit, Inc., to disseminate information. Also businesses and residents are notified by word of mouth, flyers, emails, etc.

Section 8- EVENT SET-UP

Complete the appropriate categories that apply to the event Structure

	How Many?	Size/Height
Booth		
Tents (enclosed on 3 sides)	1-2	10x10
Canopy (open on all sides)		
Staging/Scaffolding	1	Mobile stage at beginning.
Bleachers		

Section 9- COMPLETE ALL THAT APPLY

Emergency medical services?

Contact Person: Universal Macomb

Address: 37583 Mound Road

City/State/Zip: Sterling Heights, MI 48310

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

Contact Person:

Address: PO Box 40387

Phone: 734.421.1400

City/State/Zip: Redford, MI 48240

Name of private catering company? NO

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: Canfield Street
FROM: Cass TO: Second (including intersection)

CLOSURE DATES: 3/22 BEG TIME: 10 a.m. - 5 END TIME:
REOPEN DATE: _____ TIME:

STREET NAME: Second Avenue
FROM: Prentis TO: Ledyard

CLOSURE DATES: 3/22 BEG TIME: 1:30 p.m. - 4 END TIME:
REOPEN DATE: _____ TIME:

STREET NAME: Temple
FROM: Cass TO: Second

CLOSURE DATES: 3/22 BEG TIME: 1:30 - 4 p.m. 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.

Francis Grunow
www.frg.com

01/20/2020

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: Marche du Nain Rouge **Event**
Date: 3/22/2020

Event Organizer:
Marche du Nain Rouge

Applicant Signature: 
Date: 01/20/2020

2020-02-14

1210

1210 *Petition of Marche du Nain Rouge, request to hold the "11th Annual Marche du Nain Rouge" on Canfield, between Cass and Second and Second between Canfield and Temple on March 22, 2020 from 12:00 Noon to 8:00 PM with setup and teardown on the same day.*

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

49

MAYOR'S OFFICE COORDINATORS REPORT

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

Petition #: 1211 Event Name: 43rd Annual St. Patrick's Irish Festival

Event Date: May 3, 2020

Street Closure: None

Organization Name: St. Patrick Senior Center, Inc.

Street Address: 58 Parsons Detroit, MI 48201

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 St. Patrick Senior Center will host their 43rd Annual Irish Festival at 58 Parsons the adjacent parking lot from 1:00pm - 8:00pm.

**** 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 will Provide Special Attention
	DFD/EMS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pending Inspections; St. Patricks Senior Center will Provide Personal EMS Onsite
	DPW	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	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"/>	Fencing 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 Tent, Staging & Generator
	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. Kushier

Date: 2-12-2020

Janice M. Winfrey
City Clerk

City of Detroit
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.

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

1211 *St. Patrick Senior Center, Inc., request to hold "43rd Annual St. Patrick Irish Festival" at 58 Parsons on May 3, 2020 from 1:00 pm to 8:00 pm with set up on 5/2/2020 and tear down completion on 5/3/2020.*

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: 43rd Annual St. Patrick Irish Festival

Event Location: 58 Parsons, Detroit, MI 48201

Is this going to be an annual event? Yes No

Section 2- ORGANIZATION/APPLICANT INFORMATION

Organization Name: St. Patrick Senior Center, Inc.

Organization Mailing Address: 58 Parsons, Detroit, MI 48201

Business Phone: 313-833-7080

Business Website: www.stpatsrctr.org

Applicant Name: SaTrice Coleman-Betts

Business Phone: 313-833-7080

Cell Phone: 313-690-7171

Email: src.betts@stpatsrctr.org

Event On-Site Contact Person:

Name: SaTrice Coleman-Betts/Vince Borowski

Business Phone: 313-833-7080

Cell Phone: 313-690-7171

Email: src.betts@stpatsrctr.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: 1000

Please provide a brief description of your event:

A special event hosted on St. Patrick Senior Center's business property to raise funds to support the 501c3 nonprofit senior center. The event has musical entertainment, raffles, children's games, and food. Volunteers and senior center staff man the one-day event that will be held from 1 pm - 8 pm.

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

Begin Set-up Date: 05/02/2020 Time: 9:00 AM Complete Set-up Date: 05/03/2020 Time: 1:00 PM

Event Start Date: 05/03/2020 Time: 1:00 PM Event End Date: 05/03/2020 Time: 08:00 PM

Begin Tearing Down Date: 05/03/2020 Complete Tear Down Date: 05/03/2020

Event Times (If more than one day, give times for each day):
May 3, 2020 1:00 M - 8:00 PM

Section 3- LOCATION/SITE INFORMATION

Location of Event: St. Patrick Senior Center, Inc., 58 Parsons, Detroit, MI 48201

Facilities to be used (Check) 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

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

Section 4- ENTERTAINMENT

Describe the entertainment for this year's event:

Irish musicians will provide entertainment on 2 floors in the building and a small entertainment area

Will a sound system be used? Yes No

If yes, what type of sound system? Acoustic audible, heard within natural range.

Describe specific power needs for entertainment and/or music:

Power will be provided from our facility outlets and a small generator will be used in the parking lot.

How many generators will be used? 1

How will the generators be fueled?
Gasoline

Name of vendor providing generators:

Contact Person: LA's Events & Design, LLC

Address: 29936 Orchard Lake Road

Phone: 313-743-1574

City/State/Zip Farmington Hills, MI 48336

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:

Arts and crafts prepared by senior members.

Section 6- PUBLIC SAFETY & PARKING INFORMATION

Name of Private Security Company: Detroit Police Reserves

Contact Person: Officer Hill

Address: 6300 Caniff

Phone: 313-596-2570

City/State/Zip:

Detroit, MI 48201

Number of Private Security Personnel Hired Per Shift:
4 per 2 shifts

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

Licensed Armed Bonded

How will you advise attendees of parking options?
Signs and advertised on promotional information.

