PARK BOARD AGENDA



CALL TO ORDER

- 1. ROLL CALL
- 2. APPROVAL OF AGENDA
- 3. <u>APPROVAL OF MINUTES</u>
 - May 16, 2023
 - May 30, 2023
- 4. APPROVAL OF FINANCIALS
 - Claims \$784.178.69
 - Donations \$0
 - Grants \$0

5. NEW BUSINESS MATTERS

- a. Memorandum of Understanding The Village
- b. Memorandum of Understanding Dwight Weber
- c. Updated Wage Resolution

6. OLD BUSINESS

a. None

7. USE AND EVENT PERMIT

- a. A'Nu COE 1st Fridays Various Dates Ullery Park
- b. Elkhart Mennonite Worship July 30, 2023 Island Park
- c. Community Unity Back to School Day August 13, 2023 McNaughton Park
- d. Rockin' on the Rails August 26, 2023 Parks Stage
- e. Woof Group 4th Annual Breakfast October 28, 2023 Dr. Frank Booth Bark Park
- f. Break down the walls- 2023

8. DEPARTMENT REPORT

9. CORRESPONDENCE

a. None

10. PUBLIC INPUT/PRIVILEGE OF THE FLOOR

ADJOURNMENT

NEXT REGULAR PARK BOARD MEETING JULY 18, 2023, COUNCIL CHAMBERS. FINANCIALS ONLY MEETING JULY 5, 2023, PARKS OFFICE

MEETING SCHEDULE

Tuesday, June 20, 2023, at 5:00 pm Council Chambers 229 S. 2nd Street, Elkhart, IN 46516



DATE: May 16, 2023

TIME: 5:07 PM

City of Elkhart Parks & Recreation

Council Chambers

LOCATION: 2

229 S. 2nd Street, Elkhart, IN 46516

Call to Order at 5:00 PM.

1. Roll Call- Quorum Present BOARD MEMBERS PRESENT

Sarah Santerre President Absent	Nekeisha Alayna Alexis Vice President	Mark Datema Secretary	Christopher Baiker Treasurer

2. Approval of Agenda

Motion to Approve Agenda

Motion: MD Second: CB

Motion passes with unanimous voice vote

3. Approval of Minutes

April 18, 2023 Motion to Approve

Motion: MD Second: CB

Motion passes with unanimous voice vote

4. Approval of Financials

Claims: \$131,490.90

Donations: \$0 Grants: \$0

Motion to discuss, approve and place on file

Motion: MD Second: CB

Motion passes with unanimous voice vote

There are no questions from the Board.

5. New Business

a. 2023 Fee Schedule Amendments

Mr. Czarnecki states the Mayor's office and Human Resources want to offer benefits to city employees, and parks will offer a 20% discount on pavilion rental fees for city employees. The Department is also adding rental fees for the Party Patios at the aquatic facilities. Motion to approve



Motion: MD Second: CB

Motion passes with unanimous voice vote

b. Entertainment Contracts

Ms. Krask explains that contracts are standard contracts the Legal Department provides for all entertainment for Parks events.

Motion to approve

Motion: MD Second: CB

Motion passes with unanimous voice vote

c. Memorandum of Understanding Shark in the Park Summer Workout Series

Ms. Ixmatlahua presents the MOU. Tina Sharkey, fitness instructor, will offer fitness classes in Walker Park

Motion to approve

Motion: MD Second: CB

Motion passes with unanimous voice vote

d. Memorandum of Understanding Soccer Camps

Ms. Ixmatlahua presents the MOU. Julio De La Croix, a semi-pro soccer player from Elkhart, will be doing three soccer camps for the Department at Studebaker Park.

Motion: MD Second: CB

Motion passes with unanimous voice vote

e. Michiana Rental Contract

Ms. Krask states that the contract is for a tent rental for Rhapsody Arts and Music Festival. Motion to approve signing the contract electronically

Motion: MD Second: CB

Motion passes with unanimous voice vote

6. Old Business

a. None

7. Use and Event Permit

a. Picnic at the Park - Various Dates - McNaughton Park

Ms. Beth Pittman of Crossroads Community Church presents the permit. Crossroads Community Church would like to host free picnics at McNaughton Park on Thursdays from Noon to 1 pm.

Due to other things going on in the park at that time, the location may need to change. Motion to approve contingent on the Superintendent's approval for the new location

Motion: MD Second: CB

Motion passes with unanimous voice vote

b. Church in the Park – Various Dates – Weston Park, Kardzhali Park, and Ullery Park Ms. Ashley LeCount of Crossroads Community Church presents the permit. They would like to broadcast their service in the parks and provide a cookout for the community.

Motion to approve contingent on Health Department approval

Motion: MD Second: CB

Motion passes with unanimous voice vote

Summer Reading End Party – July 20, 2023 – NIBCO Water & Ice Park & Kardzhali Park



Ms. Jill Martinson of the Elkhart Public Library presents the permit. The library wants to hold its annual summer reading end party at NIBCO Water & Ice Park and Kardzhali Park.

Motion to MD Motion: CB Second: NAA

Motion passes with unanimous voice vote

d. Thor Elkhart River Walk Grand Prix – August 2-6, 2023 – NIBCO Water & Ice Park & Kardzhali Park

Ms. Krask presents the permit on behalf of Kristy Sommers. The event uses NIBCO as a staging area and Kardzhali for the cornhole tournament.

Motion to approve

Motion: MD Second: CB

Motion passes with unanimous voice vote

e. Lemonade Day - June 3, 2023 - Various Parks

Ms. Krask presents the permit. Junior Achievement's Lemonade Day is Saturday, June 3. The Department would like to grant permission for children participating to set up in city parks.

Motion to approve

Motion: MD Second: CB

Motion passes with unanimous voice vote

f. Elkhart's Independence Day Celebration - July 1, 2023 - Kardzhali Park

Ms. Krask presents the permit. Kardzhali Park is used to set off the fireworks.

Motion to approve

Motion: MD Second: CB

Motion passes with unanimous voice vote

8. Department Report

Mr. Czarnecki states that the Department is busy preparing for summer. The new software program, CivicRec, is almost ready to use. Governor Holcomb came for the River Greenway Trail ribbon cutting. The kiddie pool has been removed from Ideal Beach. Aquatic facilities are preparing to open. Summer hiring is ongoing.

Ms. Krask informs the Board about events. Farmers Market has started and has been busy. Event Aides are being hired. Upcoming events include Rhapsody Arts & Music Festival and Summer Chill. Two parks have been adopted through the Adopt a Park Program.

Ms. Ixmatlahua provides updates on programming. The Roosevelt afterschool program has over 150 participants with 20 high school student mentors. Line dancing continues, and photography class, watercolors, and CPR have all finished. Upcoming programs include ADEC bird hikes, Bike Rodeo, and the Peace Run and Unity Rally.

Mr. McCray provides the Board with the ranger report for April. Mr. McCray will be leaving the Department to go to the Police Department by the end of May.

9. Public Input/Privilege of the Floor

Ms. Alexis opens the privilege of the floor.

Ms. Alexis closes the privilege of the floor.

10. Approval for Adjournment

Motion to adjourn Motion: MD



Second: CB Motion passes with unanimous voice vote Adjourn 6:07 pm

PARKS & RECREATION STAFF MEMBERS IN ATTENDANCE				
Jamison Czarnecki, Superintendent	Sommer Bowers, Office Manager			
Luisa Ixmatlahua-Garay, Program Coordinator	Jennifer Kobie, Recording Secretary			
Sherry Krask, Event Coordinator	Stan McCray, Lead Park Ranger			
Nick Cron, Operations Manager	#.00 ##.1			

ADDITIONAL CITY EMPLO Ms. Jill Martinson, Elkhart F		vera, Legal Department	Ms. Beth Pittman, via Webex
Library		eCount, via Webex	IVIS. Detil I littlian, via vvedex
Minutes Certification:			
Respectfully Submitted,			
Recording Secretary	Jennifer Kobie	Date	
Park Board President	Sarah Santerre	Date	
Park Board Secretary	Mark Datema	Date	



DATE: May 30, 2023

TIME: 5:00 PM

City of Elkhart Parks & Recreation

LOCATION: 229 S. 2nd Street, Elkhart, IN 46516

Call to Order at 5:04 PM.

1. Roll Call- Quorum Present BOARD MEMBERS PRESENT

Sarah Santerre	Nekeisha Alayna Alexis	Mark Datema	Chris Baiker
President	Vice President	Secretary	Treasurer
	Absent, Eric Trotter, Proxy		Absent Joe Foy, Proxy

2. Approval of Agenda

Motion to Approve Agenda

Motion: JF Second: ET

Motion passes with a unanimous voice vote

3. Approval of Financials

Claims: \$16,564.50

Donations: \$0 Grants: \$0

Motion to discuss, approve and place on file

Motion: MD Second: JF

Motion passes with a unanimous voice vote

There were no questions from the Board.

4. New Business

a. Billboard Contract

Ms. Bowers explains that the contract is for two more billboards. One for Summer Chill and one for the Farmers Market.

Motion: MD Second: JF

Motion passes with a unanimous voice vote

b. Memorandum of Understanding Elkhart Dahlia Society

Ms. Ixmatlahua presents the MOU. In exchange for free pavilion use, the society is providing line dancing classes and CPR certification classes.

Motion to approve

Motion: MD Second: ET

Motion passes with unanimous voice vote

c. Memorandum of Understanding Christopher Baiker



Mr. Baiker is providing fly fishing lessons.

Motion to approve contingent on conflict of interest

Motion: JF Second: MD

Motion passes with unanimous voice vote

d. Memorandum of Understanding Rachel Inks

Ms. Inks is providing a senior balance class and a grandma and me class.

Motion to approve

Motion: MD Second: JF

Motion passes with unanimous voice vote

e. Memorandum of Understanding The Quantum Realm Institute

The Quantum Realm is providing Yoga and Holistic Health intro classes.

Motion to approve

Motion: JF Second: MD

Motion passes with unanimous voice vote

f. Memorandum of Understanding Pause and Paint

The Pause and Paint program is for the day camp program.

Motion to approve pending conflict of interest signature and background checks

Motion: MD Second: JF

Motion passes with unanimous voice vote

g. Memorandum of Understanding Julie Cotton

Ms. Cotton is providing kickboxing and meditation classes, bilates and meditation classes, and improv comedy classes.

Motion to approve

Motion: MD Second: JF

Motion passes with unanimous voice vote

5. Public Input/Privilege of the Floor

Ms. Santerre opens the privilege of the floor.

Ms. Santerre closes the privilege of the floor.

6. Approval for Adjournment

Motion to adjourn Motion: MD

Second: JF

Motion passes with a unanimous voice vote

Adjourn 5:27 pm

PARKS & RECREATION STAFF MEMBERS IN ATTENDANCE

Jamison Czarnecki, Superintendent Luisa Ixmatlahua, Program Coordinatior Nick Cron, Operations Manager Jennifer Kobie, Recording Secretary Sommer Bowers, Office Manager

ADDITIONAL CITY EMPLOYEES AND GUESTS IN ATTENDANCE



Minutes Certification:			
Respectfully Submitted,			
Recording Secretary	Jennifer Kobie	Date	
Park Board President	Sarah Santerre	Date	
Park Board Secretary	Mark Datema	 Date	

PARKS BOARD

CLAIM AND ALLOWANCE DOCKET

I HEREBY CERTIFY THAT EACH OF THE ABOVE LISTED VOUCHERS AND INVOICES OR BILLS ATTACHED THERETO ARE TRUE AND CORRECT AND I HAVE AUDITED SAME IN ACCORDANCE WITH IC 5-11-10-1.6. I ALSO HEREBY CERTIFY THAT THESE VOUCHERS AND INVOICES REPRESENT GOODS AND/OR SERVICES THAT ARE FOR THE BENEFIT OF THE CITY OF ELKHART AND THAT APPROPRIATIONS FOR THESE EXPENDITURES HAVE BEEN DULY MADE OR OTHERWISE AUTHORIZED BY THE CITY COUNCIL AND OTHER APPROPRIATE AUTHORITY.

.2023

IN RELIANCE ON THE ABOVE CERTIFICATION, CLAIMS IN THE TOTAL AMOUNT OF \$784,178.69 AS

LISTED ON THE REGISTER ATTAC	CHED HERETO <u>CONSISTING</u> <u>OF</u> <u>9</u> <u>PAGES</u> , AR	E HEREBY APPROVED
EXCLUDING ANY CLAIMS WITHHE	LD AS SHOWN ON THE SEPARATE SUMMARY O	F PENDING CLAIMS.
EXECUTED THIS 20TH DAY OF JU	NE 2023 BY:	
PRESIDENT		
	SARAH SANTERRE	
VICE PRESIDENT		
	NEKEISHA ALAYNA ALEXIS	
SECRETARY		
SECRETARY	MARK DATEMA	
TREASURER	CHRISTOPHER BAIKER	

ORIGINAL COPY MUST BE RETAINED IN THE CONTROLLER'S OFFICE

City of Elkhart Controller's Office

Expense Approval Report By Fund



City of Likitati					
Vendor Name	Payable Number	Post Date	Description (Item)	Account Number	Amount
Fund: 2204 - PARK & RECREAT	ion				
SON CHHUON	RQ0622110	06/20/2023	Pavilion Rental Refund - McNa	2204-5-501-4581000	420.56
NICOLE WILLIAMS	R00627243	06/20/2023	Pavilion Refund - McNaughto	2204-5-501-4581000	210.28
AMERICAN NATIONAL RED CR	22581056	06/20/2023	Lifeguarding Certification Bun	2204-5-501-4220150	368.00
RICOH, USA	107177624	06/20/2023	Rent for Parks Copier	2204-5-501-4370200	107.52
BIG C LUMBER CO INC	1830753	06/20/2023	Siding for Studebaker Pavilion	2204-5-501-4360500	6,225.00
ADOLPH KIEFER AND ASSOCIA	INV001311852	06/20/2023	Lifeguard Uniforms-Shirts	2204-5-501-4220150	3,708.17
MENARD, INC	31970	06/20/2023	Studebaker Remodel - Repairs	2204-5-501-4360500	183.51
A & R MACHINE SHOP LLP	5382	06/20/2023	High Dive Fence	2204-5-501-4440500	4,464.00
PETTY CASH / JAMISON CZAR	PSPL-0007-2016	06/20/2023	Pool License	2204-5-501-4220150	75.00
PETTY CASH / JAMISON CZAR	PSPL-0008-2016	06/20/2023	Pool License	2204-5-501-4220150	75.00
PETTY CASH / JAMISON CZAR	PSPL-0009-2016	06/20/2023	Pool License	2204-5-501-4220150	75.00
AMAZON CAPITAL SERVICES I	19LV-43FF-QH4M	06/20/2023	Operating Supplies - Day Cam	2204-5-501-4220150	443,47
GREG RIEKSECKER	9858	06/20/2023	Riverview Staff Shirts	2204-5-501-4220150	288.00
ELKHART COMMUNITY SCHO	E21956	05/20/2023	Radio Advertising - Facility Ad	2204-5-501-4330300	207.00
MENARD, INC	32389	06/20/2023	Studebaker Remodel -Repairs	2204-5-501-4360500	162.66
YODER OIL COMPANY INC	CL77026	06/20/2023	Park Department Gasoline	2204-5-501-4220210	515.44
NEWCO	1393-28755	06/20/2023	Private Party Signs-McNghtn S	2204-5-501-4220150	80.76
ADOLPH KIEFER AND ASSOCIA	INV001319916	06/20/2023	Lifeguard Supplies	2204-5-501-4220150	78.50
RICOH USA, INC	5067417362	06/20/2023	Copier Read - May	2204-5-501-4210500	303.18
ADOLPH KIEFER AND ASSOCIA		06/20/2023	Lifguard Uniforms	2204-5-501-4220150	636.50
LRS HOLDINGS LLC	PS536846	06/20/2023	Portable Restrooms - Studeba	2204-5-501-4370200	181.00
LRS HOLDINGS LLC	PS536847	06/20/2023	Portable Restrooms - McNaug	2204-5-501-4370200	217.00
LRS HOLDINGS LLC	PSS36848	06/20/2023	Portable Restrooms - Walker	2204-5-501-4370200	136.00
LRS HOLDINGS LLC	PS536849	06/20/2023	Portable Restrooms - Willowd	2204-5-501-4370200	136.00
LRS HOLDINGS LLC	PS536850	06/20/2023	Portable Restrooms - Pierre M	2204-5-501-4370200	136.00
TERRIN ALLEN	R00663265	06/20/2023	Pavilion Refund - McNaughto	2204-5-501-4581000	210.28
PETTY CASH / JAMISON CZAR	632023	06/20/2023	McNaughton Spray Park	2204-5-501-4220150	24.08
MENARD, INC	32700	06/20/2023	Outreach Kit	2204-5-501-4220150	29.99
HERON ENVIRONMENTAL LLC	23-0535	06/20/2023	Environmental Site Assessme	2204-5-501-4310400	1,400.00
BUGSY'S ELKHART EXTERMIN	24819	06/20/2023	Pest Control - may	2204-5-501-4390912	210.00
MENARD, INC	32534	06/20/2023	Aquatic Supples for Facilites	2204-5-501-4220150	189,93
PETTY CASH / JAMISON CZAR	662023	06/20/2023	Day Camp Supplies	2204-5-501-4220150	33.71
PETTY CASH / JAMISON CZAR	2305	06/20/2023	Day Camp Supplies	2204-5-501-4220150	10.25
LUISA IXMATLAHUA	9676	06/20/2023	Camp Snacks Supplies	2204-5-501-4220150	56.35
LUISA IXMATLAHUA	9677	06/20/2023	Camp Snack Supplies	2204-5-501-4220150	317.43
AMAZON CAPITAL SERVICES I	1TR7-1R1V-LT11	06/20/2023	Office Supplies - Laminating S	2204-5-501-4210500	64.98
AMAZON CAPITAL SERVICES I	1TR7-1R1V-LT11	06/20/2023	Office Supplies - Laminating S	2204-5-501-4220150	151.39
		00, 10, 1010		04 - PARK & RECREATION Total:	22,131.94
Fund: 2314 - PARKS DONATIO	NI				,
	-	05 (20 /2022	Commenda Port	224 4 5 424 4200000	900 00
RICHARD K KALIL	3721	06/20/2023	Summerchill Event Performer	—	800.00
			runa	2314 - PARKS DONATION Total:	800.00
Fund: 2520 - PARK PROGRAM					
PETTY CASH / JAMISON CZAR	R00654515	06/20/2023	Program Refund	2520-5-508-4581000	90.00
AMAZON CAPITAL SERVICES I	1NLP-FM3C-JM1K	06/20/2023	Operating Supplies - Day Cam	2520-5-630-4220150	372.35
AMAZON CAPITAL SERVICES I	1NLP-FM3C-JM1K	06/20/2023	Operating Supplies - Day Cam	2520-5-630-4220150	152.41
GORDON FOOD SERVICE INC	779283504	06/20/2023	Ideal Beach Concessions Supp	2520-5-580-4220150	46.50
MICHAEL WELLS	23256	06/20/2023	Summer Concert Series Event	2520-5-630-4390510	1,500.00
LESTER EADS	5122023	06/20/2023	Event Performer - Hideous Bu	2520-5-630-4390510	700.00
MELANIE STEPHIC	7479214	06/20/2023	Ideal Beach Cleaning Supplies	2520-5-509-4220150	45.48
BESINC	1857633	06/20/2023	Concessions Supplies - Rivervi	2520-5-580-4220150	985.96
GORDON FOOD SERVICE INC	779283999	06/20/2023	Riverview Concessions Suppli	2520-5-580-4220150	3.79
MENARD, INC	31681	06/20/2023	Rhapsody - Building Supplies	2520-5-630-4220150	38.68
SHERWIN WILLIAMS	7653-5	06/20/2023	Ideal Beach- Paint	2520-5-509-4220150	195.40

