



Board of Alderman Request for Action

MEETING DATE: 5/3/2022

DEPARTMENT: Parks and Recreation

AGENDA ITEM: Resolution 1059, Special Request for Smithville Lions Club

RECOMMENDED ACTION:

If the Board concurs with sponsoring the event, a motion approving Resolution 1059 would be appropriate.

SUMMARY:

The public facility use policy allows the City to sponsor events if a written agreement is executed that describes the obligations between the parties, and if executed, removes the obligation for the group to reserve the facility or pay fees.

Smithville Lions Club has reserved the Courtyard for their Hot Summer Nights concerts series for Saturday evenings in August for several years. The club is again planning Hot Summer Nights for August 2022. As part of their reservation application, the Club is asking the Board to sponsor the Hot Summer Nights Events that will take place at the Courtyard on August 6, 20 and 27, 2022. This would be the first time the City has sponsored Hot Summer Nights. Sponsoring the event would waive their total cost of renting Courtyard Park. The total cost is \$300 (\$100 per night) + \$200 Damage Deposit (one time cost).

PREVIOUS ACTION:

Event Permits have been approved at the staff level for this event in past years.

POLICY ISSUE:

Click or tap here to enter text.

FINANCIAL CONSIDERATIONS:

Click or tap here to enter text.

ATTACHMENTS:

- | | |
|---|-----------------------------------|
| <input type="checkbox"/> Ordinance | <input type="checkbox"/> Contract |
| <input checked="" type="checkbox"/> Resolution | <input type="checkbox"/> Plans |
| <input type="checkbox"/> Staff Report | <input type="checkbox"/> Minutes |
| <input checked="" type="checkbox"/> Other: Letter and Special Event Application | |

RESOLUTION 1059

A RESOLUTION APPROVING A SPECIAL REQUEST FOR THE SMITHVILLE LIONS CLUB

WHEREAS, the Smithville Lions Club has submitted an Event Application and has requested the City sponsor their event; and,

WHEREAS, Hot Summer Nights Events that will take place at the Courtyard on August 6, 20 and 27, 2022; and,

WHEREAS, sponsoring the event would allow waiver the Courtyard Event Fee of \$300 + \$200 Damage Deposit.

NOW THEREFORE BE IT RESOLVED BY THE BOARD OF ALDERMEN OF THE CITY OF SMITHVILLE, MISSOURI, AS FOLLOWS:

THAT the City of Smithville agrees to sponsor Hot Summer Nights Events that will take place at the Courtyard on August 6, 20 and 27, 2022. City sponsorship of this event would allow waiver of event rental fees and deposits.

PASSED AND ADOPTED by the Board of Aldermen and **APPROVED** by the Mayor of the City of Smithville, Missouri, the 3rd day of May 2022.

Damien Boley, Mayor

ATTEST:

Linda Drummond, City Clerk

****CITY USE ONLY****

REQUIRED APPROVALS, IF APPLICABLE:

☐ **Parks and Recreation Director**

△Approved Date: _____ Conditions: _____

☐ **Board of Aldermen** (alcohol/other)

△ Approved Date: _____ Conditions: _____

☐ **Police Chief** (closures/public safety/alcohol): △Approved

Date: _____ Conditions: _____

☐ **Health Department** (food/beverage service): △Approved

Date: _____ Conditions: _____

☐ **State of Missouri** (alcohol license):

△Approved Date: _____ Conditions: _____

☐ **Finance Department** (licenses/taxes/fees): △Approved

Date: _____ Conditions: _____

☐ **Development**(temporary sign permit):

△Approved Date: _____ Conditions: _____

SMITHVILLE LIONS CLUB

Re Hot Summer Nights

Smithville City Council

Dear Council,

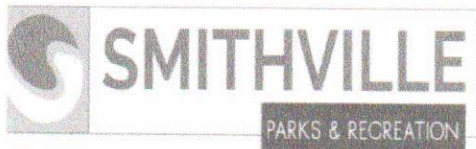
The Smithville Lions Club is requesting a waiver of free use of the Courtyard Park for the purpose of presenting free music concerts to the public.

The Lions have provided these concerts for quite a few years, every August saturday Nights, this year it will be the 6th, 20th and the 27th, the 13th is going to be the FESTIVAL with Diamond-Rio, this is put on by Eric Craig.