Section 7- COMMUNICATION & COMMUNITY IMPACT INFORMATION

How will your event impact the surrounding community (i.e. pedestrian traffic, sound carryover, safety)?
 Minimal impact on neighborhood. All activities take place on the organization's property and parking facilities are donated by the Detroit Symphony Orchestra. Individuals will attend the event over a 7 hour period.

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

Indicate what steps you have or will take to notify them of your event:
 A meeting with the Detroit Symphony Orchestra's administration has taken place. A letter will be provided along with promotional information to the other businesses on the block. Two of the three other business will be closed the day of the event.

Section 8- EVENT SET-UP

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

	How Many?	Size/Height
Booth	N/A	
Tents (enclosed on 3 sides)	3	2-20x40 and 1-20x30
Canopy (open on all sides)	3	1-10x10 and 2-10x20
Staging/Scaffolding	1	Entertainment platform approximately 12" in
Bleachers	N/A	

Section 9- COMPLETE ALL THAT APPLY

Emergency medical services?

Contact Person: Lisa Saigh, R.N.

Address: 58 Parsons

City/State/Zip: Detroit, MI 48201

Name of company providing port-a-johns: Parkway Portable Toilets

Contact Person: Kathy Mular

Address: 2876 Tyler Road

Phone: 734-482-7633

City/State/Zip: Ypsilanti, MI 48198

Name of private catering company? N/A

Contact Person:

Address:

Phone:

City/State/Zip:

SPECIAL USE REQUESTS

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

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

STREET NAME: N/A

FROM: _____ **TO:** _____

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

REOPEN DATE: _____ **TIME:** _____

STREET NAME: N/A

FROM: _____ **TO:** _____

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

REOPEN DATE: _____ **TIME:** _____

STREET NAME: N/A

FROM: _____ **TO:** _____

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

REOPEN DATE: _____ **TIME:** _____

STREET NAME: N/A

FROM: _____ **TO:** _____

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

REOPEN DATE: _____ **TIME:** _____

STREET NAME: N/A

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 & AFFIDAVIT OF APPLICANT

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

Antwain Coleman-Betts

1/6/2020

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: 43rd Annual St. Patrick Irish Festival

Event

Date: May 3, 2020

Event Organizer:

St. Patrick Senior Center

Applicant Signature:

Date:

Antwain Coleman-Betts
1/6/2020

Parkway Services, Inc.

**We're There
When You Gotta Go**



Portable Toilets & Septic Service
2876 Tyler Road
Ypsilanti, MI 48198

Ph: 734-482-7633

Fax: 734-482-7632

Service Address
ST. PATRICKS Festival Senior Center 58 PARSONS DETROIT, MI 48201

Billing Address
St. Patricks Atten: Accts. Payable 58 Parsons DETROIT, MI 48201

Phone: (313) 833-7080

Contact: Vince Borowski

Phone: (313) 833-7080

Contact: Satrice Coleman-Betts

Order #: 106283 - 0

Site #	Cust #	Sched Date	Day	Time	Clerk	Req Date	Route	P.O.#	Terms	Sales Source/Cred	Mrkt/Tier
14750	STPATRICKS	May 01, 20	Fri	00:00:00	KM	May 1, 20	8		COD	CI/KM	SP/

ORDER CONFIRMATION - Ord# 106283

Driver=AN Route=8 Stop=1 Truck=___ Trailer=___

SN# =

Page 1 / 1

Invoice Note: SPECIAL EVENTS UNITS for Sunday May 3, 2020
2 standard units w/ hand sanitizer inside @ \$90 each
Deliver Friday/Pick up Monday
Total: \$180.00
Ordered by Satrice 12-30-19

Units: PTZ 2

Existing Units:

Serial# _____

Message: **Sign White office copy below & return to us.**
Email to: parkwayservicesinc@yahoo.com

Map: Lat = 42.34822 Long = -83.0595

Directions: between Woodward & Cass by Max Fisher Music Center and Wayne State

Driver Notes: 2 ptz
Contact Satrice 313-833-7080

106283 01

Customer Signature: *Satrice Coleman-Betts* Print Name: Satrice Coleman-Betts Driver: _____ Date: 1/3/19

Customer Billing Information:

Customer Name: St. Patrick's Senior Center
 Address: 38 persons street
 City: Detroit
 State: MI Zip: 48201
 Contact Name: _____
 Phone: 313-833-7080 Fax: _____
 Email: mr.betts@outlook.com

Service Location Information:


Location Name: St. Patrick's Senior Center
 Address: 38 persons street
 City: Detroit
 State: MI Zip: 48201
 Contact on site: Michael Phone: 313-833-7080
 Cross Street: Betts 313-505-6766

Commercial Front Load Services


CHECK: 
2 Yard FLAT TOP Container
 Monthly Rate: _____
 We need (qty.) _____ container(s)
 Pickups/week: _____


CHECK: 
4 Yard FLAT TOP Container
 Monthly Rate: _____
 We need (qty.) _____ container(s)
 Pickups/week: _____

CHECK: 
6 Yard FLAT TOP Container
 Monthly Rate: _____
 We need (qty.) _____ container(s)
 Pickups/week: _____

CHECK: 
6 Yard SLANT TOP Container
 Monthly Rate: 135.00
 We need (qty.) 1 container(s)
 Pickups/week: 2x

CHECK: 
8 Yard FLAT TOP Container
 Monthly Rate: _____
 We need (qty.) _____ container(s)
 Pickups/week: _____

CHECK: 
8 Yard SLANT TOP Container
 Monthly Rate: _____
 We need (qty.) _____ container(s)
 Pickups/week: _____

CHECK: 
Front Load Recycling Container
 Front Load can size: 2 Yards
 Type: Flat Slant
 Monthly Rate: 50.00
 We need (qty.) 1 container(s)
 Pickups/week: 1x
 Paper & Cardboard only Single Stream

Check box for requested container


Container Push/Pull Out: Yes No
 Container behind Gate or Enclosure: Yes No
 24 Hour Access: Yes No

CHECK: 
Verti-Pak Front Load
 Size of Verti-Pak: _____ Yards
 Monthly Rate: _____
 We need (qty.) _____ container(s)
 Pickups/week: _____

Payment:

Type of Payment: Rizzo Account Check Credit Card
 Checking Account #: _____
 Routing #: _____ Bank: _____
 Card Type: Visa MasterCard American Express
 Card #: _____
 Sec. Code: _____ Exp. Date: _____

Roll-Off Dumpsters

CHECK: 
Roll Off Dumpster _____ per pull
 up to the below tonnage limits.
 10 yard - _____ tons 20 yard - _____ tons
 30 yard - _____ tons 40 yard - _____ tons
 _____ per ton over tonnage limit.