Expense Approval Report

Vendor Name	Payable Number	Post Date	Description (Item)	Account Number	Amount
COCA-COLA CONSOLIDATED, I	23337206878	06/20/2023	Ideal Beach Concession Suppli	2520-5-580-4220150	1,049.68
MENARD, INC	31880	06/20/2023	Rhapsody - Building Supplies	2520-5-630-4220150	34.85
BESINC	1857762	06/20/2023	Concessions Supplies - Rivervi	2520-5-580-4220150	540.66
B E S INC	1857763	06/20/2023	Concessions Supplies - McNau	2520-5-580-4220150	1,016.24
BESINC	1857764	06/20/2023	Concessions Supplies - Pierre	2520-5-580-4220150	1,016.24
BESINC	1857765	06/20/2023	Concessions Supplies - Ideal B	2520-5-580-4220150	1,016.24
MARTIN MARKETING SPECIAL	20909-1	06/20/2023	Farmer's Market Shirts	2520-5-630-4220150	161.15
MENARD, INC	32032	06/20/2023	Rhapsody - Building Supplies	2520-5-630-4220150	63.10
GORDON FOOD SERVICE INC	779284419	06/20/2023	McNaughton Spray Pk Conces	2520-5-580-4220150	629.78
GORDON FOOD SERVICE INC	779284422	06/20/2023	Pierre Moran Pool Concession	2520-5-580-4220150	579.63
GORDON FOOD SERVICE INC	779284448	06/20/2023	Ideal Beach Concessions Supp	2520-5-580-4220150	383.36
GORDON FOOD SERVICE INC	779284449	06/20/2023	Riverview Concessions Suppli	2520-5-580-4220150	163.41
COCA-COLA CONSOLIDATED, I	23334207402	06/20/2023	McNaughton Spray Park Conc	2520-5-580-4220150	862.56
GORDON FOOD SERVICE INC	779284547	06/20/2023	Ideal Beach Concessions Supp	2520-5-580-4220150	172.98
ELKHART COMMUNITY SCHO	E21958	06/20/2023	Radio Advertising - Farmer's	2520-5-630-4220150	378.00
ELKHART COMMUNITY SCHO	E22041	06/20/2023	Radio Advertising - Rhapsody	2520-5-630-4220150	345,00
LESEM CARIRILLO	R00649417	06/20/2023	Event Refund - Rhapsody Ven	2520-5-630-4581000	100.00
HIMCO WASTE-AWAY SERVICE	031205845	06/20/2023	Trash Services for ideal Beach	2520-5-509-4390912	240.03
MELANIE STEPHIC	7479062	06/20/2023	Ideal Beach Supplies	2520-5-580-4220150	223.36
GORDON FOOD SERVICE INC	779284604	06/20/2023	Riverview Concessions Suppli	2520-5-580-4220150	79.98
GORDON FOOD SERVICE INC	779284605	06/20/2023	Pierre Moran Pool Concession	2520-5-580-4220150	111.93
HERSHEY CREAMERY COMPA	INVE0019180432	06/20/2023	Concessions - Riverview- Ice C	2520-5-580-4220150	458.88
HERSHEY CREAMERY COMPA	INVE0019180441	06/20/2023	Concessions - PM Pool - Ice Cr	2520-5-580-4220150	796.80
HERSHEY CREAMERY COMPA	INVE0019180724	06/20/2023	Concessions - McNaughton Sp	2520-5-580-4220150	938.88
HERSHEY CREAMERY COMPA	INVE0019181961	06/20/2023	Concessions - Ideal Beach-Ice	2520-5-580-4220150	674.88
BESINC	1857890	06/20/2023	Concession Supplies - Ideal Be	2520-5-580-4220150	402.00
ALEXANDRA HIBSHMAN	6012023	06/20/2023	MOU Watercolors Class Instru	2520-5-508-4390900	1,224.00
GORDON FOOD SERVICE INC	779284673	06/20/2023	Pierre Moran Pool Concession	2520-5-580-4220150	99.90
GORDON FOOD SERVICE INC	779284710	06/20/2023	Riverview Concessions Suppli	2520-5-580-4220150	114.88
GORDON FOOD SERVICE INC	779284711	06/20/2023	Riverview Concessions Suppli	2520-5-580-4220150	24.43
GORDON FOOD SERVICE INC	779284712	06/20/2023	Pierre Moran Pool Concession	2520-5-580-4220150	24.43
GORDON FOOD SERVICE INC	779284713	06/20/2023	Ideal Beach Concessions Supp	2520-5-580-4220150	69.43
GORDON FOOD SERVICE INC	779284728	06/20/2023	Concessions - Ideal Beach	2520-5-580-4220150	117.96
PETTY CASH / JAMISON CZAR	9974817	06/20/2023	Ideal Beach Supplies	2520-5-509-4220150	27.15
GORDON FOOD SERVICE INC	779284770	06/20/2023	Concessions - McNaughton	2520-5-580-4220150	115.96
GORDON FOOD SERVICE INC	779284783	06/20/2023	Concessions -	2520-5-580-4220150	32.89
SHERRY L. KRASK	6042023	06/20/2023	Rhapsody Snack Supplies	2520-5-630-4220150	96.02
GORDON FOOD SERVICE INC	779284808	06/20/2023	Concessions - Ideal Beach	2520-5-580-4220150	308.40
BESINC	1857992	06/20/2023	Concessions - McNaughton Sp	2520-5-580-4220150	127.98
MENARD, INC	32700	06/20/2023	Rhapsody Supplies	2520-5-630-4220150	75.11
SHERRY L. KRASK	6052023	06/20/2023	Rhapsody Supplies-Kids Tent S		30.76
PETTY CASH / JAMISON CZAR	652023	06/20/2023	Rhapsody Food	2520-5-630-4220150	180,56
GORDON FOOD SERVICE INC	779284842	06/20/2023	Concessions - Riverview	2520-5-580-4220150	120.41
GORDON FOOD SERVICE INC	779284843	06/20/2023	Concessions - McNaughton	2520-5-580-4220150	120.41
GORDON FOOD SERVICE INC	779284873	06/20/2023	Concessions - Riverview	2520-5-580-4220150	239.94
GORDON FOOD SERVICE INC	779284874	06/20/2023	Concessions - Plerre Moran P Concessions - McNaughton	2520-5-580-4220150	39.93
GORDON FOOD SERVICE INC	779284875	06/20/2023	•	2520-5-580-4220150	18.99 80.51
GORDON FOOD SERVICE INC	779284914 779284931	06/20/2023 06/20/2023	Concessions - McNaughton Concessions - Ideal Beach	2520-5-580-4220150 2520-5-580-4220150	17.45
		06/20/2023	Rhapsody T-Shirts	2520-5-630-4220150	1,471.00
MARTIN MARKETING SPECIAL	779284972	06/20/2023	Concessions - Pierre Moran P	2520-5-580-4220150	183.65
GORDON FOOD SERVICE INC	1857977	06/20/2023	Concessions - McNaughton Sp		576.10
B E S INC PETTY CASH / JAMISON CZAR		06/20/2023	Rhapsody Food	2520-5-630-4220150	300.00
SHERRY L. KRASK	378414	06/20/2023	Rhapsody Event Supplies - Dri	2520-5-630-4220150	53.84
DT SOFT SERVE, LLC	427058	06/20/2023	Concessions - Riverview	2520-5-580-4220150 2520-5-580-4220150	414.26
MARTIN SUPERMARKET #14	692023	06/20/2023	ice Bags for Rhapsody	2520-5-630-4220150	38.32
GORDON FOOD SERVICE INC	779285043	06/20/2023	Concessions - Pierre Moran P	2520-5-580-4220150	87.97
GORDON FOOD SERVICE INC	779285044	06/20/2023	Concessions - McNaughton	2520-5-580-4220150	221.72
GORDON FOOD SERVICE INC	779285065	06/20/2023	Concessions - Riverview	2520-5-580-4220150	218.88
GORDON FOOD SERVICE INC	779285066	06/20/2023	Concessions - McNaughton	2520-5-580-4220150	37.98
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6/16/2023 10:43:06 AM Page 2 of 4

Expense Approval Report

Vendor Name	Payable Number	Post Date	Description (Item)	Account Number	Amount
GORDON FOOD SERVICE INC	779285067	06/20/2023	Concessions - Riverview	2520-5-580-4220150	137.95
GORDON FOOD SERVICE INC	779285112	06/20/2023	Concessions - McNaughton	2520-5-580-4220150	67.44
GORDON FOOD SERVICE INC	779285113	06/20/2023	Concessions - Pierre Moran P	2520-5-580-4220150	17.45
GORDON FOOD SERVICE INC	779285114	06/20/2023	Concessions - Riverview	2520-5-580-4220150	339.92
GORDON FOOD SERVICE INC	779285169	06/20/2023	Concessions - Pierre Moran P	2520-5-580-4220150	182.78
MARIETTA CAPPELLETTI	05082023	06/20/2023	Farmer's Market Event Kids D	2520-5-630-4390510	500.00
NEIL CRUM	05082023-1	06/20/2023	Indepence Day Event Perform	2520-5-630-4390510	500.00
COCA-COLA CONSOLIDATED, I	36031035018	06/20/2023	Concessions - McNaughton	2520-5-580-4220150	981.76
ULTRAFAB	72301	06/20/2023	Independence Day Event Perf	2520-5-630-4390510	1,500.00
MICHAEL D STANIFORD	92327-1	06/20/2023	Farmer's Market Kids Day Eve	2520-5-630-4390510	285.00
EDWARD J. BELLOWS	003774-6142023	06/20/2023	Umpire Services	2520-5-508-4390931	60.00
RONALD D. GUYER	003783-6142023	06/20/2023	Umpire Services	2520-5-508-4390931	300.00
JOSHUA REED	023738-6142023	06/20/2023	Umpire Services	2520-5-508-4390931	240.00
JOSEPH R. BOWEN	024990-6142023	06/20/2023	Umpire Services	2520-5-508-4390931	240.00
JOSE ALBGETO BRAVO	025993-6142023	06/20/2023	Umpire Services	2520-5-508-4390931	360.00
TONY W MACIK	025994-6142023	06/20/2023	Umpire Services	2520-5-508-4390931	240.00
JUSTIN M RANDALL	025995-6142023	06/20/2023	Umpire Services	2520-5-508-4390931	240.00
			Fun	d 2520 - PARK PROGRAM Total:	29,673.71
Fund: 7740 - SALES TAX					
SON CHHUON	R00622110	06/20/2023	Pavilion Rental Refund - McNa	7740-4-000-3120708	29.44
NICOLE WILLIAMS	R00627243	06/20/2023	Pavilion Refund - McNaughto	7740-4-000-3120708	14.72
TERRIN ALLEN	R00663265	06/20/2023	Pavilion Refund - McNaughto	7740-4-000-3120708	14.72
				Fund 7740 - SALES TAX Total:	58,88
				Grand Total:	52,664.53

Report Summary

Fund Summary

Fund		Expense Amount
2204 - PARK & RECREATION		22,131.94
2314 - PARKS DONATION		800.00
2520 - PARK PROGRAM		29,673.71
7740 - SALES TAX		58.88
	Grand Total:	52,664.53

Account Summary

Account Number	Account Name	Expense Amount
2204-5-501-4210500	Office Supplies	368.16
2204-5-501-4220150	Operating Supplies	6,641.53
2204-5-501-4220210	Gasoline	515.44
2204-5-501-4310400	Professional Services	1,400.00
2204-5-501-4330300	Advertising	207.00
2204-5-501-4360500	Repairs & Maintenance -	6,571.17
2204-5-501-4370200	Equipment Leases	913.52
2204-5-501-4390912	Contract Services	210.00
2204-5-501-4440500	Other Equipment	4,464.00
2204-5-501-4581000	Unappropriated	841.12
2314-5-124-4390900	Other Services & Chrgs P	800.00
2520-5-508-4390900	Other Services & Charge	1,224.00
2520-5-508-4390931	Contract Labor - Umpire	1,680.00
2520-5-508-4581000	Unappropriated	90.00
2520-5-509-4220150	Operating Supplies	268.03
2520-5-509-4390912	Contract Services	240.03
2520-5-580-4220150	Operating Supplies	17,295.50
2520-5-630-4220150	Operating Supplies	3,791.15
2520-5-630-4390510	Ent & Prod Expense	4,985.00
2520-5-630-4581000	Unappropriated	100.00
7740-4-000-3120708	Rental Sales Tax - Parks	58.88
	Grand Total:	52,664.53

Project Account Summary

Project Account Key		Expense Amount
None		52,664.53
	Grand Total:	52.664.53



City of Elkhart

Expense Approval Report

By Fund

Payment Dates 5/26/2023 - 6/16/2023

City of Litarate					
Vendor Name	Payable Number	Post Date	Description (Item)	Account Number	Amount
Fund: 1101 - GENERAL					
STORAGE RENTAL OF AMERIC	50317	06/02/2023	Storage Units - Dev Services	1101-5-016-4390900	178.00
				Fund 1101 - GENERAL Total:	178.00
Fund: 2204 - PARK & RECREATI	ON				
COMCAST CABLE	0941317-051223	05/26/2023	INTERNET SVC- MAY- PK	2204-5-501-4320400	116.85
INDIANA MICHIGAN POWER	04138884905-051723	05/26/2023	353 S ELKHART- PK	2204-5-501-4350100	96.70
INDIANA MICHIGAN POWER	04220223400-051723	05/26/2023	135 N ELKHART- PK	2204-5-501-4350100	164.82
INDIANA MICHIGAN POWER	04253609608-051723	05/26/2023	147 N ELKHART- PK	2204-5-501-4350100	41.75
INDIANA MICHIGAN POWER	04492922507-051723	05/26/2023	133 N ELKHART- PK	2204-5-501-4350100	373.61
COMCAST CABLE	0910809-051723	06/02/2023	300 RIVERVIEW- PK	2204-5-501-4320400	109.85
INDIANA MICHIGAN POWER	04215794407-051823	05/26/2023	1235 E HIGH- PK	2204-5-501-4350100	74.25
COMCAST CABLE	0909983-051823	06/02/2023	635 ARCADE- MPK	2204-5-501-4320400	108.35
STORAGE RENTAL OF AMERIC	50317	06/02/2023	Storage Units - Parks	2204-5-501-4390900	195.00
FRONTIER NORTH INC.	5741010015-051923	06/02/2023	PHONE SVC- MAY- PK	2204-5-501-4320400	47.41
NORTHERN INDIANA PUBLIC S	0441000024-052223	06/02/2023	701 ARCADE- PK	2204-5-501-4350200	132.44
NORTHERN INDIANA PUBLIC S	1735700094-052223	06/02/2023	500 E BEARDSLEY- PK	2204-5-501-4350200	98.83
NORTHERN INDIANA PUBLIC S	7549100062-052223	06/02/2023	1320 OLIVE- PK	2204-5-501-4350200	89.60
INDIANA MICHIGAN POWER	04028164509-052323	06/02/2023	110 E GARFIELD- PK	2204-5-501-4350100	143.26
INDIANA MICHIGAN POWER	04792516603-052323	06/02/2023	215 E INDIANA- PK	2204-5-501-4350100	44.83
INDIANA MICHIGAN POWER	04187415601-052523	06/02/2023	1100 MCDONALD- PK	2204-5-501-4350100	351.02
ELKHART PUBLIC UTILITIES	4100410004-052623	06/02/2023	SUPERIOR & RIVERVIEW- PK	2204-5-501-4350400	71.16
ELKHART PUBLIC UTILITIES	4100410104-052623	06/02/2023	SUPERIOR & RIVERVIEW- PK	2204-5-501-4350400	99.12
ELKHART PUBLIC UTILITIES	4100411004-052623	06/02/2023	JOYCE & SUPERIOR- PK	2204-5-501-4350400	53.53
ELKHART PUBLIC UTILITIES	4131505004-052623	06/02/2023	JOHNSON- PK	2204-5-501-4350400	33.81
ELKHART PUBLIC UTILITIES	4208320000-052623	06/02/2023	1020 MCDONALD- PK	2204-5-501-4350400	58.57
ELKHART PUBLIC UTILITIES	4262367905-052623	06/02/2023	1607 STERLING- PK	2204-5-501-4350400	17.63
NORTHERN INDIANA PUBLIC S	2157000015-053023	06/09/2023	1020 MCDONALD- PK	2204-5-501-4350200	120.10
NORTHERN INDIANA PUBLIC S	2157360055-053023	06/09/2023	301 NIBCO- PK	2204-5-501-4350200	87.92
INDIANA MICHIGAN POWER	04058946304-053123	06/09/2023	401 RIVERVIEW- PK	2204-5-501-4350100	24.65
INDIANA MICHIGAN POWER	04215485709-053123	06/09/2023	131 TAYLOR- PK	2204-5-501-4350100	294.79
INDIANA MICHIGAN POWER	04116178304-060123	06/09/2023	624 E JACKSON- PK	2204-5-501-4350100	27.39
INDIANA MICHIGAN POWER	04196896700-060123	06/09/2023	101 GOSHEN- PK	2204-5-501-4350100	50.36
COMCAST BUSINESS	174667962-060123	06/16/2023	PHONE SVC- JUNE- PK	2204-5-501-4320400	92.96
INDIANA MICHIGAN POWER	04267434407-060523	06/16/2023	1324 MARGUERITE- PK	2204-5-501-4350100	283.21
INDIANA MICHIGAN POWER	04844997017-060523	06/16/2023	52256 IDEAL BEACH- PK	2204-5-501-4350100	887.96
INDIANA MICHIGAN POWER	04271939508-060923	06/16/2023	500 E BEARDSLEY- PK	2204-5-501-4350100	24.62
INDIANA MICHIGAN POWER	04925947501-060923	06/16/2023	1320 OLIVE- PK	2204-5-501-4350100	105.38
ELKHART PUBLIC UTILITIES	110354004-060923	06/09/2023	W. BEARDSLEY/RIVERSIDE- PK	2204-5-501-4350400	17.63
ELKHART PUBLIC UTILITIES	1103572004-060923	06/09/2023	WESTON PK- PK	2204-5-501-4350400	53.53
ELKHART PUBLIC UTILITIES	1105220006-060923	06/09/2023	W LEXINGTON- PK	2204-5-501-4350400	8.09
ELKHART PUBLIC UTILITIES	1105360000-060923	06/09/2023	701 ARCADE- PK	2204-5-501-4350400	70.36
ELKHART PUBLIC UTILITIES	1105360104-060923	06/09/2023	701 ARCADE- PK	2204-5-501-4350400	33.81
ELKHART PUBLIC UTILITIES	1105360205-060923	06/09/2023	701 ARCADE- PK	2204-5-501-4350400	736.42
ELKHART PUBLIC UTILITIES	1105360603-060923	06/09/2023	701 ARCADE- PK	2204-5-501-4350400	156.01
ELKHART PUBLIC UTILITIES	1105390003-060923	06/09/2023	EAST-WEST- PK	2204-5-501-4350400	8.09
ELKHART PUBLIC UTILITIES	1200680000-060923	06/09/2023	500 E BEARDSLEY- PK	2204-5-501-4350400	52.37
ELKHART PUBLIC UTILITIES	1203400000-060923	06/09/2023	1320 OLIVE- PK	2204-5-501-4350400	53.95
ELKHART PUBLIC UTILITIES	1222370300-060923	06/09/2023	619 BALDWIN- PK	2204-5-501-4350400	79,45
			Fund 22	04 - PARK & RECREATION Total:	5,791.44
Fund: 2520 - PARK PROGRAM					
COMCAST CABLE	0116669-051923	06/02/2023	52256 IDEAL BEACH- PK	2520-5-509-4320400	116.25
COMCAST CABLE	0941317-052123	06/09/2023	INTERNET SVC- JUNE- PK	2520-5-509-4320400	116.25

Expense Approval Report

Payment Dates: 5/26/2023 - 6/16/2023

Vendor Name

Payable Number

ELKHART COUNTY REGIONAL 9000016900-060823

Post Date 06/16/2023

Description (Item)

Account Number

Amount

WASTEWATER FEES- APRIL TO 2520-5-509-4350400

312.22 544.72

Fund 2520 - PARK PROGRAM Total:

Grand Total:

6,514.16

6/16/2023 10:27:56 AM

Report Summary

Fund Summary

Fund	Payment Amount
1101 - GENERAL	178.00
2204 - PARK & RECREATION	5,791.44
2520 - PARK PROGRAM	544.72
Grand Tota	i: 6,514.16

Account Summary

Account Number	Account Name	Payment Amount
1101-5-016-4390900	Other Services & Charge	178.00
2204-5-501-4320400	Telephone & Communic	475.42
2204-5-501-4350100	Electricity	2,988.60
2204-5-501-4350200	Natural Gas	528.89
2204-5-501-4350400	Water & Sewer	1,603.53
2204-5-501-4390900	Other Services & Charge	195.00
2520-5-509-4320400	Telephone & Communic	232.50
2520-5-509-4350400	Water & Sewer	312.22
	Grand Total:	6,514.16

Project Account Summary

Project Account Key		Payment Amount
None		6,514.16
	Grand Total:	6,514.16



City of Elkhart

Expense Approval Report

By Fund

Post Dates 6/15/2023 - 6/15/2023

Vendor Name	Payable Number	Post Date	Description (Item)	Account Number	Amount
Fund: 2204 - PARK & RECREA	TION				
CITY OF ELKHART	EEC/NYCRR	06/15/2023	Funding for NYC RR Museum	2204-5-501-4520000	125,000.00
CITY OF ELKHART	EEC/NYCRR	06/15/2023	Funding for EEC	2204-5-501-4520000	600,000.00
			Fund 22	04 - PARK & RECREATION Total:	725,000.00

Grand Total: 725,000.00

Post Dates: 6/15/2023 - 6/15/2023

Report Summary

Fund Summary

Fund

Payment Amount

2204 - PARK & RECREATION

725,000.00

Grand Total:

725,000.00

Account Summary

Account Number 2204-5-501-4520000 **Account Name** To Other Funds **Payment Amount** 725,000.00

Grand Total:

725,000.00

Project Account Summary

Project Account Key

None

Payment Amount

725,000.00

Grand Total:

725,000.00

MEMORANDUM OF UNDERSTANDING

This MEMORANDUM OF UNDERSTANDING ("Agreement") is made as of the _____ day of _____, 2023 by and between the CITY OF ELKHART, INDIANA ("City") on behalf of the Elkhart Parks and Recreation Department and The United Village Inc.