Thank you for your consideration

Sincerely,

Harley Morlock, Sect. Smithville Lions Club
952-237-3053



CITY OF SMITHVILLE

107 West Main Street

Smithville, MO 64089

Date Submitted _____

Application # _____

Date Approved _____

SPECIAL EVENT APPLICATION

Thank you for choosing the City of Smithville for your event. Staff looks forward to working with you in ensuring a quality event and protecting the public health, safety, and welfare of event participants and the public at large. In order to do so, the City requires that all events must be approved prior to the event. Please complete and return the following special event application to City Hall at the address above. Thank you again for choosing Smithville. Please refer to the **Application Information** and corresponding sections in the **Event Rules and Conditions** to answer most questions.

1. EVENT INFORMATION:

Event Name: HOT SUMMER NIGHTS

Event Location: COURTYARD PARK Event Tier: 1

Detailed event description (additional room on next page or sheet may be attached): Free CONCERTS

Estimated attendance: 0 - 500

Event Date(s) and Times: 8-20-27-2022 5 PM - 10 PM

Set up date/time: 4:30 PM Cleanup finished date/time: 10:30 PM

2. APPLICANT / CONTACT INFORMATION:

Applicant(s)

Name: HARLEY MORLOCK

Organization: HOWS CLUB

Address: 115 E MAIN

City, State, Zip: SMITHVILLE, MO 64089

Phone: 952.237.3053 Fax: _____

Emergency #: _____

E-mail: H.MORLOCK@HOTMAIL.COM

Property Owner(s), if not applicant or City

Name: _____

Organization: _____

Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____

Emergency #: _____

E-mail: _____

Alternative Contact

Name: _____

Phone: _____

Alternative Contact

Name: _____

Phone: _____

Detailed event description continued (Attach additional sheet if necessary): _____

3. EVENT TYPE:

Run ☐ Walk ☐ Parade/
March ☐ Bike
Race/Tour ☐ Street Fair ☐ Concert ☒ Film ☐ Festival ☐ Other: ☐ _____

5. SITE PLAN

Where do you plan to have your event? Courtyard Park: ☒ Other Public Property: _____

The site plan should be a detailed narrative and/or map including a description of the event set up, such as event entry and exit, temporary restrooms, first aid, start/finish lines, inflatables, and a timeline of your event. Please write this description in the space provided below or attach the description as a Word document. Explain Your Site Plan (Attach additional sheet if necessary): _____

FREE CONCERTS

6. PARKING PLAN

Do you have sufficient on street/lot parking at your event space? Yes: X No: _____

If No: Additional Parking and Shuttle Routes need to be approved by the City. Explain Your Parking Plan (Attach additional sheet if necessary): _____

7. PUBLIC INFORMATION:

If applicable, surrounding businesses that will be impacted by the event must be notified no later than 14 days prior to the event. How will you notify neighbors/businesses of your event? Explain (Attach additional sheet if necessary): _____

8. CANCELLATION NOTICE:

How will you notify participants if your event is cancelled with 48 hours of event day? Explain (Attach additional sheet if necessary): _____

SOCIAL MEDIA

9. SECURITY PLAN:

Describe your security plan, including crowd control, internal security, and venue safety. Specify if you would like to hire off-duty police support. (Attach additional sheet if necessary): _____

10. RESTROOM PLAN:

Describe your restroom/restroom cleaning plan. At least three restrooms must be provided for each estimated 500 attendees. Specify if you would like to hire city staff support (Attach additional sheet if necessary): _____

11. CLEAN UP PLAN:

Describe your clean-up plan, including trash removal and recycling containers. Specify if you would like to hire city staff support. (Attach additional sheet if necessary): _____

TRASH REMOVAL AFTER EVENT

12. FIRST AID PLAN:

Describe your First Aid Plan. (Attach additional sheet if necessary): _____

13. UTILITY CONNECTIONS

Do you want to have a utility connection/s at your event? Yes: X No: _____

If Yes: How Many Electric Pedestals? 1 NE OF STAGE

If Yes: How Many Water Hookups? 0

Additional Utility Requests (Attach additional sheet if necessary): _____

14. ROADWAY AND PARKING LOT CLOSURES:

Will you require a roadway closure? Yes: X No: _____

If Yes: Explain (Attach additional sheet if necessary): MAIN FROM BRIDGE TO
COMMERCIAL - BRIDGE - MAIN TO CHURCH
COMMERCIAL - MAIN TO CHURCH