Check Usage: Perm. Temp. Seasonal/Contractor Trash (which apply)
 Recycling Construction Clean Care

Service Change

Container Size	Qty.	Monthly Charge	Extra Pickup Fee	Delivery Charge

From: _____
 To: Fed ID 29 38-2953534

SPECIAL INSTRUCTIONS

* prefers Monday & Thursday pickups
* NO extra monthly surcharges
* Price firm 24 months and third year max, increase is 7%.
* place in alley, behind building

Schedule of Charges

- Casters _____
- Lock Bar 100.00
- Delivery Charge 50.00
- Removal Charge _____
- Trip Fee/Extra Dump _____
- Clean Concrete - 20yd _____
 If concrete or recycling loads are contaminated cost is _____ per ton
- Demurrage Wait Time _____ /hr.
- Overage/Overflow _____ /yd.
- Inactivity Fee per month _____
 minimum # of hauls charge/month
- Daily can rental for open top roll-offs - over 10 days a rate of _____ per day may apply.
- _____ haul for all sizes and _____ per ton (min tonnage is _____ tons for all sizes) applies unless rates are filled in the roll off section.

NOTE: All recycling loads for compactor and roll off loads will not be charged a "per ton fee" unless loads are contaminated.

TERMS: NET 10 DAYS

By executing this agreement, Customer agrees it has read and reviewed and agrees to be fully bound by the Service Agreement Terms which are available at RizzoServices.com/ServiceAgreementTerms.asp - which terms and conditions may be updated from time-to-time. Such terms and conditions shall be fully incorporated into and made a part of this Service Agreement.

Date of Agreement: 10/10/16 Effective Service Date: 10/18/16

By: (Signature) Antoine Hernandez
 Name: (Please Print) Antoine Hernandez Title: retiree

Send to: Rizzo Environmental Services
 6200 Elmridge Dr., Sterling Heights, MI 48313 - or FAX to: 877-655-2367
RizzoServices.com CUSTOMER SERVICE: 888-877-4996 press 1

GFL Environmental

26999 Central Park Blvd

Suite 200

Southfield MI 48076-4145

844 464 3507

8040

(0001) ST PATRICK SENIOR CENTER
58 PARSONS STREET, DETROIT MI 48201

Serv #002 ROLLOFF WASTE TEMP 0 - 20YD

20 - Jun Roll Off - Delivery W.O# 294905

REFERENCE
MIKE

RATE
\$425.000

QTY.
1.00

AMOUNT
\$425.00

QB
7/9/19
L22
SCB

CURRENT \$ 425.00	31 - 60 DAYS \$ 0.00	61 - 90 DAYS \$ 0.00	OVER 90 DAYS \$ 0.00	ACCOUNT TOTAL \$ 425.00
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INVOICE TOTAL \$425.00

CUSTOMER NO. 357185

INVOICE NO. 0003222604

425.00

PAYMENT
RECORD

1787



425.00



St. Patrick Senior Center Special Event Emergency Plan

St. Patrick Senior Center does not have a contracted Emergency Medical Agreement. St. Patrick Senior Center has medical personnel on staff. These medical staff will be on staff during the event to handle emergency and emergency medical issues. During the event St. Patrick Senior Center will have 1 Registered Nurse for 8 hours, 1 Registered Nurse for 4 hours, a Certified Nursing Assistant who has Emergency Medical Technician and Life Support certification, and a volunteer. Emergency Medical Technician on-site. St. Patrick Senior Center has an Emergency Action Plan that covers major disasters that will be used when deemed necessary during the event.

Security will be provided by the Detroit Police Reserves and 8 Police Reserves will be onsite and will be split into 2 shifts with 4 Reserves per shift.

St. Patrick Senior Center Special Event Emergency Plan

St. Patrick Senior Center has always had an Emergency Action Plan in place which will be followed during special events to protect individuals from serious injury, property loss, or loss of life, in the event of an actual or potential major disaster. A major disaster may include, but is not limited to any of the following: fire, tornado, earthquake, bomb threat, or hazardous chemical spill. In the event of a major disaster, this Emergency Action Plan describes the initial responsibilities and actions to be taken to protect all until the appropriate responders take over.

For the protection of employees, an Emergency Action Plan is a requirement of OSHA 1910.38. It is also necessary and prudent for the protection of our employees, clients, and visitors. The employer will review with each employee those parts of the plan that the employee must know to protect themselves and others in the event of an emergency. In addition, the written plan shall be made available for employees to review and plan for their evacuation.

GENERAL PROCEDURES

It is impossible to provide specific information for all situations. There is no guarantee implied by this Plan that a perfect response to disaster emergency incidents will be practical or possible. Therefore, this plan is a guide for employees to familiarize themselves with basic emergency planning, response and evaluation.

- A. Call 911 immediately if the injury is life threatening. Provide the following information:
 - 1. Nature of medical emergency.
 - 2. Location of the emergency.
 - 3. Your name and phone number from which you are calling.
- B. Do not move victim unless absolutely necessary.
- C. Call the following personnel trained in CPR and First Aid to provide the required assistance prior to the arrival of the professional medical help:
 - 1. Lisa Saigh, R. N. 313-833-7080
 - 2. Monica Barbelito, Medical Assistant
 - 3. Francine Dorn, R.N. Phone: 313-833-7080
 - 4. College Nursing students
- D. First Aid Kits are located on-site and the First Aid Emergency Stations.
- E. The Defibrillator will be located at the First Aid Station.