RECITALS

Elkhart Parks and Recreation ("Parks") is a department of City organized under the provisions of §36-10-3-1 et. seq. of the Indiana Code.

THE UNITED VILLAGE INC. (UV) is a nonprofit organization with a mission to empower the communities of Elkhart County and create the next generation of leaders.

UV and Parks desire to offer collaborate on a community event for the Southside Community of Elkhart; Unity Rally and Peace Run /Walk at Roosevelt Park.

City and UV believe it is in best interest of the parties to this agreement for them to agree to establish and/or clarify their respective rights and responsibilities concerning the operation and funding for this program.

In consideration of the foregoing and the mutual covenants and agreements herein contained, and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties hereby agree as follows:

- 1. UV will lead the Community Event on March 20, 2023.
- 2. The community event will take place at Roosevelt Park
- 3. The course will run from 9:00-12:00pm.
- 4. The registration cost for 1 Mile Peace Walk is \$20.00 per participant.
- 5. The registration cost for 3K Peace Run is \$20.00 per participant.
- 6. The registration cost for 3K Peace Run Team is \$30.00 per team.
- 7. The registration for Peace Run Vendor Table is \$25.00 per table.
- 8. Parks will be donating one Ideal Day Pass for each participant.
- 9. UV will keep 100% of the program fees
- 10. Parks will create online registration form and collect those fees.

- 11. Liability insurance will be provided by UV in amounts of \$1M.
- 12. Governing Law—It is the intention of Parties to this Agreement all suits and special proceedings under this Agreement, be construed in accordance with and governed, to the exclusion of the law of any other forum, by the laws of the State of Indiana, without regard to the jurisdiction in which any action or special proceeding may be instituted.
- 13. Severability— Should there be a conflict between any provision of this Agreement and applicable laws of the State of Indiana said laws will prevail and such provisions of the Agreement will be amended or deleted as necessary in order to comply with said laws.
- 14. Modification—This Agreement may be supplemented, amended, or modified only by the mutual agreement of Parties. No supplement, amendment or modification of this Agreement shall be binding unless it is in writing and signed by all parties.
- 15. Notices—All notices or demands required or desired to be given by either party to the other with respect to this Agreement will be in writing, will be addressed as provided below, and will be: The City of Elkhart, Indiana, c/o John Espar, Corporate Counsel, 229 S. Second St. Elkhart, IN 46516.
- 16. Delivered personally, in which case the notice or demand will be deemed given and served upon receipt or refusal to accept such notice; or
- 17. Sent by a nationally recognized overnight courier service, prepaid or billed to sender, in which case the notice or demand will be deemed given and served upon receipt or refusal to accept receipt. Either party may change its address or add additional parties for receipt of notices by giving notice of such change to the other party in accordance with the provisions of this Section.
- 18. Entire Agreement—This Agreement constitutes the final agreement between THE UNITED VILLAGE INC and City related to the operation of "Unity Rally and Peace Run /Walk at Roosevelt Park". No representation, promise or inducement has been made by either party that is not embodied in this Agreement, and neither party shall

be bound by or liable for any alleged representation, promise or inducement not specifically set forth herein.

IN WITNESS WHEREOF, the parties hereto have each executed this Memorandum of Understanding, on the date and year first written above.

	By:
Date:	
	(Printed Name, Title)
	CITY OF ELKHART, INDIANA
	By its BOARD OF PARKS AND RECREATION
	By:
Date:	
	(Printed Name, Title)

MEMORANDUM OF UNDERSTANDING

This MEMORANDUM OF UNDERSTANDING ("Agreement") is made as of the 20th of June 2023 by and between the CITY OF ELKHART, INDIANA ("City") on behalf of the Elkhart Parks and Recreation Department and Dwight Weber.

RECITALS

Elkhart Parks and Recreation ("Parks") is a department of City organized under the provisions of §36-10-3-1 *et. seq.* of the Indiana Code.

Dwight Weber has been coaching since 2020 building off decades of experienced executive leadership. He has coaching certifications from Gravitational Leadership, Forge America, and Thrive United of Crossroads United Way, and is in the process of receiving his ICF coaches certificate (International Coaching Federation).

Mr. Weber will provide executive coaching to Superintendent Jamison Czarnecki, and work through assessments for motivation, EQ, and conflict profiles as well as an enhanced DISC profile. He will also provide coaching through the tribulations of leadership.

City and Dwight Weber believe it is in the best interest of the parties to this agreement for them to agree to establish and/or clarify their respective rights and responsibilities concerning the operation and funding for this program.

In consideration of the foregoing and the mutual covenants and agreements herein contained, and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties hereby agree as follows:

- 1. Coaching will be for 8 coaching at \$75 per 1-hour session for \$600.00 total.
- 2. Governing Law—It is the intention of Parties to this Agreement all suits and special proceedings under this Agreement, be construed in accordance with and governed, to the exclusion of the law of any other forum, by the laws of the State of Indiana, without regard to the jurisdiction in which any action or special proceeding may be instituted.

- Severability— Should there be a conflict between any provision of this Agreement
 and applicable laws of the State of Indiana said laws will prevail and such provisions
 of the Agreement will be amended or deleted as necessary in order to comply with
 said laws.
- 4. Modification—This Agreement may be supplemented, amended, or modified only by the mutual agreement of Parties. No supplement, amendment or modification of this Agreement shall be binding unless it is in writing and signed by all parties.
- 5. Notices—All notices or demands required or desired to be given by either party to the other with respect to this Agreement will be in writing, will be addressed as provided below, and will be: The City of Elkhart, Indiana, c/o John Espar, Corporate Counsel, 229 S. Second St. Elkhart, IN 46516.
 - Dwight Weber, 1012 Strong Ave. Elkhart, IN 46514
- 6. Delivered personally, in which case the notice or demand will be deemed given and served upon receipt or refusal to accept such notice; or
- 7. Sent by a nationally recognized overnight courier service, prepaid or billed to sender, in which case the notice or demand will be deemed given and served upon receipt or refusal to accept receipt. Either party may change its address or add additional parties for receipt of notices by giving notice of such change to the other party in accordance with the provisions of this Section.
- 8. Entire Agreement—This Agreement constitutes the final agreement between City and Dwight Weber No representation, promise or inducement has been made by either party that is not embodied in this Agreement, and neither party shall be bound by or liable for any alleged representation, promise or inducement not specifically set forth herein.

IN WITNESS WHEREOF, the parties hereto have each executed this Memorandum of Understanding, on the date and year first written above.

Ву:	 	

Date:	
	(Printed Name, Title)
	CITY OF ELKHART, INDIANA
	By its BOARD OF PARKS AND RECREATION
	D
	By:
Date:	
	(Printed Name, Title)

WAGE RESOLUTION

City of Elkhart Parks and Recreation Regular, Part-Time and Seasonal Employees

BE IT RESOLVED:

That the following wages are hereby adopted for implementation by the City of Elkhart's Board of Parks and Recreation effective January 1, 2023.

The schedule below establishes pay levels for Regular, Part-Time, and Seasonal employees for the 2023 Season:

PARKS PROGRAMMING/FACILITY STAFF

MANAGERS			ASSISTANT MANAGERS		
	START	<u>MAX</u>		<u>START</u>	<u>MAX</u>
Concessions	\$17.00	\$19.00	Concessions	\$14.00	\$16.00
Day Camp	\$17.00	\$19.00	Day Camp	\$15.00	\$17.00
NIBCO	\$17.00	\$19.00	Ideal Beach	\$15.00	\$17.00
Riverview	\$17.00	\$19.00	McNaughton	\$14.00	\$16.00
Softball Director	\$17.00	\$19.00	NIBCO	\$14.00	\$16.00
Swim Lessons	\$17.00	\$19.00	Pierre Moran	\$15.00	\$17.00
Tennis Lessons	\$17.00	\$19.00	Riverview	\$14.00	\$16.00
Program Manager	\$17.00	\$19.00	Softball	\$15.00	\$17.00
Aquatics Manager	\$17.00	\$20.00	Swim Lessons	\$15.00	\$17.00
			Tennis Lessons	\$14.00	\$16.00
			Asst Program Manager	\$14.00	\$16.00

FACILITY STAFFING			PROGRAMMING STAFFING		
	<u>START</u>	<u>MAX</u>		START	<u>MAX</u>
Cashiers Concessions Staff Lifeguards NIBCO Skate Attendants Maintenance Staff McNaughton Attendants	\$12.00 \$12.00 \$14.00 \$12.00 \$12.00 \$12.00	\$14.00 \$14.00 \$16.00 \$14.00 \$14.00 \$14.00	Baseball Supervisor Cheerleading Instructor Day Camp Group Leader Day Camp Site Manager Lesson Instructors Riverview Supervisor Program Aide	\$11.00 \$11.00 \$14.00 \$15.00 \$13.00 \$14.00 \$12.00	\$14.00 \$14.00 \$16.00 \$17.00 \$15.00 \$16.00 \$15.00

OTHER STAFFING

<u>UMPIRES AND REFEREES –</u> <u>PER GAME</u>

	START	<u>MAX</u>		<u>START</u>	MAX
Maintenance Assistant	\$14.00	\$19.00	Basketball Referee	\$15.00	\$25.00
Maintenance Manager	\$15.00	\$20.00	Soccer Referees	\$15.00	\$25.00
Park Rangers	\$14.00	\$20.00	Softball Umpire	\$30.00	\$35.00
Parks Dept. Office Asst.	\$15.00	\$20.00	Volleyball Referee	\$15.00	\$25.00
Bus Driver	\$15.00	\$30.00	•		•
Farmers Market Manager	\$13.00	\$17.00			

City of Elkhart Parks and Recreation Department 2023 WAGE RESOLUTION

NOTE: The Superintendent/Recreation Manager has the authority to set the actual rates within the approved ranges due to skill, ability, advanced training, specialized training/certificates, or availability.

APPROVED this 20th Day of December 2022

by the CITY OF ELKHART BOARD OF PARKS AND RECREATION

Sarah Santerre	- President
Nekeisha Alayna Alexis	– Vice President
Christopher Baker	- Secretary
Mark Datema	- Treasurer



ELKHART BOARD OF WORKS 2023 USE & EVENT PERMIT APPLICATION

229 South 2nd Street Elkhart, IN 46516 Phone: (574) 294-5471

Date Received: 517 25

NSTRUCTIONS: Please carefully read the "Event I Incomplete applications and/or a	Procedures & Gu oplications withou	idelines" sections before completir ut the required application fee will r	ng this application. not be processed.	
EVENT NAME: A'Nu COE 1st Friday's		DA		7/23, 08/04/23,
LOCATION/VENUE REQUESTED Ullery P	ark	*	09/0	1/23, 10/06/23
LOCATION/VENUE 2 ND CHOICE REQUESTED	Ullery Par	rk		
OFFICE USE: DATE/VENUE AVAILABLE	No Yes			
APPLICANT INFORMATION				
NAME OF APPLICANT Ashley Spencer				
NAME OF EVENT ORGANIZER/PRODUCER				
Ashley Spencer				
PRODUCTION COMPANY/ORGANIZATION				
STREET ADDRESS			**************************************	APT/UNIT/SUITE
CITY			STATE	ZIP CODE
t			- IN	46517
E-MAIL ADDRESS				<u></u>
DAYTIME PHONE	FAX		JOELL BLIONE	
DAT TIME PHONE	FAX		CELL PHONE	1
EVENT DAY ON-SITE CONTACT * REQUIRE)	DAYTIME PHONE	CELL PHONE	
EVENT SPONSOR: Are you, the applic (Please check No or Yes Below) No Yes——Name of Organ	12	ng this event on behalf of an	other organization?	
NAME OF SPONSORING ORGANIZATION C			SPONSORING O	RG. CONTACT PHONE
ADDRESS OF SPONSORING ORGANIZATIO	N	CITY		ZIP CODE
Additional Documentation Required: If you checked "you are organizing this event.	es" above, please	submit an endorsement letter from the	organization (on their official Lette	erhead) on whose behalf
Is the sponsoring organization a 501 (Please check No or Yes below.)	(c) (3)?			
No Yes Please attach o	urrent verification	of 501(c) (3) status no		
Does the sponsoring organization has (Please check No or Yes below.)	ve an ST-105	General Sales Tax Exempt	ion Status?	
No Yes——— Please attach o	current verification	of ST-105 status	FEDERAL TAX ID#	je.

EVENT INFORMATION	
ACTUAL EVENT TIMES (NOT INCLUDING SETUP or TAKE DOWN)	
Start Time: 5pm Finish T	ime: 10pm
Additional Information Required: Please attach a schedule if your ex	vent includes multiple days and/or varying times.
SET-UP TIME(S)	TEAR-DOWN
From: 1pm To: 4:30pm	From: 9:30pm 11pm
EXPECTED NUMBER OF PARTICIPANTS: 60 - 75	
If the event is reoccurring, please submit the past number of participan	nts below.
2022 NUMBER OF PARTICIPANTS:	2021 NUMBER OF PARTICIPANTS:
PREVIOUS YEAR DATE/LOCATION: Has this event been previously (Please check No or Yes below.)	y held?
No Yes Event Name:	
Location:	Date:
EVENT DESCRIPTION	
	vrite a brief description of your event. ent, please describe: community gathering and event
☐ Concert/Performance ☐ Bike Ride ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	
Brief Description of Event: Games, races, community com	ook out. Just a give back to our community every 1st Friday of eac
Everything will be free to the community	
Please provide a detailed description of your event. Document	(s) with this information or other materials describing this event may be attached.
PROHIBITED ACTIVITIES IN CITY PARKS (By Ordi	inances)
No Fundraising Allowed	
No Bounce Houses Allowed	
No Admission Fees Allowed	

EVENT LOCIOTIOS
EVENT LOGISTICS
All event logistics are subject to the approval of the "EPRB." Additionally, certain event features, such as street closures and separate permits from the Cit of Elkhart. For information regarding City of Elkhart Permits, please call 574-294-5471 ext. 1055 or e-mail Nancy. Wilson@coei.org
FOOD AND ALCOHOLIC BEVERAGES:
Are you requesting permission to serve and/or sample food and/or beverages? (Please check the appropriate response.) No Food or Alcoholic Beverages may be sold on Park Property. X Yes, to the participants only X Yes, to the general public
If applicable Name of Caterer/Vendor:
IF YES, please describe: Community come together and provide free hotdogs, hamburgers and brats to the community Each month the free food may vary just depend on donations.
Additional Information Required: If you checked "Yes" above, a Short Term Permit is required from the Elkhart County Health Department.
Indicate location where food/beverages will be served on the Site Map.
TENTS AND CANOPIES If you plan to erect tents or canopies, describe and give the number of tents and/or canopies, along with the sizes of each. A separate sheet with this information may be attached. All tents and/or canopies must be indicated on the Site Map. The Event Organizer is responsible for any damage caused to City/Park property/facility and must consult "BOW" prior to installation. Building and Zoning Clearance Required. Will your event feature tents and/or canopies? (Please check No or Yes below.) No Yes Number of Tents/Canopies: vary per participant
Tent/Canopy Size(s): 10x10 pop up tent (If you have multiple tents/canopies with varying sizes, indicate the number with the corresponding size.) The following is required for tents over 400 square feet (20 ft. X 20 ft.): Require inspections by the Elkhart City Fire Department. Refer to Indiana Fire Code 3103.2 Utilities must be marked. Call 811 for Utilities to mark the tent area. Permits are required, fees apply - Permits must be acquired and paid for at the Permit Center at 229 South Second Street, Elkhart-574-296-9331
Additional Documentation Required: If you checked "Yes" above, please indicate the number of tents with the corresponding size. Document with this information may be attached. All tents and/or canopies must be indicated on the Site Map.
VEHICLES Are you requesting permission to operate staff/supply vehicles on City/"EPRB" service roads for delivery of equipment, supplies, or catering/vending? No Yes Number of Vehicles:
Are you requesting permission to retain vehicles on-site for the duration of the event?
X No Yes → Number of Vehicles:

STAGES/PLATFORMS
(Please check No or Yes below) If yes, please provide additional information as requested below. Document(s) with this information may be attached.
Will your event include the installation of stages/platforms? The "BOW" must approve the location of the stages/platforms. (Please check No or Yes below.) NO STAGES ARE PROVIDED OR AVAILABLE FROM THE CITY OF ELKHART OR ITS DEPARTMENTS.
*May require additional insurance.
X No Yes Number of Stage(s):
Stage Description(s):
Stage Owner Phone Number:
Address: Street, City, State, Zip
Stage Specs will be required.
Additional Documentation Required: If you checked "Yes" above, please clearly indicate the number of stages/platforms on the Site Map.
PORTABLE TOILETS
(Please check No or Yes below) If yes, please provide additional information as requested below. Document(s) with this information may be
attached. All portable toilets must be removed from City/"EPRB" property within 48 hours of event (if the event is on a Saturday or a Sunday,
portable toilets must be removed that following Monday). The location must be approved by the City/"EPRB." ADA-compliant toilets are required for Public Gatherings.
No X Yes Number of Portable Toilets: 2AND Number of Accessible ADA Portable Toilets:
Company/Description(s): A Sani-Kan
Additional Documentation Required: If you checked "Yes" above, please clearly indicate the number of portable toilets on the Site Map
FENCING
Will the event include the installation of event fencing by the Event Organizer? The location of the fencing must be approved by the "BOW"/"EPRB."
(Please check No or Yes below.)
X No Yes Description:
NO Tes Description.
May require a call to 811 for location marking of Utilities. Buildings and Grounds must also approve to make sure sprinkler lines are not in jeopardy.
EMERGENCY SUPPORT SERVICES- Motor Vehicle and Pedestrian Control
Will the event require Emergency Support Services? (Please check No or Yes below.)
X No Yes —
₩ 140
Number of Emergency Management Staff Requested
\$50.00 Minimum of two Event Personnel
\$25.00 Event Personnel each per event
Total Cost \$
Additional Documentation Required: If you checked "Yes" above, please clearly indicate the number of personnel and where they should be located on

Additional Documentation Required: If you checked "Yes" above, please clearly indicate the number of personnel and where they should be located on the site map. A separate meeting may be required with the Emergency Management Personnel.

FIRE DEPARTMENT	
EMERGENCY MEDICAL SERVICES REQUESTED: Please indicate what services you are requesting. Mark all that are requested	i:
X No Yes ——	
Time(s) Requested:	
Ambulance(s) Number Requested	
Medic Kubota	
Fire Truck	
First Aid Station Please indicate your reason that a Fire Truck may be needed at your Event. Please include any special requests.	
The second control of the control of	
Additional Information May Be Required.	
BUILDINGS AND GROUNDS	
DOILDING / MID GIVES IID	-
EENCING: The following are excitable for a fee. Mark all that are requested:	
FENCING: The following are available for a fee. Mark all that are requested:	
Event Fencing Number of Sections Requested Other	
Snow Fencing Number of Feet Requested Other	-
Additional fees may apply.	
WASTE RECEPTACLES	
Will the event require additional waste receptacles? The location of the waste receptacles must be approved by the "BOW"/"EPRB." (Please check No or Yes below.) Additional fees may apply.	
mouho 2 overa cape for the trach	
No X Yes Thaybe 3 extra cans for the trash	
Will the event require Buildings & Grounds to set up or deliver other equipment? If Yes, please list below.	
(Please check No or Yes below.)	
Additional Documentation Required: If you checked "Yes" above, please clearly indicate the number of fencing on the site map.	
Additional Documentation Required. If you checked Test above, please cleany indicate the number of lending of the site map.	
PARKS DEPARTMENT	
EQUIPMENT REQUESTED:	
X No Yes	
Golf Cars ONLY AVAILABLE FOR CITY-ORGANIZED EVENTS (I.E., Rhapsody, Summer Chill, WinterFest, etc.)	
Risers ONLY AVAILABLE FOR CITY-ORGANIZED EVENTS (I.E., Rhapsody, Summer Chill, WinterFest, etc.)	
ONLY IVAL AD EFOR OF CORDANGER PRETOUR DISCUSSION AND ADDRESS OF THE PROPERTY	
Stage ONLY AVAILABLE FOR CITY-ORGANIZED EVENTS (I.E., Rhapsody, Summer Chill, WinterFest, etc.) Trailer (tables/chairs) ONLY AVAILABLE FOR CITY-ORGANIZED EVENTS (I.E., Rhapsody, Summer Chill, WinterFest, etc.)	