15. OTHER STAFF SUPPORT:

Do you desire to hire city staff for other duties? Yes:____ No: X

If Yes: Please Explain (Attach additional sheet if necessary): _____

16. SIGNAGE:

Do you want to also have advertising signage for your event on private property? Yes:____ No:____

If Yes: Attach a Sign Permit Application

17. SPECIAL ITEMS:

Are you serving alcohol?..... Yes:____ No: X (If Yes, see the Alcohol Guidelines)

Are you having amplified music?..... Yes: X No:____ (If Yes, complete question 18 on pg. 13)

Will you have food/sales vendors?..... Yes:____ No: X (If Yes, complete question 20 on pg. 15-16)

18. AMPLIFIED SOUND / PERFORMANCE LIST

If you plan to have amplified sound, provide a tentative list of performers, performance type, music genre, performance times, and duration. Include non-live prerecorded sound/music. The complete performance list is due 7 days before the event (Attach additional sheet if necessary):

1. LIVE BANDS 6PM to 10 PM
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

INSURANCE

Must submit a copy of your special event insurance policy with this form.

THE UNDERSIGNED is an authorized representative of the event sponsor (hereinafter Name of Event Sponsor referred to as "the Sponsor Organization") IN CONSIDERATION of being given the opportunity to sponsor this event (hereinafter referred to as "the Event"), THE SPONSOR ORGANIZATION: 1. HEREBY COVENANTS NOT TO SUE AND RELEASES, WAIVES, DISCHARGES AND INDEMNIFIES the Releasees ("Releasees" are defined as the City of Smithville and its respective officials, agents and employees) from all liability against any and all claims and causes of action for injury, death, disease, related in any manner to the Event; 2. IN THE ABSENCE OF PROVIDING PROOF OF INSURANCE COVERAGE, the Sponsor Organization further acknowledges that the City of Smithville is not sponsoring nor otherwise involved in the administration of the Event, and the Sponsor assumes responsibility for claims associated with its operation or administration. THE SPONSOR ORGANIZATION expressly agrees that the foregoing Special Event Release and Hold Harmless Agreement is intended to be as broad and inclusive as is permitted by the law of the State of Missouri and that if any portion of this Special Event Release and Hold Harmless Agreement is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. THE UNDERSIGNED, ON BEHALF OF THE SPONSOR ORGANIZATION, HAS CAREFULLY READ AND VOLUNTARILY SIGNS THE SPECIAL EVENT RELEASE AND HOLD HARMLESS AGREEMENT, and further agrees that no oral representations, statements or inducements apart from the foregoing written agreement have been made.

SIGNATURE OF LEGALLY AUTHORIZED REPRESENTATIVE

Harley Morlock

Date

4-11-22

PRINTED NAME OF LEGALLY AUTHORIZED REPRESENTATIVE

HARLEY MORLOCK

TITLE

PC-CHAIR



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

04/10/2022

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

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

PRODUCER DSP Insurance Services, Inc. 1900 E. Golf Road, Suite 650 Schaumburg, IL 60173	CONTACT NAME: John Adams	
	PHONE (A/C, No, Ext): 1-800-316-6705	FAX (A/C, No): 847-934-6186
INSURED Harley Morlock Smithville Missouri	E-MAIL ADDRESS: lionsclubs@dspins.com	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: ACE American Insurance Company	
	INSURER B:	
	INSURER C:	
	INSURER D:	
INSURER E:		
INSURER F:		
NAIC # 22667		

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Agg. Per Named Insured is \$2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC			HDOG72484757	09/01/2021	09/01/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 10,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			ISAH25550596	09/01/2021	09/01/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB EXCESS LIAB DED <input type="checkbox"/> RETENTION \$ <input type="checkbox"/>						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Provisions of the policy apply to the named insured's participation in the following activity during the policy period shown above: 8/6,20/27/2022Hot Summer Nights

PROVISIONS OF THE POLICY DO NOT APPLY TO THE SALE OR SERVING OF ALCOHOLIC BEVERAGES.

CERTIFICATE HOLDER**CANCELLATION**Harley Morlock
17450 Smith's Mill RD
Smithville Missouri 64089

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

VENDOR MAP

Please map the planned vendors at your event (Attach additional sheet if necessary):

(May be depicted on site plan)

LEGAL

I have read and understand the Event Rules and Conditions and Application Information Guide. I will abide by these terms and fees associated with my event.

Harley Markel Event coordinator

4-11-22 Date