- F. If personnel trained in First Aid are not available, then minimally attempt to provide the following assistance:
1. Stop the bleeding with firm pressure on the wounds (note: avoid contact with blood or other bodily fluids).
 2. Clear the air passages using the Heimlich Maneuver (abdominal thrusts or chest compressions) in case of choking.
- G. In case of rendering assistance to personnel exposed to hazardous materials, consult the MSDS and wear the appropriate personal protective equipment. Attempt first aid **ONLY** if trained and qualified. Call 911 and refer to Hazardous Substance Spill section of the Emergency Action Plan document.

1/6/20

ALLEY

Secured by walls & fencing for the entire length*

4' Gate

250'

Secured by walls & fencing for the entire length*

170'

Orchestra Towers

Protective Tables
Grill
Protective Tables

20' x 30'
Kid Carnival Tent

10' x 40'
Foot Tent 4 & 5
Propane fryers
Protective Tables

Tables & chairs for dining
Garbage
Receptacles
Generator

St. Patrick Church

Food Tent
10 x 10

Bar
10 x 10

Elevator

Fire Escape

Fire Escape

Fire Escape

Gate to Sidewalk

Kids Bouncer

20' x 30'
Music Tent

20' x 40'
Food tent

First Aid Station

Entire building
accessible to people

St. Patrick Senior Center Inc.
58 Parsons, Detroit, MI
48201
Tel: 313-833-7080

Food Ticket Area

Driveway

Lawn Area

LAWN

LAWN

Entrance Only

Sidewalk

Sidewalk

Emergency
Exit Only

Sidewalk for entire length

PARSONS ST

Curb Cut 15'

Entrance

Legend

- Plastic 4'
- ☒ Snow Fence
- ☒ Porta-John with hand sanitizer
- Dining Area
- Ⓟ Power
- ♻️ Garbage
- Ⓜ️ Receptacles
- Ⓜ️ Generator
- * See Addendum for detail

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St Patrick Senior Center 43rd Annual Festival – Festival Date May 3, 2020
Detail and Description for Securing the Exterior Site
Addendum to MLLC Special License Application (January, 2020)

For its Annual Festival on May, 3, 2020, St Patrick Senior Center will have one bar area in the exterior of its property. The exterior bar will be entirely contained within a 10'x10' tent that is situated against the rear of the Senior Center building on one side. The other 3 sides of the tent will be open with tables set up under the tent line restricting access to consumers.

The exterior Festival space will be primarily at the western end of the property. Access to the property will be restricted and controlled with a managed entry on the paved driveway with fencing controlling access to the balance of the exterior. The exterior entrance to the Festival is at the southwest corner of the Senior Center building and is 40ft. from the Parsons Street sidewalk. The entrance will be staffed by a minimum of 2 adults who will sell entrance tickets to the Festival. This entry will be blocked and controlled by tables where the staff will sit. This is also a location that will be a Police Reserve location. The only other entry to the Festival is through the main doors of the Senior Center building which are immediately to the east of the exterior entry and readily controlled by the Police Reserve location.

The Parsons Street exterior line of property containment will continue from the exterior Festival entry and consist of a 4-foot-high plastic snow fence along the driveway towards Parsons Street and then continue west 130 feet along Parsons Street where it connects to the western property line. The fencing will be placed within the Senior Center property line, appropriately supported and will not impinge upon or restrict the public sidewalk along Parsons Street.

The western property line is fenced in its entirety of 170 ft. with an existing hard barrier which provides security and controls access through feature which include brick wall, an apartment building, chain link fence and cement block wall commencing at the Parsons Street property line north as follows:

- 5 ft. long brick wall 4 ft. high,
- 30 ft long brick wall 6 ft. high,
- 30 ft. long brick wall 7 ft. high,
- 40 ft. long 8 story building at the property line,
- 20 ft. long chain link fence 8 ft. high,
- 45 ft long concrete block wall to the rear property line 5 ft. high.

At the rear of the western boundary the concrete block wall continues east along the entire rear of the property (250 feet) where it meets the existing, permanently closed St Patrick Church building. The rear wall at the western end is 5 ft. high for 100 ft. and 6 ft. high for the 150 ft. remainder of its course except for a 4 ft. wide steel gate which provides access to the alley.

The Senior Center and the Church prevent any access to the eastern rear of the Senior Center property except for a 7 ft. high steel gate which is secured and padlocked.



INVOICE

Invoice# INV-15694

Bill To
St. Patrick Senior Center Eddie Powell 58 Parsons Detroit, MI 48201 (313) 833-7080 May 3, 2020 Set up @ 8:00 am

Date	Terms	Due Date
December 30, 2019	Custom	May 03, 2020

Item	Description	Qty	Rate	Amount
Generator (7500 watt)	Generator (7500 watt + 1 can of gas)	1.00	100.00	100.00
Obstacle Course	Monster Obstacle Course (35 - 65')	1.00	275.00	275.00
Giant Slide	Giant Slide	1.00	250.00	250.00
Bouncer Stakes	Inflatable Bouncer Stakes 4' Galvanized Stakes	12.00	0.001	0.01
Setup and Breakdown	Setup & Breakdown	1.00	25.00	25.00

Thank you for choosing DFR Luxx Events & Design
 Make Check Payable: Detroit's Finest Rentals

Orders under \$75.00 can be paid in cash at delivery. (Management approval is required)
 All debit/credit orders will incur a .5% upcharge under \$1000.00
 All deposits and final payments can be paid in cash at our office at the required times,
 Corporate Checks Only- Make payable to Detroit's Finest Rentals (allow clearing time).
 Make Checks payable "Detroit's Finest Rentals" (allow 5 day clearing time)
 All orders must be paid in advance unless otherwise approved by management.
 Checks must be submitted (7-10) before the event, no exceptions.