City Departments Only may request the use of these items.

POLICE DEPARTMENT		
POLICE SERVICES: Please indicate what services you are requesting. Mark all that are requested:		
No Yes		
Please indicate why you feel Police presence may be needed at your E	Event.	
The second control of the present control of the co		
Additional Information May Be Required.		
STREET DEPARTMENT		
STREET CLOSURES: Will you be require	ring closure of City streets for your event?	
Cleveland	A Ave and 7th Ave	
No X Yes Street Name Cleveland Please mark all that may apply:	A Ave and Anti-Ave	
Street Closed From: 6th St	To: 7th St	
	To: Garfield Ave	
	To:	
	To:	
	To:	
Street Closed From:	To:	
OTHER STRUCTURES		
Will your event include other structures not identified above? To (Please check No or Yes below.)	The location of all other structures must be approved by the "EPRB".	
X No Yes Number of Structures:		
Description(s):		
Additional Information Required: If you checked "Yes" above, pand all other structures on the Site Map. Ordering of all equal to the structures on the Site Map.	please indicate the location of all stages/platforms, portable toilets, fencing, barricades uipment must be done by the Event Organizer.	

BOARD OF WORKS PERMITS

(Please check No or Yes below) If yes, please provide additional information as requested below. Document(s) with this information may be attached. Are you requesting the use of City Plaza? Water: Yes No no Electric: Yes No no Plaza Sign: Yes No Sign Information: Bridge Banner: Yes No no Please indicate location: no Bridge Banner- North Main Street- Memorial Bridge Bridge Banner - Johnson Street NOISE ORDINANCE Will the event require an exception to noise by the Event Organizer? (Please check No or Yes below.) DJ - for music No X Yes Reason: Parade and Special Exception to Noise Ordinance: Yes yes No Public Assembly and Special Exception to Noise Ordinance: Yes yes No Special Exception to Noise Ordinance: Yes yes No Persons or entities affected by this special exception to the Noise Ordinance: (required) neighbors in proximity to park What measures will be taken to mitigate the impact of the Noise exception on surrounding persons (required) music will be kept to a reasonable level

EMERGENCY ACTION PLAN

PURPOSE (Required for all Applicants)

- A. This emergency action plan predetermines actions to take before and during the EVENT in response to an emergency or otherwise hazardous condition. These actions will be taken by organizers, management, personnel, and attendees. These actions represent those required prior to the event in preparation for and those required during an emergency.
- B. Flexibility must be exercised when implementing this plan because of the wide variety of potential hazards that exist for this event. These hazards include but are not limited to Fire, Medical Emergencies, Severe Weather, or situations where Law Enforcement is required.

BASIC PLAN

A. The emergency action plan event representative will be identified as the point of contact for all communications regarding the event. This person is identified as the <u>primary contact</u> and must be present during the event:

Contact full name (first/last name): Ashley Spencer

Contact cell number (area code plus number):

574-338-2366

EVENT MAPS

SITE MAP (Required for all Applicants)

Please attach a Site Map clearly indicating the set-up of the event. An example would be the Start/Finish of a walk, run, or race event and/or the set-up area of a festival or cultural event. The Site Map should indicate the relative location of the following; all sources of amplified sound and the direction of the sound; tents and canopies with sizes, stages, promotional vehicles, portable toilets, fencing, barricades, and other structures; proposed driving paths for all equipment and supply vehicles; location of vehicles you wish to retain on "EPRB" property during the event; locations of food and proposed street closures. All site Maps are subject to the approval of "EPRB."

ROUTE MAP (Runs, Walks, Bike Rides)

All events that include a run/ walk or other activity in which participants will be following a course will be required to attach a Route Map and a written document of the proposed route of the event. All proposed Route Maps are subject to "EPRB" approval. The use of any outside the Parkways or parks, such as City streets, must be approved by the Board of Public Works.

For a more detailed Route Map, it is recommended to use mapmyrun.com (this is a free website), Bing maps, or Google maps

ELKHART COUNTY HEALTH DEPARTMENT

An Elkhart County Health Department Permit for food and beverage must accompany event plans. Please contact the Elkhart County Health Department at 574-523-2283.

following steps have been completed:			
Have yo	ou?		
	Signed and dated your application?		
	Attached your event site map? (and route map if a run/walk event)		
	Designated the onsite Emergency Contact Person?		
	Provided all documents and information as requested throughout the application? ST-105, 501 (c) (3), etc.		
	Certificate of Insurance listing the City of Elkhart as a Certificate Holder		
	Tent Permit, if applicable		
Civil City of Elkhart Elkhart Park Board for and on behalf of Parks & Recreation 229 South Second Street Elkhart, IN 46516 Civil City of Elkhart 229 South Second Street Elkhart, IN 46516			
Submit	t your completed application to:		
	For Parks:	For Board of Works:	
•	of Elkhart Parks & Recreation Board & Event Permitting	City of Elkhart Board of Public Works Use & Event Permitting	
229 5	outh 2 nd Street	229 South 2nd Street	
Elkha	rt, IN 46516	Elkhart, IN 46516	
Phon	e (574) 295-7275	Phone (574) 294-5471 ext. 1055	
Emai	l:elkhartcityparkspermits@coei.org	Email:Nancy.Wilson@coei.org	

Thank you for completing your Special Use Permit Application. Before you submit your application, please make sure that the

INDEMNIFICATION, WAIVER AND RELEASE

In consideration of the granting of a Permit by the BOARD OF PUBLIC WORKS and/or the BOARD OF PARKS AND RECREATION, I hereby release, discharge, indemnify, protect and hold harmless the City of Elkhart, Indiana, and all of its agents, officials, and employees, of and from any and all claims, demands, damages, both compensatory and punitive, actions, causes of actions, costs, loss of services or consortium, and any expenses incurred for all personal injury or property damage sustained by me or any third party arising out of or in any way involving the use of the City's property during the event. I further agree to indemnify, protect, and hold harmless the City of Elkhart from any and all claims and causes of action, including attorney fees, caused by my negligence or willful conduct that is in any way related to the use of the City's property. I am more than 18 years of age and am fully competent. I have read in full this agreement and understand and agree to all of its terms and conditions. I have signed this instrument voluntarily and with full knowledge of the fact that I am waiving and releasing any and all claims for myself that may subsequently arise, regardless of their nature and extent. Furthermore, if signed on behalf of an entity, I swear and affirm that I am duly authorized to execute this INDEMNIFICATION, WAIVER, AND RELEASE on behalf of the entity.

APPLICANT SIGNATURE

I have read the terms and conditions outlined in this document and the City of Elkhart, City of Elkhart Board of Works, and the City of Elkhart Park & Recreation Board Code of Ordinances and agree to abide by them.

Unless expressly provided for in the permit, Use & Event Permits do not grant the permit holder exclusive rights to park property, including but not limited to any right to restrict access, use, and First Amendment activities of any person on park property open to the general public.

I agree to be bound by the above terms as a condition to the issuance of a Special Event Permit. All payments are due upon the BOW and EPRD final approval.

THIS DOCUMENT CONTAINS A RELEASE OF ALL CLAIMS AND A WAIVER OF RIGHTS. I HAVE CAREFULLY READ ALL OF ITS TERMS AND RETAINED A COPY OF THIS DOCUMENT FOR MY OWN RECORDS.

Ashley Spencer	Ashley Spencer	
PRINTED NAME OF APPLICANT	SIGNATURE OF APPLICANT	
	DATE	
WITNESSED: Clerk of the Board of Works	Date	_
APPROVED: BOARD OF PUBLIC WORKS		
President	Date	
RATIFIED: BOARD OF PARKS AND RECREATION (if applic	able)	
Dyseident or Secretary	Date	



ELKHART BOARD OF WORKS 2023 USE & EVENT PERMIT APPLICATION

229 South 2nd Street Elkhart, IN 46516 Phone: (574) 294-5471

Date Received:

ISTRUCTIONS: Please carefully read the "Event Procedures & Incomplete applications and/or applications with			
EVENT NAME: Elkhart Mennonite Worship		DATE(S) REQUESTED JU	ily 30, 2023
LOCATION/VENUE REQUESTED Island Park	· ·		
A77.	ughton Park	•	1
OFFICE USE: DATE/VENUE AVAILABLE No Y	es		
APPLICANT INFORMATION	son the transfer of the son of	Contract Walt Stewart	William Harris
NAME OF APPLICANT Sharon Norton, Pastor		anget to	
NAME OF EVENT ORGANIZER/PRODUCER	Annual Carlotte Control	3 1 - 10 - 2 - 1	
Fellowship of Hope Mennonite Church			
PRODUCTION COMPANY/ORGANIZATION			
STREET ADDRESS	VICENCE OF BUILDING		APT/UNIT/SUITE
STREET ADDRESS			AF 1/01/11/3011E
CITY	and the same of th	STATE	ZIP CODE
Elkhart		IN .	46516
E-MAIL ADDRESS	•		
DAYTIME PHONE FAX		CELL PHONE	
EVENT DAY ON SITE CONTACT * REQUIRED	DAYTIME PHONE	CELL PHONE	
IVII	culture in the contrata line.	ŧ .	0.0000000
EVENT SPONSOR: Are you, the applicant, organic (Please check No or Yes Below) No Yes——— Name of Organization:	zing this event on behalf of	another organization?	See Canaly, passages and control business
NAME OF SPONSORING ORGANIZATION CONTACT		SPONSORING	ORG. CONTACT PHONE
ADDRESS OF SPONSORING ORGANIZATION	CITY		ZIP CODE
Additional Documentation Required: If you checked "Yes" above, plear you are organizing this event.	se submit an endorsement letter from t	the organization (on their official L	etterhead) on whose behalf
Is the sponsoring organization a 501(c) (3)? (Please check No or Yes below.)			g of the for
No Yes——— Please attach current verificat	ion of 501(c) (3) status	,	
Does the sponsoring organization have an ST-10 (Please check No or Yes below.)	05 General Sales Tax Exem	nption Status?	
No Yes——— Please attach current verificat	ion of ST-105 status	FEDERAL TAX ID#	
	20		

EVENT INFOR	RMATION			和金融等
ACTUAL EVENT TIMES (NOT INCLUDING SETUP or TAK	E DOWN)	·	
Start Time: 10:00		Finish Time: 12:30		
Additional Information R	equired: Please attach a schedul	if your event includes multiple	days and/or varying times.	
SET-UP TIME(S)	1.00	TEAR-DOWN		
From: 12:30	_{To:} 1:00	12:30	7 1:00	
EXPECTED NUMBER OF 300	FPARTICIPANTS;		· · · · · · · · · · · · · · · · · · ·	
	please submit the past number of	participants below.		1 s
2022 NUMBER OF PART	icipants: rained out	2021 NUMBE	R OF PARTICIPANTS:	
DDEVIOUS VEAD DATE				
(Please check No or Yes	/LOCATION: Has this event been below.)	previously neid?		
No ■Yes —	Event Name: Elkhart M	ennonite Worship	· .	
	Location Central Park	(got rained out though)	Date: July 23, 2022	
EVENT DESCRIPTI			Date.	
Please check what type	of event this is (Check all that app	(w) and write a brief deceription	on of your ovent	
☐ Walk/Run	Cultural Event		noi your event.	
☐ Art Fair/Festival	Public Rally/March	worship service		
Concert/Performance	☐ Bike Ride	**************************************	•	•
Service				
Brief Description of Event	! :			
This is a joint way	robin convice for Elleba	et Mannanita aburaha	Those will be seed and already	المسم
	e may have a picnic lui		es. There will be music and singing a	as well
, 5				
 		· · · · · · · · · · · · · · · · · · ·		
		· · · · · · · · · · · · · · · · · · ·		
•				
Please provide a de	talled description of your event. D	ocument(s) with this information	n or other materials describing this event may be attac	hed.
PROHIBITED ACTI	VITIES IN CITY PARKS (I	3v Ordinances)		
No Fundraising Allow	•			
No Bounce Houses A				
•				
No Admission Fees A	-inómea			

EVENT LOGISTICS
All event logistics are subject to the approval of the "EPRB." Additionally, certain event features, such as street closures and separate permits from the C
of Elkhart. For Information regarding City of Elkhart Permits, please call 574-294-5471 ext. 1055 or e-mail Nancy.Wilson@coel.org
FOOD AND ALCOHOLIC BEVERAGES:
Are you requesting permission to serve and/or sample food and/or beverages? (Please check the appropriate response.) No Food or Alcoholic Beverages may be sold on Park Property. Yes, to the participants only Yes, to the participants only Yes, to the general public
If applicable Name of Caterer/Vendor:
IF YES, please describe: people may bring their own food as a picnic. Let me know if I need to check yes on this instead of no.
Additional Information Required: If you checked "Yes" above, a Short Term Permit is required from the Elkhart County Health Department. Indicate location where food/beverages will be served on the Site Map.
TENTO AND CANODIES
TENTS AND CANOPIES If you plan to erect tents or canopies, describe and give the number of tents and/or canopies, along with the sizes of each. A separate sheet with this information may be attached. All tents and/or canopies must be indicated on the Site Map. The Event Organizer is responsible for any damage caused to City/Park property/facility and must consult "BOW" prior to installation. Building and Zoning Clearance Required.
Will your event feature tents and/or canopies? (Please check No or Yes below.)
■ No Yes Number of Tents/Canopies:
Tent/Canopy Size(s):
(If you have multiple tents/canopies with varying sizes, indicate the number with the corresponding size.) The following is required for tents over 400 square feet (20 ft. X 20 ft.):
Require inspections by the Elkhart City Fire Department. Refer to Indiana Fire Code 3103.2 Utilities must be marked. Call 811 for Utilities to mark the tent area. Permits are required, fees apply - Permits must be acquired and paid for at the Permit Center at 229 South Second Street, Elkhart-574-296-9331
Additional Documentation Required: If you checked "Yes" above, please indicate the number of tents with the corresponding size. Document with this information may be attached. All tents and/or canoples must be indicated on the Site Map.
VEHICLES Are you requesting permission to operate staff/supply vehicles on City/"EPRB" service roads for delivery of equipment, supplies, or catering/vending?
No Yes Number of Vehicles:
No Yes Number of Vehicles:
Are you requesting permission to retain vehicles on-site for the duration of the event?
No Yes Number of Vehicles:
Vehicle Description(s):

STAGES/PLATFORMS	
Please check No or Yes below) If yes, please provide additional information	no required below Decomposed/shuttle this later at the same that I
Vill your event include the installation of stages/platforms? The "BOW" must	as requested below. Document(s) with this information may be attached.
Please check No or Yes below.) NO STAGES ARE PROVIDED OR AVAILABLE FROM	M THE CITY OF ELKHART OR ITS DEPARTMENTS.
*May require additional insurance.	
No Yes Number of Stage(s):	
Stage Description(e):	
Stage Owner	Phone Number:
Address: Street, City, State, Zlp	
Stage Specs will be required.	
Additional Documentation Required: If you checked "Yes" above, please cle	early indicate the number of stages/platforms on the Site Man.
PORTABLE TOILETS	
(Please check No or Yes below) If yes, please provide additional information	n as requested below. Document(s) with this information may be
attached. All portable toilets must be removed from City/"EPRB" property wit	thin 48 hours of event (if the event is on a Saturday or a Sunday,
portable tollets must be removed that following Monday). The location must	be approved by the City/"EPRB."
ADA-compliant tollets are required for Public Gatherings.	
No Yes Number of Portable Toilets:	AND Number of Accessible ADA Portable Tollets:
Company/Description(s):	•
Additional Documentation Required: If you checked "Yes" above, please cl	learly indicate the number of portable toilets on the Site Map
FENCING	
Vill the event include the installation of event fencing by the Event Organizer	? The location of the fencing must be approved by the "BOW"/"EPRB."
Please check No or Yes below.)	
No Yes Description:	
•	
May require a call to 811 for location marking of Utilities. Buildings and Gro	ninde mijet alen annrava to maka ejira enzinklar linde ara not in laggardy
	and must also approve to make suite sprinkler miss are not in Jeopatay.
EMERGENCY SUPPORT SERVICES - Motor Vehicle and	Pedestrian Control
	The state of the s
Vill the event require Emergency Support Services? Please check No or Yes below.)	
No Yes -	
had a filter and the second of the filter and the f	
Number of Emergency Management Staff Requested	
	•
\$25.00 Event Personnel each per event	
	Total Cost \$
Additional Documentation Required: If you checked "Yes" above, please cla	early indicate the number of personnel and where they should be located on
\$50.00 Minimum of two Event Personnel \$25.00 Event Personnel each per event Additional Documentation Required: If you checked "Yes" above, please clethe site map. A separate meeting may be required with the Emergency Ma	early indicate the number of personnel and where they should be locate

FIRE DEPARTMENT
FIRE DEPARTMENT
EMERGENCY MEDICAL SERVICES REQUESTED: Please indicate what services you are requesting. Mark all that are requested:
■ No □ Yes ——>
Time(s) Requested:
Ambulance(s) Number Requested Medic Kubota
Fire Truck
First Aid Station
Please Indicate your reason that a Fire Truck may be needed at your Event. Please include any special requests.
स्व स्कृत कर के किया है जिल्ला
Additional Information May Be Required.
BUILDINGS AND GROUNDS
FENCING: The following are available for a fee. Mark all that are requested:
□ Event Fencing Number of Sections Requested Other □ Snow Fencing Number of Feet Requested Other
LI Show rending Number of recircledesies Other
Additional fees may apply.
WASTE RECEPTACLES Will the event require additional waste receptacles? The location of the waste receptacles must be approved by the "BOW"/"EPRB."
(Please check No or Yes below.) Additional fees may apply.
■ No Yes —
Wili the event require Buildings & Grounds to set up or deliver other equipment? If Yes, please list below. (Please check No or Yes below.)
No Yes Additional Documentation Required: If you checked "Yes" above, please clearly indicate the number of fencing on the site map.
PARKS DEPARTMENT
EQUIPMENT REQUESTED:
No Yes
Golf Cars ONLY AVAILABLE FOR CITY-ORGANIZED EVENTS (I.E., Rhapsody, Summer Chill, WinterFest, etc.)
Risers ONLY AVAILABLE FOR CITY-ORGANIZED EVENTS (i.E., Rhapsody, Summer Chill, WinterFest, etc.) Stage ONLY AVAILABLE FOR CITY-ORGANIZED EVENTS (i.E., Rhapsody, Summer Chill, WinterFest, etc.)
☐ Trailer (tables/chairs) ONLY AVAILABLEFOR CITY-ORGANIZED EVENTS (i.E., Rhapsody, Summer Chill, WinterFest, etc.)
NOTE: Bleachers and Stages are not available for public or private use.

No Yes	
Please indicate why you feel Police presence may be needed at y	our Event.
Additional Information May Be Required.	
STREET CLOSURES: Will you be red	quiring closure of City streets for your event?
STREET CLOSURES: Will you be red	quiring closure of City streets for your event?
No. Vos Stroot Namo	
No Yes Street Name Please mark all that may apply:	
Please mark all that may apply:	
	_{To:} 1:00
Please mark all that may apply: Street Closed From:	
Please mark all that may apply: Street Closed From: Street Closed From:	To: 1:00 To: To: To: To:
Please mark all that may apply: Street Closed From: Street Closed From: Street Closed From:	
Please mark all that may apply: Street Closed From: Street Closed From: Street Closed From:	To: 1:00 To: To: To: To: To:
Please mark all that may apply: Street Closed From:	To: 1:00 To: To: To: To: To:
Please mark all that may apply: Street Closed From: OTHER STRUCTURES	To: 1:00 To: To: To: To: To:
Please mark all that may apply: Street Closed From: OTHER STRUCTURES Will your event Include other structures not identified abov (Please check No of Yes below.)	To: To: To: To: To: To: To: To:
Please mark all that may apply: Street Closed From: OTHER STRUCTURES	To: To: To: To: To: To: To: To:

you requesting the use of City Plaza?	vide additional informa	ion as requested belov	w. Document(s) with th	ls information m	a <u>y</u> be attache
er.					
Yes No					
tno:					
Yes					
No Stant					
a Sign:					
No	·			•	
Information: 300					-
ge Banner:	-			•	
Yes No					
se indicate location:					
Bridge Banner- North Main Street- Mem	orial Bridge				
Bridge Banner – Johnson Street					
NEE ODDINANCE	•		·		
DISE ORDINANCE Il the event require an exception to noise by the	Event Organizer?	,			
	B Event Organizer r				
ease check No or Yes below.)		•			
No Yes Reason: _					····
				·	
No Yes Reason: —		•	·		. ,
No Yes Reason: — Ade and Special Exception to Noise Ordinance Yes	· · · · · · · · · · · · · · · · · · ·				······································
No Yes Reason: — Ade and Special Exception to Noise Ordinance Yes No					**************************************
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No Yes Reason: — Ide and Special Exception to Noise Ordinance Yes No Ide Assembly and Special Exception to Noise Ordinance Yes No Ide Assembly and Special Exception to Noise Ordinance:					
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No Yes Reason: — ade and Special Exception to Noise Ordinance Yes No Ilic Assembly and Special Exception to Noise O Yes No Cial Exception to Noise Ordinance: Yes	Ordinance: on to the Noise Ordinal	nce: (required)			
No Yes Reason: — ade and Special Exception to Noise Ordinance Yes No Ilic Assembly and Special Exception to Noise Ordinance: Yes No cial Exception to Noise Ordinance: Yes No sons or entities affected by this special exception	Ordinance: on to the Noise Ordinal	nce: (required)			
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No Yes Reason: — ade and Special Exception to Noise Ordinance Yes No Ilic Assembly and Special Exception to Noise Ordinance: Yes No clai Exception to Noise Ordinance: Yes No Sons or entitles affected by this special exception What measures will be taken to mitigate the interpretation of the second or entities affected by the special exception of the second or entities affected by the special exception of the second or entities affected by the special exception of the second or entities affected by the special exception of the second or entities affected by the special exception of the second or entities affected by the special exception of the second or entities affected by the special exception of the second or entities affected by the special exception of the second or entities affected by the second or entitle affected	Ordinance: on to the Noise Ordinal	eption on surrounding	persons (required)		

EMERGENCY ACTION RLAN

PURPOSE (Required for all Applicants)

- A. This emergency action plan predetermines actions to take before and during the EVENT in response to an emergency or otherwise hazardous condition. These actions will be taken by organizers, management, personnel, and attendees. These actions represent those required prior to the event in preparation for and those required during an emergency.
- B. Flexibility must be exercised when implementing this plan because of the wide variety of potential hazards that exist for this event. These hazards include but are not limited to Fire, Medical Emergencies, Severe Weather, or situations where Law Enforcement is required.

BASIC PLAN

A. The emergency action plan event representative will be identified as the point of contact for all communications regarding the event. This person is identified as the <u>primary contact</u> and must be present during the event:

Contact full name (first/last name): Sharon Norton

Contact cell number (area code plus number):

574-903-4816

EVENT MAPS

SITE MAP (Required for all Applicants)

Please attach a Site Map clearly indicating the set-up of the event. An example would be the Start/Finish of a walk, run, or race event and/or the set-up area of a festival or cultural event. The Site Map should indicate the relative location of the following; all sources of amplified sound and the direction of the sound; tents and canopies with sizes, stages, promotional vehicles, portable tollets, fencing, barricades, and other structures; proposed driving paths for all equipment and supply vehicles; location of vehicles you wish to retain on "EPRB" property during the event; locations of food and proposed street closures. All site Maps are subject to the approval of "EPRB."

ROUTE MAP (Runs, Walks, Blke Rides)

All events that include a run/ walk or other activity in which participants will be following a course will be required to attach a Route Map and a written document of the proposed route of the event. All proposed Route Maps are subject to "EPRB" approval. The use of any outside the Parkways or parks, such as City streets, must be approved by the Board of Public Works.

For a more detailed Route Map, it is recommended to use mapmyrun.com (this is a free website), Bing maps, or Google maps

ELKHART COUNTY HEALTH DEPARTMENT

An Elkhart County Health Department Permit for food and beverage must accompany event plans. Please contact the Elkhart County Health Department at 574-523-2283.

followi	ng steps have been completed:	
Have y	ou?	
	Signed and dated your application?	
	Attached your event site map? (and route map if a ru	n/walk event)
	Designated the onsite Emergency Contact Person?	
	Provided all documents and information as requested	throughout the application? ST-105, 501 (c) (3), etc.
	Certificate of Insurance listing the City of Elkhart as a	Certificate Holder
	Tent Permit, if applicable	
Certific	cates of insurance should include the following under a	additionally insured:
Elkhart 229 So	ty of Elkhart t Park Board for and on behalf of Parks & Recreation outh Second Street t, IN 46516	Civil City of Elkhart 229 South Second Street Elkhart, IN 46516
Submit	t your completed application to:	
·	For Parks:	For Board of Works:
City c	of Elkhart Parks & Recreation Board	City of Elkhart Board of Public Works
Use 8	& Event Permitting	Use & Event Permitting
229 S	outh 2 nd Street	229 South 2nd Street
Elkha	rt, IN 46516	Elkhart, IN 46516
Phon	e (574) 295-7275	Phone (574) 294-5471 ext. 1055
Email	l:elkhartcityparkspermits@coei.org	Email:Nancy.Wilson@coei.org

Thank you for completing your Special Use Permit Application. Before you submit your application, please make sure that the

INDEMNIFICATION WAIVER AND RELEASE

In consideration of the granting of a Permit by the BOARD OF PUBLIC WORKS and/or the BOARD OF PARKS AND RECREATION, I hereby release, discharge, indemnify, protect and hold harmless the City of Elkhart, Indiana, and all of its agents, officials, and employees, of and from any and all claims, demands, damages, both compensatory and punitive, actions, causes of actions, costs, loss of services or consortium, and any expenses incurred for all personal injury or property damage sustained by me or any third party arising out of or in any way involving the use of the City's property during the event. I further agree to indemnify, protect, and hold harmless the City of Elkhart from any and all claims and causes of action, including attorney fees, caused by my negligence or willful conduct that is in any way related to the use of the City's property. I am more than 18 years of age and am fully competent. I have read in full this agreement and understand and agree to all of its terms and conditions. I have signed this instrument voluntarily and with full knowledge of the fact that I am waiving and releasing any and all claims for myself that may subsequently arise, regardless of their nature and extent. Furthermore, if signed on behalf of an entity, I swear and affirm that I am duly authorized to execute this INDEMNIFICATION, WAIVER, AND RELEASE on behalf of the entity.

APPLICANT SIGNATURE

President or Secretary

I have read the terms and conditions outlined in this document and the City of Elkhart, City of Elkhart Board of Works, and the City of Elkhart Park & Recreation Board Code of Ordinances and agree to abide by them.

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Unless expressly provided for in the permit, Use & Event Permits do not grant the permit holder exclusive rights to park property, including but not limited to any right to restrict access, use, and First Amendment activities of any person on park property open to the general public.

I agree to be bound by the above terms as a condition to the issuance of a Special Event Permit. All payments are due upon the BOW and EPRD final approval.

THIS DOCUMENT CONTAINS A RELEASE OF ALL CLAIMS AND A WAIVER OF RIGHTS. I HAVE CAREFULLY READ ALL OF ITS TERMS AND RETAINED A COPY OF THIS DOCUMENT FOR MY OWN RECORDS.

Sharon Norton	Shann Note
PRINTED NAME OF APPLICANT	SIGNATURE OF APPLICANT
	<u>Ce/6/23</u> DATE
	Date
WITNESSED: Clerk of the Board of Works	
APPROVED: BOARD OF PUBLIC WORKS	
	Date
President	
RATIFIED: BOARD OF PARKS AND RECREATION (if applied	cable)
:	Date



ELKHART BOARD OF WORKS 2023 USE & EVENT PERMIT APPLICATION

229 South 2nd Street Elkhart, IN 46516 Phone: (574) 294-5471

Date Received:

INSTRUCTIONS: Please carefully read the "Event Procedures & Guidelines" sections before completing this application. Incomplete applications and/or applications without the required application fee will not be processed. DATE(S) REQUESTED Sun Ann 13,00 LOCATION/VENUE REQUESTED LOCATION/VENUE 2ND CHOICE REQUESTED OFFICE USE: DATENENUE AVAILABLE APPLICANT INFORMATION NAME OF APPLICANT alemoun (The Best of US blendethan NAME OF EVENT ORGANIZER/PRODUCEF Best of 11s Foundation PRODUCTION COMPANY/ORGANIZATION STREET ADDRESS APT/UNIT/SUITE ZIP CODE STATE TIME E-IVIAIL ADDRESS DAYTIME PHONE FAX CELL PHONE **EVENT DAY ON-SITE CONTACT * REQUIRED** DAYTIME PHONE **CELL PHONE** EVENT SPONSOR: Are you, the applicant, organizing this event on behalf of another organization? (Please check No or Yes Below) Name of Organization: NAME OF SPONSORING ORGANIZATION CONTACT SPONSORING ORG. CONTACT PHONE ADDRESS OF SPONSORING ORGANIZATION CITY ZIP CODE Additional Documentation Required: If you checked "Yes" above, please submit an endorsement letter from the organization (on their official Letterhead) on whose behalf you are organizing this event. Is the sponsoring organization a 501(c) (3)? (Please check No or Yes below.) No Please attach current verification of 501(c) (3) status Does the sponsoring organization have an ST-105 General Sales Tax Exemption Status? (Please check No or Yes below.) FEDERAL TAX ID# Please attach current verification of ST-105 status

EVENT INFORMATION		
ACTUAL EVENT TIMES (NOT INCLUDING SETUP or TAKE DOWN) Start Time: Finish Time: Additional Information Required: Please attach a schedule if your event in	ໃໄ ⊘ເ ຕົ includes multiple days and/or va	arying times.
SET-UP TIME(S) From: 8:00 am To: \\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\	TEAR-DOWN From: Spm	то: В'рт
If the event is reoccurring, please submit the past number of participants be	elow.	
2022 NUMBER OF PARTICIPANTS:	2021 NUMBER OF PARTICIF	PANTS:
PREVIOUS YEAR DATE/LOCATION: Has this event been previously held (Please check No or Yes below.) No Yes Event Name: Back to S Location: Rever Manage (Please Check No or Yes below.)	whool to Roosevelt "The Village"	Date: June 20:27
Please check what type of event this is (Check all that apply) and write a Walk/Run Cultural Event Art Fair/Festival Public Rally/March Service Bike Ride		t.
back to school and show unity of and bunded together as a whole	hildren Will se e. Everyne K	ssentials for kids to opo a families are connected nuss lucy are cond and possible autilities
Please provide a detailed description of your event. Document(s) wi	th this information or other mate	rials describing this event may be attached.
PROHIBITED ACTIVITIES IN CITY PARKS (By Ordinand	ces)	
No Fundraising Allowed		
No Bounce Houses Allowed		
No Admission Fees Allowed		

All event logistics are subject to the approval of the "EPRB." Additionally, certain event features, such as street closures and separate permits from the Cion of Elkhart. For information regarding City of Elkhart Permits, please call 574-294-5471 ext. 1055 or e-mail Nancy. Wilson @coei.org
FOOD AND ALCOHOLIC BEVERAGES:
Are you requesting permission to serve and/or sample food and/or beverages? (Please check the appropriate response.) No Food or Alcoholic Beverages may be sold on Park Property.
If applicable Name of Caterer/Vendor: COMMUNAY TUPL POR WILL
that this is not for profit so unless money is donated to
Additional Information Required: If you checked "Yes" above, a Short Term Permit is required from the Elkhart County Health Department. Indicate location where food/beverages will be served on the Site Map.
TENTS AND CANOPIES If you plan to erect tents or canopies, describe and give the number of tents and/or canopies, along with the sizes of each. A separate sheet with this information may be attached. All tents and/or canopies must be indicated on the Site Map. The Event Organizer is responsible for any damage caused to City/Park property/facility and must consult "BOW" prior to installation. Building and Zoning Clearance Required. Will your event feature tents and/or canopies? (Please check No or Yes below.) No Yes Number of Tents/Canopies: Jamily Horses In Close of Sun Interpretation of Tents/Canopies (If you have multiple tents/canopies with varying sizes, indicate the number with the corresponding size.) The following is required for tents over 400 square feet (20 ft. X 20 ft.): Require inspections by the Elkhart City Fire Department. Refer to Indiana Fire Code 3103.2 Utilities must be marked. Call 811 for Utilities to mark the tent area. Permits are required, fees apply - Permits must be acquired and paid for at the Permit Center at 229 South Second Street, Elkhart-574-296-9331
Additional Documentation Required: If you checked "Yes" above, please indicate the number of tents with the corresponding size. Document with this information may be attached. All tents and/or canopies must be indicated on the Site Map.
VEHICLES Are you requesting permission to operate staff/supply vehicles on City/"EPRB" service roads for delivery of equipment, supplies, or catering/vending? No Yes Number of Vehicles: Number of Vehicles: Number of Vehicles: Number of Vehicles: Number of Vehicle Description(s):
Are you requesting permission to retain vehicles on-site for the duration of the event?
No Yes Number of Vehicles:

	(Please check No or Yes below) If yes, please provide additional information as requested below. Document(s) with this information may be attached. Will your event include the installation of stages/platforms? The "BOW" must approve the location of the stages/platforms.
	(Please check No or Yes below.) NO STAGES ARE PROVIDED OR AVAILABLE FROM THE CITY OF ELKHART OR ITS DEPARTMENTS. *May require additional insurance.
?	No Yes Number of Stage(s): Will USE OUTSIDE SOOR & NUMBER OF STAGE(S):
	Stage Description(s):
	Stage Owner Phone Number:
	Address: Street, City, State, Zip
	Stage Specs will be required.
	Additional Documentation Required: If you checked "Yes" above, please clearly indicate the number of stages/platforms on the Site Map.
	PORTABLE TOILETS (Please check No or Yes below) If yes, please provide additional information as requested below. Document(s) with this information may be attached. All portable toilets must be removed from City/"EPRB" property within 48 hours of event (if the event is on a Saturday or a Sunday, portable toilets must be removed that following Monday). The location must be approved by the City/"EPRB." ADA-compliant toilets are required for Public Gatherings. Number of Portable Toilets: AND Number of Accessible ADA Partable Toilets: Company/Description(s):
	attached. All portable toilets must be removed from City/"EPRB" property within 48 hours of event (if the event is on a Saturday or a Sunday, portable toilets must be removed that following Monday). The location must be approved by the City/"EPRB."
	ADA-compliant toilets are required for Public Gatherings.
	No Yes Number of Portable Toilets:AND Number of Accessible ADA Portable
	01510 1100 - Planse male one of restront boutless of the
	Company/Bescription(s):
	Additional Documentation Required: If you checked "Yes" above, please clearly indicate the number of portable toilets on the Site Map
	FENCING
	Will the event include the installation of event fencing by the Event Organizer? The location of the fencing must be approved by the "BOW"/"EPRB."
	(Please check No or Yes below.) No Yes Description:
	No Yes Description:
	May require a call to 811 for location marking of Utilities. Buildings and Grounds must also approve to make sure sprinkler lines are not in jeopardy.
181	
	EMERGENCY SUPPORT SERVICES- Motor Vehicle and Pedestrian Control
	Will the event require Emergency Support Services?
	(Please check No or Yes below.) No Tyes The throat five Dea, will be oversent
	No Yes — MU SHILLING THE DEPT. WILL IN THE SHITT
	Number of Emergency Management Staff Requested
	\$50.00 Minimum of two Event Personnel
	\$25.00 Event Personnel each per event Total Cost \$
	Additional Documentation Required: If you checked "Yes" above, please clearly indicate the number of personnel and where they should be located on
	the site map. A separate meeting may be required with the Emergency Management Personnel.

STAGES/PLATFORMS

FIRE DEPARTMENT
EMERGENCY MEDICAL SERVICES REQUESTED: Please indicate what services you are requesting. Mark all that are requested:
□ No ☑ Yes — Will be present alleady
Ambulance(s) Medic Kubota Fire Truck First Aid Station Please indicate your reason that a Fire Truck may be needed at your Event. Please include any special requests.
Additional Information May Be Required.
BUILDINGS AND GROUNDS FENCING: The following are available for a fee. Mark all that are requested: Event Fencing Number of Sections Requested Other Snow Fencing Number of Feet Requested Other
Additional fees may apply. WASTE RECEPTACLES Will the event require additional waste receptacles? The location of the waste receptacles must be approved by the "BOW"/"EPRB." (Please check No or Yes below.) Additional fees may apply.
Will the event require Buildings & Grounds to set up or deliver other equipment? If Yes, please list below. (Please check No or Yes below.)
No Yes
PARKS DEPARTMENT
EQUIPMENT REQUESTED: No Yes ———————————————————————————————————
Golf Cars ONLY AVAILABLE FOR CITY-ORGANIZED EVENTS (I.E., Rhapsody, Summer Chill, WinterFest, etc.) Risers ONLY AVAILABLE FOR CITY-ORGANIZED EVENTS (I.E., Rhapsody, Summer Chill, WinterFest, etc.) Stage ONLY AVAILABLE FOR CITY-ORGANIZED EVENTS (I.E., Rhapsody, Summer Chill, WinterFest, etc.) Trailer (tables/chairs) ONLY AVAILABLE FOR CITY-ORGANIZED EVENTS (I.E., Rhapsody, Summer Chill, WinterFest, etc.) NOTE: Bleachers and Stages are not available for public or private use.

POLICE DEPARTMENT	
POLICE SERVICES: Please indicate what services No Yes —	syou are requesting. Mark all that are requested:
Please indicate why you feel Police presence may be needed at	your Event.
Additional Information May Be Required.	
STREET DEPARTMENT	
	equiring closure of City streets for your event?
No Yes Street Name Please mark all that may apply:	of hill at the end of mylaughten Pane Maube By Rambow blook.
Street Closed From:	To:
Street Closed From:	To:
Street Closed From:	
	To:
Street Closed From:	To:
	To:
OTHER STRUCTURES	
Will your event include other structures not identified ab (Please check No or Yes below.)	ove? The location of all other structures must be approved by the "EPRB".
☐ No ☐ Yes → Number of Structures	S:
Description(s):	
Additional Information Required: If you checked "Yes" at and all other structures on the Site Map. Ordering of	pove, please indicate the location of all stages/platforms, portable toilets, fencing, barricades all equipment must be done by the Event Organizer.

BOARD OF WORKS PERWITS
(Please check No or Yes below) If yes, please provide additional information as requested below. Document(s) with this information may be attached. Are you requesting the use of City Plaza
Water: Yes No
Electric: Yes No Plaza Sign:
Plaza Sign: Yes No Sign Information:
Bridge Banner: Yes No Please indicate location: Bridge Banner- North Main Street- Memorial Bridge Bridge Banner - Johnson Street
NOISE ORDINANCE Will the event require an exception to noise by the Event Organizer? (Please check No or Yes below.) Reason: WUSIC Wids plople
Parade and Special Exception to Noise Ordinance: Yes No Public Assembly and Special Exception to Noise Ordinance: Yes No Special Exception to Noise Ordinance: Yes No
Persons or entities affected by this special exception to the Noise Ordinance: (required)
What measures will be taken to mitigate the impact of the Noise exception on surrounding persons (required)

EMERGENCY ACTION PLAN

PURPOSE (Required for all Applicants)

- A. This emergency action plan predetermines actions to take before and during the EVENT in response to an emergency or otherwise hazardous condition. These actions will be taken by organizers, management, personnel, and attendees. These actions represent those required prior to the event in preparation for and those required during an emergency.
- B. Flexibility must be exercised when implementing this plan because of the wide variety of potential hazards that exist for this event. These hazards include but are not limited to Fire, Medical Emergencies, Severe Weather, or situations where Law Enforcement is required.

BASIC PLAN

A. The emergency action plan event representative will be identified as the point of contact for all communications regarding the event. This person is identified as the <u>primary contact</u> and must be present during the event:

Contact full name (first/last name):

Intura loterr

Contact cell number (area code plus number):

EVENT MAPS

SITE MAP (Required for all Applicants)

Please attach a Site Map clearly indicating the set-up of the event. An example would be the Start/Finish of a walk, run, or race event and/or the set-up area of a festival or cultural event. The Site Map should indicate the relative location of the following; all sources of amplified sound and the direction of the sound; tents and canopies with sizes, stages, promotional vehicles, portable toilets, fencing, barricades, and other structures; proposed driving paths for all equipment and supply vehicles; location of vehicles you wish to retain on "EPRB" property during the event; locations of food and proposed street closures. All site Maps are subject to the approval of "EPRB."

ROUTE MAP (Runs, Walks, Bike Rides)

All events that include a run/ walk or other activity in which participants will be following a course will be required to attach a Route Map and a written document of the proposed route of the event. All proposed Route Maps are subject to "EPRB" approval. The use of any outside the Parkways or parks, such as City streets, must be approved by the Board of Public Works.

For a more detailed Route Map, it is recommended to use mapmyrun.com (this is a free website), Bing maps, or Google maps

ELKHART COUNTY HEALTH DEPARTMENT

An Elkhart County Health Department Permit for food and beverage must accompany event plans. Please contact the Elkhart County Health Department at 574-523-2283.