Sub Total	650.01
Delivery and pickup	40.00
Total	\$690.01
Balance Due	\$690.01

Terms & Conditions



BIG TOP PARTY RENTALS
 5749 Beebe ave
 Warren, MI 48092 US
 (586) 759-1600
 bigtopneverstops@gmail.com

Estimate

ADDRESS

Crystal Staffney
 St. Patrick Senior Centwer
 3134349630

ESTIMATE #	DATE
1534	12/30/2019

EVENT DATE

05/30/20

ACTIVITY	QTY	RATE	AMOUNT
10'x10' Frame tent	2	175.00	350.00
10' x 20' Frame tent	2	250.00	500.00
20' x 30' Stakedown tent	1	225.00	225.00
20' x 40' Stakedown tent	2	300.00	600.00
Sidewalls with windows \$1.25 per foot	2	25.00	50.00
120' sidewalls	6	30.00	180.00
Barrels	16	12.00	192.00
Stage 4 x8	4	50.00	200.00
Skirting	4	15.00	60.00
8' Banquet tables	50	8.00	400.00
Chairs	150	1.25	187.50
Delivery	1	200.00	200.00

Thank you for your order

TOTAL

\$3,144.50

Accepted By

Accepted Date



St. Patrick Senior Center, Inc.

58 Parsons St., Detroit, MI 48201-2202

Tel: 313-833-7080 ♣ Fax: 313-833-0128

www.stpatsrctr.org

E-mail: info@stpatsrctr.org

Sharing, Caring and Loving the Elders We Serve Since 1973

January 2, 2019

Officer Hill
6300 Caniff
Hamtramck, MI 48212

Dear Officer Hill:

We would like to request that the Detroit Police Reserves assist us again this year for our St. Patrick Senior Center Irish Festival on Sunday, May 3, 2019. Below are the details of the event.

- What:** St. Patrick Senior Center Spring Irish Festival
- When:** Sunday, May 3, 2019 from 12:00 PM to 8:00 PM
- Where:** 58 Parsons, Detroit, Michigan 48201
- Officers Needed:** 8 Officers with 4 working between 12:00 PM to 4:00 PM and 4 working between 4:00 PM to 8:30 PM.
- Officers Duties:** 2 posted at Finance office and 2 patrolling inside and outside the building.

The officers will be provided with a complimentary lunch/dinner including entrée and beverage.

Thank you for your consideration of our request. If you have any questions, please contact myself SaTrice Coleman-Betts or Eddie Powell. Our email and phone numbers are (313) 833-7080, e.powell@stpatsrctr.org, or src.betts@stpatsrctr.org.

Sincerely,

SaTrice Coleman-Betts
Executive Director

BOARD OF DIRECTORS

Executive Committee: John K. Bentley, *Chairperson* ❖ Patricia Rencher, *Vice Chairperson* ❖ Sandra A. Coleman, *Secretary* ❖ Patrick O'Hara, *Treasurer*
SaTrice Coleman-Betts, *Executive Director* ❖ **Directors:** Carolyn Hill Collins ❖ Nona Harris ❖ Frank Crawford ❖
Faith Hopp, MSW, Ph.D. ❖ Barbara McKeand-Stevenson ❖ Donna McAlister
❖ Rose Parker ❖ Jimmy Roberts ❖ Patricia Battersby, *Legal Counsel*

**ST. PATRICK SENIOR CENTER
58 Parsons, Detroit, MI 48202**

MINUTES OF BOARD OF DIRECTORS ANNUAL MEETING

Date: 26 February 2019

Call to Order: John Bentley, Chair called the meeting of the St. Patrick Senior Center Board of Directors to order at 6:15 PM. The meeting was held at 58 Parsons in Detroit.

Roll Call: *Present:* J. Bentley, P. Rencher, S. Coleman, P. O'Hara, S. Coleman-Betts, F. Crawford, F. Hopp, B. Johnson, D. McAlister, J. Roberts, B. Stevenson. *Absent with Notification:* R. Parker, S. McWhorter. *Absent without Notification:* I. Costello, M. Harning. *Nominee:* Carolyn Collins

Meeting Notice: Notice of the Board of Directors Meeting was duly given; 12 February meeting rescheduled due to weather.

Meeting Quorum and Agenda: A quorum was present at the start of the meeting. It was moved to adopt the Agenda with flexibility.

Acceptance of Minutes: Minutes for 13 November 2018 were accepted as presented.

Correspondence: Received request to purchase ad for the 2019 Festival [\$275 full page color]

Reports:

- 1. Nominating Committee:** J. Roberts Nominating Committee Chair summarized the Committee's process. Persons submitted for potential Board service were contacted to determine interest. One candidate Carolyn Collins expressed interest and submitted the Board Member Interest form. Joseph Vassallo expressed interest in serving on a committee but not on the Board. Board members with terms expiring in 2019 were contacted, sent the Board Member Interest Form and asked to complete it. The forms of those submitting were reviewed and found qualified to be included on the Slate. The Nominating Committee submitted the Slate for Election of Directors listing the following names: John K. Bentley, Sandra A. Coleman, Carolyn Collins, Patricia Rencher, and Barbara Stevenson. **Election:** Ballots were casted and all persons nominated received more than 51% of the votes casted. J. Roberts moved to approve the ballot count.
- 2. Treasurer:** P. O'Hara distributed and reviewed the Profit & Loss Budget vs. actual report for the period covering January – December 2018 and the Profit & Loss Budget Overview for January through December 2019. The Audit for year ending 2017 was distributed and reviewed. St. Patrick Senior again received an Unqualified audit. The Center is doing very well.
- 3. Executive Director:** (1) Lori Leonard is now an employee of SPSC as of 3/1. Anika Kanaris is now on board in the Health and Wellness program. LaFonda Johnson who had been the Operations Assistance resigned and has been replaced by Valerie Lott-Paramore. (2) Making progress on using the MySenior Center tracking application to collect data and produce grant reports. With the hiring of Lori Leonard and use of MySenior Center, should not be a need to replace Wendy Markus. (3) Has hired Crystal Staffney to fill position of Partnership-Resource Director, will start in April. (4) Rocket Fiber has installed the new phone system; everyone is working to master the operation and capabilities of the system. (5) Designed and implemented a program called "Passport to Good Health" collaborating with MSU, WSU, and Madonna. DAAA funded for \$500,000 over 2 years to implement the program. Executive Director is working to see how much of the grant SPSC will received of the three agencies involved [NSO, SPSC, and DAA]. (6) Working on 2019 Festival and Strides for Seniors. (7) Hayward Penny is consulting part-time on the nutrition program. Barbara Stevenson moved to accept the report. J. Roberts would like Executive

Director to consider having a meeting with new staff to meet them. The motion to accept the report was carried.