INDEMNIFICATION, WAIVER AND RELEASE

In consideration of the granting of a Permit by the BOARD OF PUBLIC WORKS and/or the BOARD OF PARKS AND RECREATION, I hereby release, discharge, indemnify, protect and hold harmless the City of Elkhart, Indiana, and all of its agents, officials, and employees, of and from any and all claims, demands, damages, both compensatory and punitive, actions, causes of actions, costs, loss of services or consortium, and any expenses incurred for all personal injury or property damage sustained by me or any third party arising out of or in any way involving the use of the City's property during the event. I further agree to indemnify, protect, and hold harmless the City of Elkhart from any and all claims and causes of action, including attorney fees, caused by my negligence or willful conduct that is in any way related to the use of the City's property. I am more than 18 years of age and am fully competent. I have read in full this agreement and understand and agree to all of its terms and conditions. I have signed this instrument voluntarily and with full knowledge of the fact that I am waiving and releasing any and all claims for myself that may subsequently arise, regardless of their nature and extent. Furthermore, if signed on behalf of an entity, I swear and affirm that I am duly authorized to execute this INDEMNIFICATION, WAIVER, AND RELEASE on behalf of the entity.

APPLICANT SIGNATURE

President or Secretary

I have read the terms and conditions outlined in this document and the City of Elkhart, City of Elkhart Board of Works, and the City of Elkhart Park & Recreation Board Code of Ordinances and agree to abide by them.

Unless expressly provided for in the permit, Use & Event Permits do not grant the permit holder exclusive rights to park property, including but not limited to any right to restrict access, use, and First Amendment activities of any person on park property open to the general public.

I agree to be bound by the above terms as a condition to the issuance of a Special Event Permit. All payments are due upon the BOW and EPRD final approval.

THIS DOCUMENT CONTAINS A RELEASE OF ALL CLAIMS AND A WAIVER OF RIGHTS. I HAVE CAREFULLY READ ALL OF ITS TERMS AND RETAINED A COPY OF THIS DOCUMENT FOR MY OWN RECORDS.

PRINTED NAME OF APPLICANT

PRINTED NAME OF APPLICANT

Date

WITNESSED: Clerk of the Board of Works

APPROVED: BOARD OF PUBLIC WORKS

President

RATIFIED: BOARD OF PARKS AND RECREATION (if applicable)

Date



ELKHART BOARD OF WORKS 2023 USE & EVENT PERMIT APPLICATION

229 South 2nd Street Elkhart, IN 46516 Phone: (574) 294-5471

Date Received: 61133

NSTRUCTIONS: Please carefully read the "Event Procedures & Guidelines" sections before completing this application. Incomplete applications and/or applications without the required application fee will not be processed.
EVENT NAME: Rockin' on the RailsDATE(S) REQUESTED 8/26/23
LOCATION/VENUE REQUESTED NYCRR Museum
LOCATION/VENUE 2 ND CHOICE REQUESTED N/A
OFFICE USE: DATENENUE AVAILABLE NO Yes Asking to USU Parks
APPLICANT INFORMATION
NAME OF APPLICANT Timothy Reecer on behalf of "Friends of the National New York Central Railroad Mueseum" NAME OF EVENT ORGANIZER/PRODUCER
Friends of the New York Central Railroad Museum PRODUCTION COMPANY/ORGANIZATION
TROBOCTION COMIT ANTICINCANIZATION
STREET ADDRESS APT/UNIT/SUITE
CITY STATE ZIP CODE
Elkhart IN 46516
E-MAIL ADDRESS
DAYTIME PHONE FAX CELL PHONE
EVENT DAY ON-SITE CONTACT * REQUIRED DAYTIME PHONE CFIL PHONE
EVENT SPONSOR: Are you, the applicant, organizing this event on behalf of another organization? (Please check No or Yes Below) No Yes Name of Organization:
NAME OF SPONSORING ORGANIZATION CONTACT SPONSORING ORG. CONTACT PHONE
ADDRESS OF SPONSORING ORGANIZATION CITY ZIP CODE
Additional Documentation Required: If you checked "Yes" above, please submit an endorsement letter from the organization (on their official Letterhead) on whose behalf you are organizing this event.
Is the sponsoring organization a 501(c) (3)? (Please check No or Yes below.)
No Yes——— Please attach current verification of 501(c) (3) status
Does the sponsoring organization have an ST-105 General Sales Tax Exemption Status? (Please check No or Yes below.)
No Yes Please attach current verification of ST-105 status FEDERAL TAX ID #

EVENT INFORMATION	
ACTUAL EVENT TIMES (NOT INCLUDING SETUP or TAKE DOWN) Start Time: 12:00pm Finish Tim Additional Information Required: Please attach a schedule if your ever	ne: 6:00pm nt includes multiple days and/or varying times.
SET-UP TIME(S) From: 6:00pm To: 9:00pm	TEAR-DOWN 6:00pm From: To: 9:00pm
EXPECTED NUMBER OF PARTICIPANTS: 1500	
If the event is reoccurring, please submit the past number of participants	below.
2022 NUMBER OF PARTICIPANTS: 1000	2021 NUMBER OF PARTICIPANTS: 500
PREVIOUS YEAR DATE/LOCATION: Has this event been previously h (Please check No or Yes below.) No Yes Event Name: Rockin' on the Rails	neld?
No Yes Event Name: Rockin' on the Rails Location: Same as this year	Date: 9/23/22
EVENT DESCRIPTION	Date: one of the other of the o
EVENT DESCRIPTION	
Walk/Run Cultural Event Other event, Art Fair/Festival Public Rally/March Fundraise Concert/Performance Bike Ride Service Brief Description of Event:	, please describe: er
3 live bands, food trucks, and beer vendor help	raise funds for the restoration of Rolling Stock
·	
Please provide a detailed description of your event. Document(s)	with this information or other materials describing this event may be attached.
PROHIBITED ACTIVITIES IN CITY PARKS (By Ordina	ances)
No Fundraising Allowed	
No Bounce Houses Allowed	
No Admission Fees Allowed	

EVENT LOGISTICS
All event logistics are subject to the approval of the "EPRB." Additionally, certain event features, such as street closures and separate permits from the City of Elkhart. For information regarding City of Elkhart Permits, please call 574-294-5471 ext. 1055 or e-mail Nancy. Wilson @coei.org
FOOD AND ALCOHOLIC BEVERAGES:
Are you requesting permission to serve and/or sample food and/or beverages? (Please check the appropriate response.) No Yes, to the participants only Yes, to the general public No Food or Alcoholic Beverages may be sold on Park Property.
If applicable Name of Caterer/Vendor: 5 Star Dive Bar
IF YES, please describe: Beer
Additional Information Required: If you checked "Yes" above, a Short Term Permit is required from the Elkhart County Health Department.
Indicate location where food/beverages will be served on the Site Map.
TENTS AND CANOPIES If you plan to erect tents or canopies, describe and give the number of tents and/or canopies, along with the sizes of each. A separate sheet with this information may be attached. All tents and/or canopies must be indicated on the Site Map. The Event Organizer is responsible for any damage caused to City/Park property/facility and must consult "BOW" prior to installation. Building and Zoning Clearance Required. Will your event feature tents and/or canopies?
(Please check No or Yes below.)
No ■ Yes → Number of Tents/Canopies: 1
L _{>}
Tent/Canopy Size(s): 10x10 EZ Up (If you have multiple tents/canopies with varying sizes, indicate the number with the corresponding size.) The following is required for tents over 400 square feet (20 ft. X 20 ft.): Require inspections by the Elkhart City Fire Department. Refer to Indiana Fire Code 3103.2 Utilities must be marked. Call 811 for Utilities to mark the tent area. Permits are required, fees apply - Permits must be acquired and paid for at the Permit Center at 229 South Second Street, Elkhart-574-296-9331
Additional Documentation Required: If you checked "Yes" above, please indicate the number of tents with the corresponding size. Document with this information may be attached. All tents and/or canopies must be indicated on the Site Map.
VEHICLES Are you requesting permission to operate staff/supply vehicles on City/"EPRB" service roads for delivery of equipment, supplies, or catering/vending? No Yes Number of Vehicles:
No Yes Number of Vehicles: Vehicle Description(s):
Are you requesting permission to retain vehicles on-site for the duration of the event?
No Yes Number of Vehicles:

STAGES/PLATFORMS				
Please check No or Yes below) If yes Will your event include the installatior	s, please provide additional inform of stages/platforms? The "BOW"	ation as requested below. Docum	nent(s) with the stages/platfo	is information may be attached. rms.
Please check No or Yes below.) NO STA	GES ARE PROVIDED OR AVAILABLE	FROM THE CITY OF ELKHART OR	ITS DEPARTM	IENTS.
	uire additional insurance.			
☐ No ☐ Yes → Nur	mber of Stage(s):			
Sta	ge Description(s): A raised pla	atform used b a band to p	lay music	from
Stage Owner Building &	Grounds Department	Pho	ne Number:	574-970-0542
Address: Street, City, State, Zip	, 1100 McDonald St			
Stage Specs will be required.				
	dulf vou abacked "Vee" above pla	and clearly indicate the number of	etagos/platfo	rms on the Site Man
Additional Documentation Required	a: If you checked Yes above, pie	ase clearly indicate the number of	stages/platto	inns on the Site Map.
PORTABLE TOILETS (Please check No or Yes below) If y attached. All portable toilets must be portable toilets must be removed th ADA-compliant toilets are required	e removed from City/"EPRB" prop nat following Monday). The locatio for Public Gatherings.	erty within 48 hours of event (if the n must be approved by the City/"E	e event is on a EPRB."	a Saturday or a Sunday,
☐ No ■ Yes → Nu	umber of Portable Toilets: 4	AND Number of Acc	cessible ADA	Portable Toilets: 1
Co	ompany/Description(s): Joy Jo	nns		
Additional Documentation Require			of portable toil	ets on the Site Map
FENCING				
Will the event include the installation (Please check No or Yes below.)	າ of event fencing by the Event Orດຸ	anizer? The location of the fencin	g must be ap	proved by the "BOW"/"EPRB."
■ No Tyes → De	escription:			
May require a call to 811 for locati	ion marking of Utilities. Buildings a	nd Grounds must also approve to	make sure s	prinkler lines are not in jeopardy.
EMERGENCY SUPPOR	RT SERVICES- Motor Vehi	cle and Pedestrian Control		
Will the event require Emergency St (Please check No or Yes below.)	upport Services?			
■ No ☐ Yes →				
Number of Emergency Management Staff Req	uested			
\$50.00 Minimum of two Event	2001 00W			
\$25.00 Event Personnel each per				
				Total Cost \$
Additional Documentation Require	ed: If you checked "Yes" above, pl	ease clearly indicate the number o	f personnel a	nd where they should be located on

FIRE DEPARTMENT	
EMERGENCY MEDICAL SERVICE	S REQUESTED: Please indicate what services you are requesting. Mark all that are requested:
■ No ☐ Yes →	
Time(s) Requested:	
· 🗖	
Ambulance(s) Nur Medic Kubota	mber Requested
FireTruck	
First Aid Station	
Please indicate your reason that a Fire Truck may	be needed at your Event. Please include any special requests.
Additional Information May Be Require	ed.
BUILDINGS AND GROUND)S
BOILDINGS AND CROOKE	
FENCING: The following are available for	or a fee. Mark all that are requested;
□ Event Fencing Number of Sections Requ□ Snow Fencing Number of Feet Request	
onen onen g	
Additional fees may apply.	
WASTE RECEPTACLES	
Will the event require additional waste rece	ptacles? The location of the waste receptacles must be approved by the "BOW"/"EPRB."
(Please check No or Yes below.) Additional fe	es may apply.
No Yes	·
	to set up or deliver other equipment? If Yes, please list below.
(Please check No or Yes below.)	Van trailor and store
No Yes	Yes, trailer and stage ou checked "Yes" above, please clearly indicate the number of fencing on the site map.
Additional Documentation Required. If you	d checked Tes above, please clearly indicate the number of lending of the site map.
PARKS DEPARTMENT	
EQUIPMENT REQUESTED:	
□ No ■ Yes	Stage, Table & Chairs
	LEFOR CITY-ORGANIZED EVENTS (I.E., Rhapsody, Summer Chill, WinterFest, etc.)
	LE FOR CITY-ORGANIZED EVENTS (i.E., Rhapsody, Summer Chill, WinterFest, etc.)
	ILE FOR CITY-ORGANIZED EVENTS (I.E., Rhapsody, Summer Chill, WinterFest, etc.)
	EFOR CITY-ORGANIZED EVENTS (I.E., Rhapsody, Summer Chill, WinterFest, etc.)
NOTE: Bleachers and Sta	ages are not available for public or private use.

POLICE DEPARTMENT			
POLICE SERVICES: Please indicate what services you are requesting. Mark all that are requested:			
No Yes			
	Tugus Fugat		
Please indicate why you feel Police presence may be needed at	your event.		
Additional Information May Be Required.			
STREET DEPARTMENT			
STREET CLOSURES: Will you be re	equiring closure of City streets for your event?		
STREET GEOSORES. Will you be re	squiring closure of city streets for your event:		
Please mark all that may apply:	0:00nm		
Street Closed From:			
	To:		
Street Closed From:	To:		
OTHER STRUCTURES			
Will your event include other structures not identified ab (Please check No or Yes below.)	ove? The location of all other structures must be approved by the "EPRB".		
■ No Yes Number of Structures	s:		
Description(s):			
Additional Information Required: If you checked "Yes" at and all other structures on the Site Map. Ordering of	pove, please indicate the location of all stages/platforms, portable toilets, fencing, barricades all equipment must be done by the Event Organizer.		

2023 City of Board of Works and Park and Recreation Board - - - 6

BOARD OF WORKS PERMITS

(Please check No or Yes below) If yes	, please provide additional	information as requested belo	ow. Document(s) with th	nis information may be attached
Are you requesting the use of City Pla	za?			

Water:		
	Yes	
	No	
Electric:		
	Yes	
	No	
Paza Si	gn:	
√	Yes	
	No Dealin on the Diale August 26th 12 6nm, New York Central Bailroad Museum	
Sign Info	Rockin' on the Rials, August 26th 12-6pm, New York Central Railroad Museum	
Bridge B	Banner:	
	Yes	
√	No	
Please i	ndicate location:	
<u>_</u>	Bridge Banner- North Main Street- Memorial Bridge	
	Bridge Banner – Johnson Street	
NOIS	SE ORDINANCE	
Will the	e event require an exception to noise by the Event Organizer?	
(Please	e check No or Yes below.)	
	Dookinl	
	No Yes Reason: Rockin!	
Parade	and Special Exception to Noise Ordinance:	
	Yes	
1	No	
Public A	Assembly and Special Exception to Noise Ordinance:	
1	Yes	
1 1	No	
Special	Exception to Noise Ordinance:	
√	Yes	
	No	*
Persons	s or entities affected by this special exception to the Noise Ordinance: (required)	
	Bowly's Crystal Bar, Inc.	
99000		
W	That measures will be taken to mitigate the impact of the Noise exception on surrounding persons (required)	
	We will invite them over to the party and turn down the fun if asked by them.	

EMERGENCY ACTION PLAN

PURPOSE (Required for all Applicants)

- A. This emergency action plan predetermines actions to take before and during the EVENT in response to an emergency or otherwise hazardous condition. These actions will be taken by organizers, management, personnel, and attendees. These actions represent those required prior to the event in preparation for and those required during an emergency.
- B. Flexibility must be exercised when implementing this plan because of the wide variety of potential hazards that exist for this event. These hazards include but are not limited to Fire, Medical Emergencies, Severe Weather, or situations where Law Enforcement is required.

BASIC PLAN

A. The emergency action plan event representative will be identified as the point of contact for all communications regarding the event. This person is identified as the <u>primary contact</u> and must be present during the event:

Contact full name (first/last name): Steve Barton

Contact cell number (area code plus number):

574-370-3714

EVENT MAPS

SITE MAP (Required for all Applicants)

Please attach a Site Map clearly indicating the set-up of the event. An example would be the Start/Finish of a walk, run, or race event and/or the set-up area of a festival or cultural event. The Site Map should indicate the relative location of the following; all sources of amplified sound and the direction of the sound; tents and canopies with sizes, stages, promotional vehicles, portable toilets, fencing, barricades, and other structures; proposed driving paths for all equipment and supply vehicles; location of vehicles you wish to retain on "EPRB" property during the event; locations of food and proposed street closures. All site Maps are subject to the approval of "EPRB."

ROUTE MAP (Runs, Walks, Bike Rides)

Department at 574-523-2283.

All events that include a run/ walk or other activity in which participants will be following a course will be required to attach a Route Map and a written document of the proposed route of the event. All proposed Route Maps are subject to "EPRB" approval. The use of any outside the Parkways or parks, such as City streets, must be approved by the Board of Public Works.

For a more detailed Route Map, it is recommended to use mapmyrun.com (this is a free website), Bing maps, or Google maps

ELKHART COUNTY HEALTH DEPARTMENT

An Elkhart County Health Department Permit for food and beverage must accompany event plans. Please contact the Elkhart County Health

INDEMNIFICATION, WAIVER AND RELEASE

In consideration of the granting of a Permit by the BOARD OF PUBLIC WORKS and/or the BOARD OF PARKS AND RECREATION, I hereby release, discharge, indemnify, protect and hold harmless the City of Elkhart, Indiana, and all of its agents, officials, and employees, of and from any and all claims, demands, damages, both compensatory and punitive, actions, causes of actions, costs, loss of services or consortium, and any expenses incurred for all personal injury or property damage sustained by me or any third party arising out of or in any way involving the use of the City's property during the event. I further agree to indemnify, protect, and hold harmless the City of Elkhart from any and all claims and causes of action, including attorney fees, caused by my negligence or willful conduct that is in any way related to the use of the City's property. I am more than 18 years of age and am fully competent. I have read in full this agreement and understand and agree to all of its terms and conditions. I have signed this instrument voluntarily and with full knowledge of the fact that I am waiving and releasing any and all claims for myself that may subsequently arise, regardless of their nature and extent. Furthermore, if signed on behalf of an entity, I swear and affirm that I am duly authorized to execute this INDEMNIFICATION, WAIVER, AND RELEASE on behalf of the entity.

Timothy Reecer

President or Secretary

Digitally signed by Timothy Reecer Date: 2023.05.19 12:43:12 -04'00'

APPLICANT SIGNATURE

I have read the terms and conditions outlined in this document and the City of Elkhart, City of Elkhart Board of Works, and the City of Elkhart Park & Recreation Board Code of Ordinances and agree to abide by them.

Unless expressly provided for in the permit, Use & Event Permits do not grant the permit holder exclusive rights to park property, including but not limited to any right to restrict access, use, and First Amendment activities of any person on park property open to the general public.

I agree to be bound by the above terms as a condition to the issuance of a Special Event Permit. All payments are due upon the BOW and EPRD final approval.

THIS DOCUMENT CONTAINS A RELEASE OF ALL CLAIMS AND A WAIVER OF RIGHTS. I HAVE CAREFULLY READ ALL OF ITS TERMS AND RETAINED A COPY OF THIS DOCUMENT FOR MY OWN RECORDS.

Timothy Reecer	Timothy Reecer Date: 2023.05.19 12:43:26 -04'00'	
PRINTED NAME OF APPLICANT	SIGNATURE OF APPLICANT	
	5/18/23	
	DATE	
WITNESSED: Clerk of the Board of Works	Date	
APPROVED: BOARD OF PUBLIC WORKS	er .	
President	Date	
RATIFIED: BOARD OF PARKS AND RECREATION (if applic	eable)	
-	Date	

Digitally signed by Timothy Reacer



ELKHART BOARD OF WORKS 2022 USE & EVENT PERMIT APPLICATION

229 South 2nd Street Elkhart, IN 46516 Phone: (574) 294-5471

Date Received: 5 22 23

NSTRUCTIONS: Please carefully read the "Event Proc Incomplete applications and/or applic	edures & Guidelines" sectionations without the required	ns before completing the	is application.	
EVENT NAME: WOOF GROUP 4	144 ANNUAL B	realeFAS TDATE(S	S) REQUESTE <u>D () (</u>	+28,2023
LOCATION/VENUE REQUESTED	PRANUK BOOTH	Dog PArk		
LOCATION/VENUE 2 ND CHOICE REQUESTED				***************************************
OFFICE USE: DATE/VENUE AVAILABLE	lo Yes			
APPLICANT INFORMATION	Geografia (1902) Description			
NAME OF APPLICANT BARNE) ASH NAME OF EVENT ORGANIZER/PRODUCER	THEWOOF	GROUP		
BARNEY ASH				
PRODUCTION COMPANY/ORGANIZATION				
STREET ADDRESS				APT/UNIT/SUITE
EIWHART, IM			STATE <i>I M</i>	ZIP CODE 46574
E-MAIL ADDRESS				
DAYTIME PHONE	FAX	A	CELL PHONE	_
EVENT DAY ON-SITE CONTACT * REQUIRED	DAYTIME PH		CELL PHONE	
No Commence succession successions				o un reconstruction and a second
EVENT SPONSOR: Are you, the applicant (Please check No or Yes Below)	_			
☐ No ☑ Yes Name of Organization	on:	WOOF GRO) UP	
NAME OF SPONSORING ORGANIZATION CONT	ACT		SPONSORING	ORG. CONTACT PHONE
ADDRESS OF SPONSORING ORGANIZATION		ElKhart	IN	ZIP CODE 465/4
Additional Documentation Required: If you checked "Yes" a you are organizing this event.	above, please submit an endors		ization (on their official Le	
Is the sponsoring organization a 501(c) ((Please check No or Yes below.)	(3)?			
No Yes——— Please attach curren	nt verification of 501(c) (3) sta	tus		
Does the sponsoring organization have a (Please check No or Yes below.)	n ST-105, General Sa	les Tax Exemption	Status?	e e
No Yes Please attach curren	nt verification of ST-105 status	FE	DERAL TAX ID#	

	3 .
EVENTINFORMATION	ne sa mali mana a kabanggan katang ang mga mga mga mga kabang mga mga mga mga mga mga mga mga mga mg
ACTUAL EVENT TIMES (NOT INCLUDING SETUP or TAKE DOWN)	
Start Time: \$'.00 AM Finish Time Additional Information Required: If your event includes multiple days an	1010
SET-UP TIME(S)	TEAR-DOWN
From: 7:00 mm To: 7:30 AM	From: 10:30 AM To: 11:30 AM
EXPECTED NUMBER OF PARTICIPANTS:	
If event is reoccurring, please submit past number of participants below.	
2021 NUMBER OF PARTICIPANTS:	2020 NUMBER OF PARTICIPANTS:
PREVIOUS YEAR DATE/LOCATION: Has this event been previously he (Please check No or Yes below.)	
No Yes — Event Name: ANNUAL	WOOF GROUP CATTY Breakfast
location: DR. FRF	ANK Booth page act 2012
EVENT DESCRIPTION	WOOF GROUP CATTY THROUGHTAST ANK BOOTH Date: OCT 2021 2021 2020
Please check what type of event this is (Check all that apply) and write	a brief description of your event.
☐ Walk/Run ☐ Cultural Event ☑ Other event,	please describe:
☐ Art Fair/Festival ☐ Public Rally/March ☐ CAR ☐ Concert/Performance ☐ Bike Ride ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	DY-IN Breakfast Hoween costumes-2009s & Human
☐ Concert/Performance ☐ Bike Ride ☐ Service	
BI	40 DOG CLUB AGILITY DEMO
Brief Description of Event:	alteret cachina cantart
Follo Dac Clay Angen	AKFAST, Costume contest Buchanan Agility
	Buenawan Agillty
demonstrations,	
,	
Please provide a detailed description of your event. Document(s) v	with this information or other materials describing this event may be attached.
PROHIBITED ACTIVITIES IN CITY PARKS (By Ordinar	nces)
No Fundraising Allowed	
No Bounce Houses Allowed	·
No Admission Fees Allowed	

EVENT LOGISTICS
All event logistics are subject to the approval of the "EPRB". Additionally, certain event features such as street closures and the separate permits from the City of Elkhart. For information regarding City of Elkhart Permits, please call 574-294-5471 ext. 1055 or email Nancy Wilson@coei.org
FOOD AND ALCOHOLIC BEVERAGES:
Are you requesting permission to serve and/or sample food and/or beverages? (Please check the appropriate response.) No Food or Alcoholic Beverages may be sold on Park Property. Yes, to the participants only Yes, to the participants only
If applicable Name of Caterer/Vendor. <u>NEMBERS BRINGING a dish</u> IF YES, please describe:
Additional information Required: If you checked "Yes" above, a Short Term Pennit is required from the Elikhart County Health Department. Indicate location where food/beverages will be served on the Site Map.
TENTS AND CANOPIES If you are planning to erect tents or canopies, describe and give the quantity of tents and/or canopies, along with the sizes of each. A separate sheet with this information may be attached. All tents and/or canopies must be indicated on the Site Map. The Event Organizer is responsible for any damage caused to City/Park property/facility and must consult "BOW" prior to installation. Bullding and Zoning Clearance Required.
Will your event feature tents and/or canopies? (Please check No or Yes below.) No Yes Number of Tents/Canopies:
Tent/Canopy Size(s):
(if you have multiple tents/canopies with varying sizes, indicate the number with the corresponding size.) The following is required for tents over 400 square feet (20 ft. X 20 ft.): Require inspections by the Elkhart City Fire Department. Refer to Indiana Fire Code 3103.2
Utilities must be marked. Call 811 for Utilities to mark tent area. Permits are required, fees apply - Permits must be acquired and paid for at the Permit Center at 229 South Second Street, Elkhart-574-294-5471 ext. 3005
Additional Documentation Required: If you checked "Yes" above, please indicate the number of tents with the corresponding size. Document with this information may be attached. All tents and/or canopies must be indicated on the Site Map.
VEHICLES Are you requesting permission to operate staff/supply vehicles on City/"EPRB" service roads for delivery of equipment, supplies or catering/vending?
No Yes Number of Vehicles: Vehicle Description(s):
No Yes Number of Vehicles:
Vehicle Description(s):

STAGES/PLATFO	RMS
Will your event include	es below) If yes, please provide additional information as requested below. Document(s) with this information may be attached. the installation of stages/platforms? The location of the stages/platforms must be approved by the "BOW". elow.) NO STAGES ARE PROVIDED OR AVAILABLE FROM THE CITY OF ELKHART OR ITS DEPARTMENTS. *May require additional insurance.
X No ☐ Yes	Number of Stage(s):
	Stage Description(s):
Stage Owner	Phone Number:
Address: Street, C	City, State, Zip
Stage Specs will I	pe required.
Additional Document	ation Required. If you checked "Yes" above, please clearly indicate the number of stages/platforms on the Site Map.
attached. All portable portable toilets must t ADA compliant toilets	Yes below) If yes, please provide additional information as requested below. Document(s) with this information may be toilets must be removed from City/*EPRB* property on within 48 hours of event (if event is on a Saturday or a Sunday, per removed that following Monday). The location must be approved by the City/*EPRB*. Are required for Public Gatherings.
No Yes	Number of Portable Toilets:AND Number of Accessible ADA Portable Toilets: Company/Description(s):
Additional Documen	tation Required: If you checked "Yes" above, please clearly indicate the number of portable toilets on the Site Map
FENCING	
Will the event include t (Please check No or Yes	he installation of event fencing by the Event Organizer? The location of the fencing must be approved by the "BOW" "EPRB". below.)
No No Yes	Description:
May require a call to	811 for location marking of Utilities. Buildings and Grounds must also approve to make sure sprinkler lines are not in jeopardy.
EMERGENCY	SUPPORT SERVICES-Motor Vehicle and Pedestrian Control
Will the event require (Please check No or Yes	Emergency Support Services? below.)
No Yes	
Number of Emergency Mana	gement Staff Requested
\$50.00 Minimur	n of two Event Personnel
\$25.00 Event P	ersonnel each per event
	Total Cost \$
Additional Documer the site map. A sep.	ntation Required: If you checked 'Yes' above, please clearly indicate the number of personnel and where they should be located on a parate meeting may be required with the Emergency Management Personnel.

EMERGENCY MEDICAL SERVICES REQUESTED: Please indicate what services you are requesting. Mark all that are requested: No	FIRE DEPARTM	IENN.
Time(s) Requested: Ambulance(s) Number Requested	EMERGENCY MED	ICAL SERVICES REQUESTED: Please indicate what services you are requesting. Mark all that are requested:
Additional Information May Be Required: Major First Truck	No ☐ Yes =	
Medic Kubota Fisa Truck Fisa Truck many be needed at your Event. Please include any special requests.	Time(s) Reque	sted:
BUILDINGS AND GROUNDS FENCING: The following are available for a fee. Mark all that are requested: Event Fencing Number of Sections Requested Other Snow Fencing Number of Feet Requested Other Additional fees may apply. WASTE RECEPTICLES Will the event require additional waste receptacles? The location of the waste receptacles must be approved by the "BOW"/"EPRB". (Please check No or Yes below.) Additional fees may apply. Will the event require Buildings & Grounds to set up or deliver other equipment? If Yes, please list below. (Flease check No or Yes below.) Will the event require Buildings & Grounds to set up or deliver other equipment? If Yes, please list below. (Flease check No or Yes below.) Yes	Medic Kubota Fire Truck First Aid Station	
BUILDINGS AND GROUNDS FENCING: The following are available for a fee. Mark all that are requested: Event Fencing Numberol Sections Requested Other Snow Fencing Numberol Feet Requested Other WASTE RECEPTICLES Will the event require additional vaste receptacles? The location of the waste receptacles must be approved by the "BOW7'EPRB". (Please check No or Yes below.) Additional fees may apply. Will the event require Buildings & Grounds to set up or deliver other equipment? If Yes, please list below. (Please check No or Yes below.) No	Additional Informat	ion May Be Required.
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Additional fees may apply. WASTE RECEPTICLES Will the event require additional waste receptacles? The location of the waste receptacles must be approved by the "BOW"/"EPRB". (Please check No or Yes below.) Additional fees may apply. Will the event require Buildings & Grounds to set up or deliver other equipment? If Yes, please list below. (Flease check No or Yes below.) No. Yes Additional Documentation Required. If you checked Yes, above; please clearly indicate the number of fencing on the side map. PARKS DEPARTMENT EQUIPMENT REQUESTED: No. Yes ONLY AVAILABLE FOR CITY OR GANIZED EVENTS (I.E.: Rhapsody, Summer Chill, WinterFest, etc.) Risers ONLY AVAILABLE FOR CITY OR GANIZED EVENTS (I.E.: Rhapsody, Summer Chill, WinterFest, etc.)	FENCING: The follow	ing are available for a fee. Mark all that are requested:
Additional fees may apply. WASTE RECEPTICLES Will the event require additional waste receptacles? The tocation of the waste receptacles must be approved by the "BOW"/"EPRB". (Please check No or Yes below.) Additional fees may apply. Will the event require Buildings & Grounds to set up or deliver other equipment? If Yes, please list below. (Please check No or Yes below.) No Yes Additional Documentation Required: If you checked "Yes" above; please clearly indicate the number of ferrong on the site map. PARKS DEPARTMENT EQUIPMENT REQUESTED: No Yes ONLY AVAILABLE FOR CITY ORGANIZED EVENTS (I.E.: Rhapsody, Summer Chit, WinterFest, etc.) Risers ONLY AVAILABLE FOR CITY ORGANIZED EVENTS (I.E.: Rhapsody, Summer Chit, WinterFest, etc.) Stage ONLY AVAILABLE FOR CITY ORGANIZED EVENTS (I.E.: Rhapsody, Summer Chit, WinterFest, etc.)		Number of Sections Requested Other
WASTE RECEPTICLES Will the event require additional waste receptacles? The location of the waste receptacles must be approved by the "BOW? EPRB". (Please check No or Yes below.) Additional fees may apply. Will the event require Buildings & Grounds to set up or deliver other equipment? If Yes, please list below. (Please check No or Yes below.) No.	☐ Snow Fencing	Number of Feet Requested Other
WASTE RECEPTICLES Will the event require additional waste receptacles? The location of the waste receptacles must be approved by the "BOW? EPRB". (Please check No or Yes below.) Additional fees may apply. Will the event require Buildings & Grounds to set up or deliver other equipment? If Yes, please list below. (Please check No or Yes below.) No.	Additional foot mover	· · · · · · · · · · · · · · · · · · ·
Will the event require Buildings & Grounds to set up or deliver other equipment? If Yes, please list below. No	WASTE RECEPTION Will the event require add (Please check No or Yes be	CLES ditional waste receptacles? The location of the waste receptacles must be approved by the "BOW"/"EPRB".
PARKS DEPARTMENT EQUIPMENT REQUESTED: No Yes ONLY AVAILABLE FOR CITY ORGANIZED EVENTS (I.E.: Rhapsody, Summer Chill, WinterFest, etc.) Stage ONLY AVAILABLE FOR CITY ORGANIZED EVENTS (I.E.: Rhapsody, Summer Chill, WinterFest, etc.)	Will the event require Bu	
PARKS DEPARTMENT EQUIPMENT REQUESTED: No Yes Golf Cars ONLY AVAILABLE FOR CITY OR GANIZED EVENTS (I.E.: Rhapsody, Summer Chill, WinterFest, etc.) Risers ONLY AVAILABLE FOR CITY OR GANIZED EVENTS (I.E.: Rhapsody, Summer Chill, WinterFest, etc.) Stage ONLY AVAILABLE FOR CITY OR GANIZED EVENTS (I.E.: Rhapsody, Summer Chill, WinterFest, etc.)		tion Required. If you checked "Yes" above, please clearly indicate the number of fencing on the site map.
Risers ONLY AVAILABLE FOR CITY ORGANIZED EVENTS (I.E.: Rhapsody, Summer Chill, WinterFest, etc.) Stage ONLY AVAILABLE FOR CITY ORGANIZED EVENTS (I.E.: Rhapsody, Summer Chill, WinterFest, etc.)	EQUIPMENT REQ	RTMENT
Stage ONLY AVAILABLE FOR CITY ORGANIZED EVENTS (I.E.: Rhapsody, Summer Chill, WinterFest, etc.)	Golf Cars	ONLY AVAILABLE FOR CITY ORGANIZED EVENTS (I.E.: Rhapscdy, Summer Chill, WinterFest, etc.)
California informational distriction of other content of the conte		

POLICE SERVICES: Please indicate what services	you are requesting. Mark all that are requested:
No T Yes	
Please Indicate why you feel Police presence may be needed at	your Event.
Additional Information May Be Required.	
STREET DEPARTMENT	
STREET CLOSURES: Will you be re	equiring closure of City streets for your event?
OTTLET SESSOTES. VIII you bott	iquility dissuits of oily streets for your event:
,	
No Yes Street Name Please mark all that may apply:	
No Yes Street Name Please mark all that may apply:	
No Yes Street Name Please mark all that may apply: Street Closed From:	To:
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No Yes Street Name Please mark all that may apply: Street Closed From: Street Closed From: Street Closed From:	
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No Yes Street Name Please mark all that may apply: Street Closed From: OTHER STRUCTURES Will your event include other structures not identified about the structures and identified about the structures are structured.	To:To:To:To:To:
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No Yes Street Name Please mark all that may apply: Street Closed From: OTHER STRUCTURES Will your event include other structures not identified abor (Please check No or Yes below.)	To:
No Yes Street Name Please mark all that may apply: Street Closed From: OTHER STRUCTURES Will your event include other structures not identified about (Please check No or Yes below.)	To:To:To:To:To:

BOARD OF WORKS PERMITS
(Please check No or Yes below) If yes, please provide additional information as requested below. Document(s) with this information may be attached. Are you requesting the use of City Plaza?
Water Yes
No No No No No No No No No N
Electric: Yes
No Plaza Sign:
Yes
No Sign Information:
Bridge Banner: Yes
No Please indicate location:
Bridge Banner- North Main Street- Memorial Bridge
Bridge Banner – Johnson Street
NOISE ORDINANCE
Will the event require an exception to noise by the Event Organizer? (Please check No or Yes below.)
No Yes Reason:
Parade and Special Exception to Noise Ordinance:
Yes
No Public Assembly and Special Exception to Noise Ordinance:
Yes No
Special Exception to Noise Ordinance: Yes
No
Persons or entities affected by this special exception to the Noise Ordinance: (required)
What measures will be taken to mitigate the impact of the Naise execution on aureaunding and aureaunding
What measures will be taken to mitigate the impact of the Noise exception on surrounding persons (required) YES -All dogs on JOASH churing the Agility domonstration

EMERGENCY ACTION PLAN

PURPOSE (Required for all Applicants)

- A. This emergency action plan predetermines actions to take before and during the EVENT in response to an emergency or otherwise hazardous condition. These actions will be taken by organizers, management, personnel, and attendees. These actions represent those required prior to the event in preparation for and those required during an emergency.
- B. Flexibility must be exercised when implementing this plan because of the wide variety of potential hazards that exist for this event. These hazards include, but are not limited to Fire, Medical Emergencies, Severe Weather, or situations where Law Enforcement is required.

BASIC PLAN

A. The emergency action plan event representative will be identified as the point of contact for all communications regarding the event. This person is identified as <u>primary contact</u> and must be present during the event:

Contact full name (first/last name):

Contact cell number (area code plus number):

EVENT MAPS

SITE MAP (Required for all Applicants)

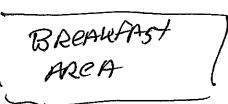
Please attach a Site Map clearly indicating the set-up of the event. An example would be the Start/Finish of a walk, run, race event and/or the set-up area of a festival or cultural event. The Site Map should indicate the relative location of the following; all sources of amplified sound and direction of sound; tents and canopies with sizes, stages, promotional vehicles, portable toilets, fencing, barricades, and other structures; proposed driving paths for all equipment and supply vehicles; location of vehicles you wish to retain on "EPRB" property during the event; locations of food and proposed street closures. All site Maps are subject to the approval of "EPRB".

ROUTE MAP (Runs, Welks, Bike Rides)

All events that include a run/ walk, or other activity in which participants will be following a course will be required to attach a Route Map and a written document of the proposed route of the event. All proposed Route Maps are subject to the "EPRB" approval. The use of any outside the Parkways or parks such as City streets must be approved by the Board of Public Works.

For a more detailed Route Map, it is recommended to use mapmyrun.com (this is a free website), Bing maps or Google maps





INDEMNIFICATION, WAIVER AND RELEASE

In consideration of the granting of a Permit by the BOARD OF PUBLIC WORKS and/or the BOARD OF PARKS AND REACREATION, I hereby release, discharge, indemnify, protect and hold harmless the City of Elkhart, Indiana, and all of its agents, officials, and employees, of and from any and all claims, demands, damages, both compensatory and punitive, actions, causes of actions, costs, loss of services or consortium, and any expenses incurred for all personal injury or property damage sustained by me or any third party arising out of or in any way involving the use of the City's property during the event. I further agree to indemnify, protect, and hold harmless the City of Elkhart from any and all claims and causes of action, including attorney fees, caused by my negligence or willful conduct that is in any way related to the use of the City's property. I am more than 18 years of age and am fully competent. I have read in full this agreement and understand and agree to all of its terms and conditions. I have signed this instrument voluntarily and with full knowledge of the fact that I am waiving and releasing any and all claims for myself that may subsequently arise, regardless of their nature and extent. Furthermore, if signed on behalf of an entity, I swear and affirm that I am duly authorized to execute this INDEMNIFICATION, WAIVER AND RELEASE on behalf of the entity.

APPLICANT SIGNATURE

I have read the terms and conditions outlined in this document and the City of Elkhart, City of Elkhart Board of Works and the City of Elkhart Park & Recreation Board Code of Ordinances and agree to abide by them.

Unless expressly provided for in the permit, Use & Event Permits do not grant the permit holder with exclusive rights to park property including but not limited to any right to restrict access, use, and First Amendment activities of any person on park property open to the general public.

I agree to be bound by the above terms as a condition to the issuance of a Special Event Permit. All payments are due upon the BOW and EPRD final approval.

THIS DOCUMENT CONTAINS A RELEASE OF ALL CLAIMS AND A WAIVER OF RIGHTS. I HAVE CAREFULLY READ ALL OF ITS TERMS AND RETAINED A COPY OF THIS DOCUMENT FOR MY OWN RECORDS.