4. A written Fund Development report was presented by P. Rencher. (1) Strides for Senior 20 September. (2) Working on (a) a volunteer/supporter plan; (b) Crowdfunding Campaign for April and May via GoFundMe; (c) Annual Report with target date in April; (d) additional program to increase awareness of Center including social media and videos. (e) SPSC book fair 23 April featuring authors belonging to SPSC. B. Stevenson advised Committee needs more members. J. Roberts moved to accept report.
5. **Governance Committee: (a) MOTION:** Sandra A. Coleman moved to authorize the Executive Director to apply for grants and accept grant awards on behalf of the SPSC. In order to be in compliance with certain grant applications and licensing requests that the following language be adopted: That the Chairman, the Executive Director, the President, the Vice President, the Treasurer and the Secretary and each of them, hereby is authorized to execute and deliver, in the name and on behalf of the Company and under its corporate seal or otherwise, any agreement or other instrument or document in connection with any matter of transaction that shall have been duly approved; the execution and delivery of any agreement, document, or other instrument by any such officers to be conclusive evidence of such approval. The Motion was seconded and carried.
(b) MOTION: Sandra A. Coleman moved that the Executive Director be authorized to operate and control St Patrick Senior Center and its employees, sign contracts of \$10,000 or less without consent of the Board of Directors and apply for liquor licenses. The Motion was seconded and carried by the Board of Directors.
6. **For the Good of the Order:** J. Bentley announced the death and memorial service for Charlie Taylor, a long-time support of SPSC and Funder of the Fraternal Order of United Irishman. He emailed notice to all Board Members.
7. S. Coleman collected Board Benevolent Fund contributions from: S. Coleman, P. O'Hara, C. Collins, F. Hopp, B. Johnson, J. Roberts. 2019 Dues collected from: P. O'Hara, C. Collins*, F. Hopp* [*under 60]

The meeting was adjourned at 8:05pm.

Sandra A. Coleman. Recording Secretary

Approved: 9 April 2019



St. Patrick Senior Center, Inc.

58 Parsons St., Detroit, MI 48201-2202

Tel: 313-833-7080 ♣ Fax: 313-833-0128

www.stpatsrctr.org

E-mail: info@stpatsrctr.org

Sharing, Caring and Loving the Elders We Serve Since 1973

January 6, 2019

Detroit Symphony Orchestra
3711 Woodward Ave.
Detroit, MI 48201

Dear Neighbors:

We would like to make you aware and invite you to attend our 43rd Annual Irish Festival. This has been a community event for over 43 years. Below are the details of the event.

What: St. Patrick Senior Center Spring Irish Festival
When: Sunday, May 3, 2019 from 12:00 PM to 8:00 PM
Where: 58 Parsons, Detroit, Michigan 48201

Thank you being wonderful neighbors. If you have any questions, please contact myself SaTrice Coleman-Betts or Eddie Powell. Our email and phone numbers are (313) 833-7080, e.powell@stpatsrctr.org, or src.betts@stpatsrctr.org.

Sincerely,

SaTrice Coleman-Betts
Executive Director

BOARD OF DIRECTORS

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St. Patrick Senior Center, Inc.

58 Parsons St., Detroit, MI 48201-2202

Tel: 313-833-7080 ♣ Fax: 313-833-0128

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E-mail: info@stpatsrctr.org

Sharing, Caring and Loving the Elders We Serve Since 1973

January 6, 2019

Orchestra Towers
3711 Woodward Ave.
Detroit, MI 48201

Dear Neighbors:

We would like to make you aware and invite you to attend our 43rd Annual Irish Festival. This has been a community event for over 43 years. Below are the details of the event.

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SaTrice Coleman-Betts
Executive Director

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♦ Rose Parker ♦ Jimmy Roberts ♦ Patricia Battersby, *Legal Counsel*



St. Patrick Senior Center, Inc.

58 Parsons St., Detroit, MI 48201-2202

Tel: 313-833-7080 ♣ Fax: 313-833-0128

www.stpatsrctr.org

E-mail: info@stpatsrctr.org

Sharing, Caring and Loving the Elders We Serve Since 1973

January 6, 2019

Advance Plumbing
150 Parsons
Detroit, MI 48201

Dear Neighbors:

We would like to make you aware and invite you to attend our 43rd Annual Irish Festival. This has been a community event for over 43 years. Below are the details of the event.

What: St. Patrick Senior Center Spring Irish Festival
When: Sunday, May 3, 2019 from 12:00 PM to 8:00 PM
Where: 58 Parsons, Detroit, Michigan 48201

Thank you being wonderful neighbors. If you have any questions, please contact myself SaTrice Coleman-Betts or Eddie Powell. Our email and phone numbers are (313) 833-7080, e.powell@stpatsrctr.org, or src.betts@stpatsrctr.org.

Sincerely,

SaTrice Coleman-Betts
Executive Director

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❖ Rose Parker ❖ Jimmy Roberts ❖ Patricia Battersby, *Legal Counsel*

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: **MAY 19 2013**

ST PATRICK SENIOR CENTER INC
58 PARSONS
DETROIT, MI 48201-2002

Employer Identification Number:
38-2953534
DLN:
17053004377042
Contact Person:
MICHELLE A GLUTZ ID# 31213
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990 Required:
Yes
Effective Date of Exemption:
January 1, 2013
Contribution Deductibility:
Yes
Addendum Applies:
Yes

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Letter 947 (DO/CG)

ST PATRICK SENIOR CENTER INC

We have sent a copy of this letter to your representative as indicated in your power of attorney.