JOHN BARNOY ASH

SIGNATURE OF ARRIVANT

SIGNATURE OF ARRIVANT

PRINTED NAME OF APPLICANT

SIGNATURE OF APPLICANT

5/32/22

DATE

Date

WITNESSED: Clerk of the Board of Works

APPROVED: BOARD OF PUBLIC WORKS

Date_____

President

RATIFIED: BOARD OF PARKS AND RECREATION (if applicable)

President or Secretary



ELKHART BOARD OF WORKS 2023 USE & EVENT PERMIT APPLICATION

229 South 2nd Street Elkhart, IN 46516 Phone: (574) 294-5471

Date Received: <u>6/13/2-3</u>

NSTRUCTIONS: Please carefully read the "Event Procedures & Guidelines" sections before comple Incomplete applications and/or applications without the required application fee wi	eting this application. Il not be processed.
EVENT NAME: Break down the walls 2023,	DATE(S) REQUESTED 1-7-23 (7-14-23) (7-21-1
LOCATION/VENUE REQUESTED Island Park band-stand	Welectricity 7-28-23)
LOCATION/VENUE 2 ND CHOICE REQUESTED	
OFFICE USE: DATE/VENUE AVAILABLE No Yes	
APPLICANT INFORMATION	
NAME OF APPLICANT Josh Eaton (Adult & Teen Cha	illenge of Northern Indiana
NAME OF EVENT ORGANIZER/PRODUCER	
PRODUCTION COMPANY/ORGANIZATION	
Adult & Teen Challenge of Norther	n Indiana
STREET ADDRESS	APT/UNIT/SUITE
Elkhart	STATE ZIP CODE 44514
E-MAIL ADDRESS	
DAYTIME PHONE FAX	CELL PHONF
EVENT DAY ON-SITE CONTACT * REQUIRED DAYTIME PHONE	CELL PHONE
EVENT SPONSOR: Are you, the applicant, organizing this event on behalf of a (Please check No or Yes Below)	another organization?
No Yes——> Name of Organization:	
NAME OF SPONSORING ORGANIZATION CONTACT	SPONSORING ORG. CONTACT PHONE
ADDRESS OF SPONSORING ORGANIZATION CITY	ZIP CODE
Additional Documentation Required: If you checked "Yes" above, please submit an endorsement letter from the you are organizing this event.	e organization (on their official Letterhead) on whose behalf
Is the sponsoring organization a 501(c) (3)? (Please check No or Yes below.)	
No Yes——— Please attach current verification of 501(c) (3) status	
Does the sponsoring organization have an ST-105 General Sales Tax Exempto (Please check No or Yes below.)	otion Status?
No Yes Please attach current verification of ST-105 status	FEDERAL TAX ID #

EVENT INFORMATION	
ACTUAL EVENT TIMES (NOT INCLUDING SETUP or TAKE DOWN) Start Time: 7 500 PM Finish Tim Additional Information Required: Please attach a schedule if your even	ne: 10:00 PM ent includes multiple days and/or varying times.
SET-UP TIME(S) From: 3:00 PM To: 6:00 PM EXPECTED NUMBER OF PARTICIPANTS:	From: 10:00PM To: 11:00PM
If the event is reoccurring, please submit the past number of participants	s below.
2022 NUMBER OF PARTICIPANTS:	2021 NUMBER OF PARTICIPANTS:
PREVIOUS YEAR DATE/LOCATION: Has this event been previously he (Please check No or Yes below.) No Yes Event Name: Location:	
Please check what type of event this is (Check all that apply) and wri	
of Elkhart 3 local	churches.
· .	
Please provide a detailed description of your event. Document(s)) with this information or other materials describing this event may be attached.
PROHIBITED ACTIVITIES IN CITY PARKS (By Ordina	ances)
No Fundraising Allowed	
No Bounce Houses Allowed	
No Admission Fees Allowed	

EVENT LOGIST	CS
and the second of the second o	ect to the approval of the "EPRB." Additionally, certain event features, such as street closures and separate permits from the City regarding City of Elkhart Permits, please call 574-294-5471 ext. 1055 or e-mail Nancy.Wilson@coei.org
(Please check the appropriate	sion to serve and/or sample food and/or beverages?
If applicable IF YES, please describe:	Name of Caterer/Vendor:
	ired: If you checked "Yes" above, a Short Term Permit is required from the Elkhart County Health Department. I/beverages will be served on the Site Map.
information may be attach	or canopies, describe and give the number of tents and/or canopies, along with the sizes of each. A separate sheet with this ned. All tents and/or canopies must be indicated on the Site Map. The Event Organizer is responsible for any damage caused ity and must consult "BOW" prior to installation. **earance Required.** **nts and/or canopies?**
No Yes —	Number of Tents/Canopies:
Require inspections by the Elk Utilities must be marked. Call 8	Tent/Canopy Size(s): (If you have multiple tents/canoples with varying sizes, indicate the number with the corresponding size.) Into over 400 square feet (20 ft. X 20 ft.): Into the corresponding size of the corresponding size of the corresponding size of the
	on Required: If you checked "Yes" above, please indicate the number of tents with the corresponding size. mation may be attached. All tents and/or canopies must be indicated on the Site Map.
VEHICLES Are you requesting permi	ssion to operate staff/supply vehicles on City/"EPRB" service roads for delivery of equipment, supplies, or catering/vending? Number of Vehicles: Vehicle Description(s): Dodge truck "kound Eq Chevy truck" lighting
Are you requesting permi	Number of Vehicles: Vehicle Description(s): Same

STAGES/PLATFORMS				
(Please check No or Yes below) If yes, please provide additional information as requested below. Document(s) with this information may be attached.				
Will your event include the installation of stages/platforms? The "BOW" must approve the location of the stages/platforms. (Please check No or Yes below.) NO STAGES ARE PROVIDED OR AVAILABLE FROM THE CITY OF ELKHART OR ITS DEPARTMENTS.				
*May require additional insurance.				
No Yes Number of Stage(s):				
Stage Description(s):				
Stage Owner Phone Number:				
Address: Street, City, State, Zip				
Stage Specs will be required.				
Additional Documentation Required: If you checked "Yes" above, please clearly indicate the number of stages/platforms on the Site Map.				
Traditional Bootamenta quinta. If you encoused from above, produce the mainteen of stages/platforms on the one map.				
PORTABLE TOILETS (Please check No or Yes below) If yes, please provide additional information as requested below. Document(s) with this information may be attached. All portable toilets must be removed from City/"EPRB" property within 48 hours of event (if the event is on a Saturday or a Sunday, portable toilets must be removed that following Monday). The location must be approved by the City/"EPRB." ADA-compliant toilets are required for Public Gatherings.				
No Yes Number of Portable Toilets:AND Number of Accessible ADA Portable Toilets: Company/Description(s): 4 Star rentals				
Company/Description(e): 4 Star reputals				
Additional Documentation Required: If you checked "Yes" above, please clearly indicate the number of portable toilets on the Site Map				
FENCING				
Will the event include the installation of event fencing by the Event Organizer? The location of the fencing must be approved by the "BOW"/"EPRB." (Please check No or Yes below.)				
No Pescription:				
May require a call to 811 for location marking of Utilities. Buildings and Grounds must also approve to make sure sprinkler lines are not in jeopardy.				
way require a can to off for location marking of offinities. Buildings and Grounds must also approve to make sure sprinkler lines are not in jeopardy.				
EMERGENCY SUPPORT SERVICES- Motor Vehicle and Pedestrian Control				
Will the event require Emergency Support Services? (Please check No or Yes below.)				
No Yes ———————————————————————————————————				
Number of Emergency Management Staff Requested				
\$50.00 Minimum of two Event Personnel				
\$25.00 Event Personnel each per event				
Total Cost \$				
Additional Documentation Required: If you checked "Yes" above, please clearly indicate the number of personnel and where they should be located on the site map. A separate meeting may be required with the Emergency Management Personnel.				

FIRE DEPARTMENT	
	SERVICES REQUESTED: Please indicate what services you are requesting. Mark all that are requested:
No Yes Yes	
Ambulance(s)	Number Requested
☐ Medic Kubota ☐ Fire Truck	
First Aid Station	
Please indicate your reason that a Fir	re Truck may be needed at your Event. Please include any special requests.
Additional Information May	y Be Required.
BUILDINGS AND G	ROUNDS
FENCING: The following are	available for a fee. Mark all that are requested:
	of Sections Requested Other
☐ Snow Fencing Number of	ofFeet Requested Other
Additional fees may apply.	
WASTE RECEPTACLES	
	waste receptacles? The location of the waste receptacles must be approved by the "BOW"/"EPRB."
No Yes	
Will the event require Buildings (Please check No or Yes below.)	& Grounds to set up or deliver other equipment? If Yes, please list below.
No Yes	
	quired: If you checked "Yes" above, please clearly indicate the number of fencing on the site map.
PARKS DEPARTM	ENT
EQUIPMENT REQUEST	
No Yes	LD
	NLY AVAILABLE FOR CITY-ORGANIZED EVENTS (I.E., Rhapsody, Summer Chill, WinterFest, etc.)
	NLY AVAILABLE FOR CITY-ORGANIZED EVENTS (i.E., ruispsody, Summer Chill, WinterFest, etc.)
20 CO COCCUS COCUS COCCUS COCU	NLY AVAILABLE FOR CITY-ORGANIZED EVENTS (I.E., Rhapsody, Summer Chill, WinterFest, etc.)
	NLY AVAILABLE FOR CITY ORGANIZED EVENTS (I.E., Rhapsody, Summer Chill, WinterFest, etc.)

City Departments Only may request the use of these items.

POLICE DEPARTMENT		
POLICE SERVICES: Please indicate what services you are requesting. Mark all that are requested:		
No Yes ——>		
Please indicate why you feel Police presence may be needed at	your Event.	
Additional Information May Be Required.		
STREET DEPARTMENT		
OTREET OF COLUMN AND AND ADDRESS OF THE PROPERTY OF THE PROPER		
STREET CLOSURES: Will you be re	equiring closure of City streets for your event?	
No Ves Street Name		
Please mark all that may apply:		
Street Closed From:	To:	
	To:	
Street Closed From:	To:	
	To:	
	То:	
	To:	
OTHER STRUCTURES		
OTTER OTTO OTTE		
Will your event include other structures not identified about (Please check No or Yes below.)	ove? The location of all other structures must be approved by the "EPRB".	
No Yes Number of Structures	·	
December (a)		
Description(s):		
Additional Information Required: If you checked "Yes" ab and all other structures on the Site Map. Ordering of a	ove, please indicate the location of all stages/platforms, portable toilets, fencing, barricades all equipment must be done by the Event Organizer.	

2023 City of Board of Works and Park and Recreation Board - - - 6

BOARD OF WORKS PERMITS (Please check No or Yes below) If yes, please provide additional information as requested below. Document(s) with this information may be attached. Are you requesting the use of City Plaza? Water: Yes No Electric will need electricity Yes No Paza Sign: Yes No Sign Information: Bridge Banner: Yes No Please indicate location: Bridge Banner- North Main Street- Memorial Bridge Bridge Banner - Johnson Street NOISE ORDINANCE Will the event require an exception to noise by the Event Organizer? (Please check No or Yes below.) 10:00PM Reason: we will be playing live music until Parade and Special Exception to Noise Ordinance: Yes No Public Assembly and Special Exception to Noise Ordinance: Yes No Special Exception to Noise Ordinance: Yes No Persons or entities affected by this special exception to the Noise Ordinance: (required) What measures will be taken to mitigate the impact of the Noise exception on surrounding persons (required)

EMERGENCY ACTION PLAN

PURPOSE (Required for all Applicants)

- A. This emergency action plan predetermines actions to take before and during the EVENT in response to an emergency or otherwise hazardous condition. These actions will be taken by organizers, management, personnel, and attendees. These actions represent those required prior to the event in preparation for and those required during an emergency.
- B. Flexibility must be exercised when implementing this plan because of the wide variety of potential hazards that exist for this event. These hazards include but are not limited to Fire, Medical Emergencies, Severe Weather, or situations where Law Enforcement is required.

BASIC PLAN

A. The emergency action plan event representative will be identified as the point of contact for all communications regarding the event. This person is identified as the <u>primary contact</u> and must be present during the event:

Contact full name (first/last name): JoSh Faton

Contact cell number (area code plus number): 972-977-7248

EVENT MAPS

SITE MAP (Required for all Applicants)

Please attach a Site Map clearly indicating the set-up of the event. An example would be the Start/Finish of a walk, run, or race event and/or the set-up area of a festival or cultural event. The Site Map should indicate the relative location of the following; all sources of amplified sound and the direction of the sound; tents and canopies with sizes, stages, promotional vehicles, portable toilets, fencing, barricades, and other structures; proposed driving paths for all equipment and supply vehicles; location of vehicles you wish to retain on "EPRB" property during the event; locations of food and proposed street closures. All site Maps are subject to the approval of "EPRB."

ROUTE MAP (Runs, Walks, Bike Rides)

All events that include a run/ walk or other activity in which participants will be following a course will be required to attach a Route Map and a written document of the proposed route of the event. All proposed Route Maps are subject to "EPRB" approval. The use of any outside the Parkways or parks, such as City streets, must be approved by the Board of Public Works.

For a more detailed Route Map, it is recommended to use mapmyrun.com (this is a free website), Bing maps, or Google maps

ELKHART COUNTY HEALTH DEPARTMENT

An Elkhart County Health Department Permit for food and beverage must accompany event plans. Please contact the Elkhart County Health Department at 574-523-2283.

Thank you for completing your Special Use Permit Application. Before you submit your application, please make sure that the following steps have been completed:

Have you?

A

Signed and dated your application?

NA

Attached your event site map? (and route map if a run/walk event)

V

Designated the onsite Emergency Contact Person?

Provided all documents and information as requested throughout the application? ST-105, 501 (c) (3), etc.

Certificate of Insurance listing the City of Elkhart as a Certificate Holder



Tent Permit, if applicable

Certificates of Insurance should include the following under additionally insured:

Civil City of Elkhart Elkhart Park Board for and on behalf of Parks & Recreation 229 South Second Street Elkhart, IN 46516

Civil City of Elkhart 229 South Second Street Elkhart, IN 46516

Submit your completed application to:

For Parks:

For Board of Works:

City of Elkhart Parks & Recreation Board

Use & Event Permitting

229 South 2nd Street

Elkhart, IN 46516

Phone (574) 295-7275

Email:elkhartcityparkspermits@coei.org

City of Elkhart Board of Public Works

Use & Event Permitting

229 South 2nd Street

Elkhart, IN 46516

Phone (574) 294-5471 ext. 1055

Email:Nancy.Wilson@coei.org

INDEMNIFICATION, WAIVER AND RELEASE

In consideration of the granting of a Permit by the BOARD OF PUBLIC WORKS and/or the BOARD OF PARKS AND RECREATION, I hereby release, discharge, indemnify, protect and hold harmless the City of Elkhart, Indiana, and all of its agents, officials, and employees, of and from any and all claims, demands, damages, both compensatory and punitive, actions, causes of actions, costs, loss of services or consortium, and any expenses incurred for all personal injury or property damage sustained by me or any third party arising out of or in any way involving the use of the City's property during the event. I further agree to indemnify, protect, and hold harmless the City of Elkhart from any and all claims and causes of action, including attorney fees, caused by my negligence or willful conduct that is in any way related to the use of the City's property. I am more than 18 years of age and am fully competent. I have read in full this agreement and understand and agree to all of its terms and conditions. I have signed this instrument voluntarily and with full knowledge of the fact that I am waiving and releasing any and all claims for myself that may subsequently arise, regardless of their nature and extent. Furthermore, if signed on behalf of an entity, I swear and affirm that I am duly authorized to execute this INDEMNIFICATION, WAIVER, AND RELEASE on behalf of the entity.

APPLICANT SIGNATURE

1 1 + 1

I have read the terms and conditions outlined in this document and the City of Elkhart, City of Elkhart Board of Works, and the City of Elkhart Park & Recreation Board Code of Ordinances and agree to abide by them.

Unless expressly provided for in the permit, Use & Event Permits do not grant the permit holder exclusive rights to park property, including but not limited to any right to restrict access, use, and First Amendment activities of any person on park property open to the general public.

I agree to be bound by the above terms as a condition to the issuance of a Special Event Permit. All payments are due upon the BOW and EPRD final approval.

THIS DOCUMENT CONTAINS A RELEASE OF ALL CLAIMS AND A WAIVER OF RIGHTS. I HAVE CAREFULLY READ ALL OF ITS TERMS AND RETAINED A COPY OF THIS DOCUMENT FOR MY OWN RECORDS.

1000

Josh va taton	Sil let
PRINTED NAME OF APPLICANT	SIGNATURE OF APPLICANT
	6-13-23
	DATE
WITNESSED: Cloub of the Decard of Wester	Date
WITNESSED: Clerk of the Board of Works	
APPROVED: BOARD OF PUBLIC WORKS	
President	Date
RATIFIED: BOARD OF PARKS AND RECREATION (if applicable	e)
President or Secretary	Date
riesiuciii di secietaly	

The Honorable Rod Roberson Mayor

Jamison Czarnecki
Parks Superintendent



Parks & Recreation 1320 Benham Ave. Elkhart, IN 46516

574.295.7275 Fax: 574.522-7808

MEMO

To: Board of Elkhart Parks and Recreation

From: Jamison Czarnecki, Superintendent

Date: 6-20-23

Re: Parks Department Report

Superintendent's Update (Jamison Czarnecki)

- With gratitude to Sommer Bowers and Nick Cron for leading the project, we are now live with our new program and rental registration software, Civic Ric for Parks. This will streamline many issues we've had in the past and create a better experience for residents and staff.
- Stan McCray has officially transferred back over to Elkhart Police Department after 5 years with Parks. His work ethic, great attitude, bad jokes, and leadership will be missed.
- We are excited to host the "Premier Girls Top 50 Fast Pitch Showcase" this weekend featuring over 100 teams throughout the region and almost 30 teams at Elkhart Riverview. The economic impact of this tournament last year was \$223,813 into Elkhart County. Stop over and check it out this weekend June 16th to 18th!
- Work has begun at High Dive park for improvements to replace the bridge into a fishing pier next to Kroger. This will help with trash build up in the pond.

Events Report (Sherry Krask))

- The Elkhart Farmers Market is continuing to be successful each week. We have around 35 vendors on average
 each week with approximately 300 shoppers. Many of our produce and home-based vendors sell out of a
 majority of their products each week by the end of the market. We now have over 90 vendors on our ledger
 who have been to the market at least once this season.
- We have successfully hired 4 event aides to assist us in facilitating our summer events. They help both on the
 event day as well as during the week in the planning and organizing process.
- Rhapsody Arts and Music Festival took place on June 9 and 10. We had approximately 25,000 attendees that were able to shop at the 65 vendors, eat from the 22 food vendors, and listen to the 8 entertainers. We also had an enhanced kid's area this year, which included 4 different crafts for kiddos to do, a kids stage with entertainment from 10AM-5PM on Saturday, and many different yard games to play with. Additionally, we had 20 volunteers who joined us for the weekend volunteering a total of 88 hours over the weekend.

Volunteers Report (Maddy Gordon)

- We held our rescheduled THOR Industries clean up at the Riverwalk on May 18th. The 20 volunteers who joined
 us for a few hours picked-up 25 bags of trash and helped the Parks Department to clean-up some evacuated
 homeless encampments under the Riverwalk.
- We are still looking for organizations and businesses for our Adopt A Parks Program, so please contact if interested.

The Honorable Rod Roberson Mayor

Jamison Czarnecki
Parks Superintendent



Parks & Recreation 1320 Benham Ave. Elkhart, IN 46516

574.295.7275 Fax: 574.522-7808

Programming and Recreation Report (Luisa

Programs Ended Since Last Meeting

<u>Ixmatlahua</u>)

- We want to thank all our volunteers and instructors who have and are currently helping us provide programs to the Elkhart City community.
- Roosevelt Center Programs 4:30-5:30 pm ended with 158 participants and 20 High school mentors. We will
 continue at the Roosevelt Center in the Fall of 2023.
- The "Bird Hikes" for Association of the Disabled of Elkhart County (ADEC) members. River Greenway Trail and Studebaker May 9 & May 23 from 9:30-10:30 am - 50 participants.
- "ADEC Silver Bullets vs. Parks and Rec Basketball Game," was a success with 10 volunteers from parks. ADEC team beat us, but we put up a good fight!
- "Intro to Watercolor Florals" ended with 8 participants.
- "Kids Bike Rodeo" was canceled on May 19 due to the weather.
- "Peace Run and Walk" at Roosevelt Park had 10 participants.
- "Skateboarding Lessons" ended with 25 participants.

June Programs

- "Camp Connection" started June 12th- 118 registered
- "Extended Day Program" started June 5th- 83 registered
- "Playground Program" has started June 5th at Weston Park, McNaughton Park, Walker Park, Willowdale, High Dive, Studebaker and Roosevelt.
- "Teen Lead" Camp Counselors- started June 12th, 8 out of 10 registered.
- "Tennis" started June 12th, 35 registered.
- "Life Line Camp" started June 5th, currently serving 100 youth.
- "Pickle Ball" started June 12th, 25 registered.
- "Passport Program" June 5th and open to the public!
 - "Line Dancing" continues on June 6th walk in welcomed
 - "Recreational Volleyball" starts June 20th, registered.
 - "CPR Certification" started June 13th, 4 registered.
 - "Learn to Ride for Kids" started June 14th, walk ins welcomed
 - "Bicycle Club Adults" started June 20th, walk ins welcomed.
 - "Nanny's Granny's and Me" Dance and Story Time started June 12th, walk ins welcomed.
 - "Movement and Meditation" started June 12th, walk ins welcomed
 - "Shark in the Park" started June 10th registered 2 walk ins welcomed
 - "Senior ABC of Fitness" started June 12th, walk ins welcomed
 - "Improv Comedy" started June 12th, walk ins welcomed.

Ranger Report (Lead Ranger Position is Vacant Currently)

End of Report