Sincerely,

A handwritten signature in black ink that reads "Holly O. Paz". The signature is written in a cursive style with a large, looped "H" and "P".

Holly O. Paz
Director, Exempt Organizations
Rulings and Agreements

Enclosure: Publication 4221-PC

ST PATRICK SENIOR CENTER INC

Our records show that you were previously tax-exempt as a subordinate under group exemption number 0928. Because you applied for and have been granted your own individual tax-exempt status, you no longer rely on your affiliation with a parent organization for recognition of your tax-exemption and will be listed individually in the Exempt Organizations Select Check (Pub. 78 data).

If, in the future, you choose to become a subordinate under a group ruling, you will lose your individual recognition of tax-exempt status and will no longer appear in the Exempt Organizations Select Check (Pub. 78 data). Moreover, if you become a subordinate under a group ruling and your parent organization loses its tax-exempt status, you also will lose your exempt status. To reestablish your individual tax-exemption after rejoining a group exemption, you will be required to reapply and pay the appropriate user fee.

2020-02-14

1211

1211 *Petition of St. Patrick Senior Center, Inc., request to hold "43rd Annual St. Patrick Irish Festival" at 58 Parsons on May 3, 2020 from 1:00 pm to 8:00 pm with set up on 5/2/2020 and tear down completion on 5/3/2020.*

REFERRED TO THE FOLLOWING DEPARTMENT(S)

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



50

February 12, 2020

TO: HONORABLE CITY COUNCIL

Re: Contracts and Purchase Orders Scheduled to be considered at the Formal Session for February 4, 2020

Please be advised that the Contract listed was submitted on January 29, 2020 for the City Council Agenda for February 4, 2020 has been amended as follows:

1. The **Contractors Address** was Submitted Incorrectly by the Office of Contracting and Procurement. Please see the correction(s) below:

Submitted as: Page 1

HOUSING AND REVITALIZATION

3040643 100% City Funding – To Provide Residential Demolition Services for the Bridging Neighborhood Program for the Following Properties, 7430 South and 575 S Green. – Contractor: Salenbien Trucking and Excavating, Inc. – **Location: 9217 Ann Arbor Road, Dundee, MI 48131** – Contract Period: Upon City Council Approval through February 3, 2021 – Total Contract Amount: \$47,000.00.

Should read as: Page 1

HOUSING AND REVITALIZATION

3040643 100% City Funding – To Provide Residential Demolition Services for the Bridging Neighborhood Program for the Following Properties, 7430 South and 575 S Green. – Contractor: Salenbien Trucking and Excavating, Inc. – **Location: 2303 Fenkell, Detroit, MI 48238** – Contract Period: Upon City Council Approval through February 3, 2021 – Total Contract Amount: \$47,000.00.

Respectfully Submitted,

Boysie Jackson
Chief Procurement
Officer BJ/AV

BY COUNCIL MEMBER: _____

RESOLVED, that **Contract #3040643** referred to in the foregoing communication dated January 29, 2020 be hereby and is approved.

MEMORANDUM

TO: LaJuan Counts, Director
Demolition Department

Tyrone Clifton, Director
Detroit Building Authority

Lawrence Garcia, Corporation Counsel
City of Detroit

CC: Honorable Colleagues
Janice Winfrey, City Clerk
Stephanie Washington, Legislative Liaison

FROM: Council President Brenda Jones *BJ*

DATE: February 15, 2020

RE: Demolition Concerns

- 1) Has the demolition Department provided a response to the Department of Housing and Urban Development (HUD) related to the demolition of 31 Woodland?
 - a) If not, what is the timeline of the submission of a response from the City?
 - b) If so, what is the timeline of a receipt of a response from HUD?
- 2) Who is legally responsible for the repayment of the funds for the demolition of 31 Woodland should HUD be dissatisfied with the rationale on why the property was demolished?
- 3) What was the process of approval for the demolition of 31 Woodland without the removal of asbestos or other harmful materials?
 - a) What is the current process in place?
- 4) What standards were used to deem 31 Woodland unsafe and permit expedited demolition?
 - a) Are those standards approved by HUD?
 - b) What are the current HUD approved standards?
- 5) Was the Buildings, Safety, Environmental and Engineering Department required to issue an order to fast track demolition for properties that are deemed unsafe?
 - a) If so, why was an order not issued in writing?
 - b) What steps are now being taken to ensure written city approval of demolitions that are fast tracked as a result of unsafe work conditions?
- 6) What steps were taken to ensure that residents were informed of the demolition of 31 Woodland?
 - a) Please draft an ordinance requiring resident notification of the demolition of contaminated structures within a pre-determined radial feet.

City of Detroit

CITY COUNCIL

COUNCIL PRESIDENT BRENDA JONES

- 7) How many employees were assigned to monitor the demolition of 31 Woodland?
 - a) Were their site visits?
 - b) Please provide the date and times of the site visits.
- 8) What is the average length of time spent by city staff on demolition sites to monitor the demolition of structures and to ensure the safe removal of demolition debris following demolition?
- 9) During demolition discussions last fall, it was stated that the current demolition staffing is adequate to provide sufficient oversight of environmental concerns related to the City's demolition program.
 - a) Please explain how current contractors are being monitored by City staff to ensure that contaminated demolition debris is transported per the requirements of the consent order as well as to ensure that other public health and safety standards are met to protect the air quality within the City of Detroit?
- 10) What is the status of the penalties related to Smalley Construction's illegal dumping activities ?
 - a) Have any fines been issued?
 - i) If so, what are the total value of the fines?
 - b) How does the Demolition Department plan to address this activity in the future to ensure demolition contractors are not engaging in illegal dumping activities?

City of Detroit

CITY COUNCIL

RAQUEL CASTAÑEDA-LÓPEZ
COUNCIL MEMBER
DISTRICT 6

MEMORANDUM

TO: David Bell, Director, BSEED
Hilton Kincaid, Homeland Security
Joel Howrani Heeres, Director, Office of Sustainability
Gary Brown, Director, DWSD

THRU: Council President Brenda Jones

FROM: Council Member Raquel Castañeda-López

DATE: February 13, 2020

RE: **Old Revere Copper Site Collapse**

Please respond to the following questions and requests regarding the November 27, 2019 partial collapse of the old Revere Copper site into the Detroit River:

1. What updates have been made to the City's emergency notification system following the Revere site collapse?
2. Provide a timeline for all inspections that BSEED performed at the Revere site since 2015.
3. Provide an overview of BSEED's review of the Revere Dock restoration plans submitted to EGLE and the Army Corps, including any recommendations.
 - a. Additionally, Revere Dock was requested to submit an Interim Response Plan by January 24, 2020, outlining any plans to ensure that no further contaminated soils and aggregate are discharged into the Detroit River. Provide BSEED's review of this Interim Plan.
4. Provide the Office of Sustainability's strategy for coordinating with EGLE and EPA on environmental concerns moving forward to ensure sufficient communication.
5. Will any the fines assessed to Revere Dock for their storage of aggregate without a permit be deposited into the Public Health Fund?
6. Regarding water and drainage fees, how much has been billed and paid by Revere Dock since purchasing property from the City in 2015? Please include both 5851 and 5701 W Jefferson. What are DWSD's plans for collecting payment?
7. Please describe what measure are being taken to stop further erosion of contaminated material into the Detroit River.
8. Is a second sink hole developing to the west of the first sinkhole? If so, what steps are being taken to contain it?
9. Provide an inventory of all contamination on the site that exceeds safe levels.
10. I request that the results of any river soil contamination testing are publicly shared.

City of Detroit

CITY COUNCIL


53

RAQUEL CASTAÑEDA-LÓPEZ
COUNCIL MEMBER
DISTRICT 6

MEMORANDUM

TO: Scott Benson, City Council Member, District 3
Lawrence Garcia, Corporation Counsel, Detroit
David Whitaker, Director, Legislative Policy Division

THRU: Council Member Brenda Jones, Council President

FROM: Council Member Raquel Castañeda-López 

DATE: February 12, 2020

RE: **Sign Ordinance Amendment**

After consulting with residents and business associations in District 6, which is home to many of the City's small business corridors, I request that the following changes be made to the Sign Ordinance package as currently drafted:

- That the new Chapter 4 ordinance pertaining to signs be applied only within the Central Business District (CBD = bounded by M-10, I-75, I-375, and the Detroit River).
- That the Chapter 50 zoning code be modified to maintain the current regulation of signs outside of the CBD.

I applaud the hard work that has gone into this current draft, especially that of Council Member Benson and his staff, the City Planning Commission staff, and the Law Department. I believe that the above changes would allow for a pilot period to properly assess the impact of this new ordinance on the Central Business District community while giving additional time to address and support the needs of small commercial corridors to preserve the fabric of our unique neighborhoods.

Please do not hesitate to contact my office if you have any questions. Thank you.

Cc: Honorable Detroit City Council
Avery Peoples, Mayor's Liaison
City Clerk

CITY CLERK 2020 FEB 19 PM 1:39


54

City of Detroit

CITY COUNCIL

RAQUEL CASTAÑEDA-LÓPEZ
COUNCIL MEMBER
DISTRICT 6

MEMORANDUM

TO: David Whitaker, Director, Legislative Policy Division
THRU: Council President Brenda Jones
FROM: Council Member Raquel Castañeda-López 
DATE: February 3, 2020
RE: Resolution Recognizing Trans Day of Visibility

I am requesting that the Legislative Policy Division work with my office to draft a resolution recognizing Trans Day of Visibility, which is March 31, 2020.

Please contact my office for more information. Thank you.

CITY CLERK 2020 FEB 14 PM 12:40

Cc: Honorable Detroit City Council
Stephanie Washington, Mayor's Liaison
City Clerk

City of Detroit


CITY COUNCIL

RAQUEL CASTAÑEDA-LÓPEZ
COUNCIL MEMBER
DISTRICT 6

MEMORANDUM

TO: Dave Bell, Director, BSEED

THRU: Council President Brenda Jones

FROM: Council Member Raquel Castañeda-López 

DATE: February 14, 2020

RE: 1411 Central Ave.

Please provide answers or information related to the following:

1. Was this property a brownfield site?
2. What specific remediation was done during demolition?
3. Have lines to the sewer system been disconnected? If so, why? What was removed from the sewer system?
4. Did the City perform the demolition of the previous building at the site?
 - a. Why was the southeast corner left intact while the remainder of the building was demolished?

Please feel free to reach out to my office with questions at (313) 224-2450.

CITY CLERK 2020 FEB 14 PM 12:40

Cc: Honorable Detroit City Council
Stephanie Washington, City Council Liaison, Mayor Duggan's Office
City Clerk

City of Detroit

CITY COUNCIL


56

RAQUEL CASTAÑEDA-LÓPEZ
COUNCIL MEMBER
DISTRICT 6

MEMORANDUM

TO: David Bell, Director
Buildings, Safety Engineering & Environmental Dept.

THRU: Council President Brenda Jones

FROM: Council Member Raquel Castañeda-López 

DATE: February 14, 2020

RE: District 6 Property Owner Compliance Inquiry

My office hosted a rental forum in the community about the City's rental ordinance. At the forum, several residents reported concerns with property at 760 Campbell, 727 W. Grand Blvd., and another property owned by the same landlord.

Please compile a list of all the properties owned by that same property owner, Dennis Keffalinos, or any of his company subsidiaries, located in District 6.

Please include whether each property has a current certificate of occupancy, and include a list of the most recent inspections and any outstanding violations.

Please contact my office for more information. Thank you.

CITY CLERK 2020 FEB 14 PM 12:39

Cc: Honorable Detroit City Council
Stephanie Washington, Mayor's Liaison
City Clerk