

Notice of Meeting  
Polk City | Parks Commission  
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February 4, 2019 | 6:00 pm  
City Hall | Council Chambers  
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Tentative Meeting Agenda

Kelley Haaland | Chair

Josh Ludwig | Pro Tem

Parks Commission Members: Holly Motsch | Amy Bentley | Josh Reed | Ashley Delaney

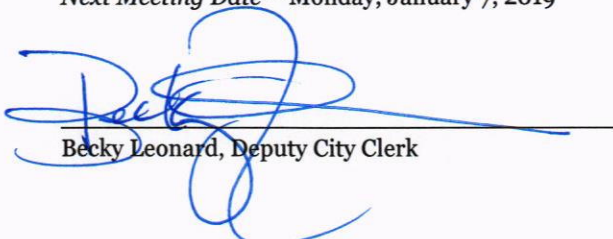
1. Call to Order
2. Roll Call
3. Approval of Minutes of December 3, 2018
4. Audience items
5. Consider motion to recommend Council approve use of the Town Square for the Farmers Market to occur every Thursday from 4:00 – 7:00pm with vendor set up and tear down times 3:00 – 7:30pm beginning May 23, 2019 and ending September 12, 2019.
6. Consider motion to recommend Council approve North Polk United Soccer to use soccer fields at the Sports Complex for practices and games during dates of March 18, 2019 to June 9, 2019.
7. Consider motion to recommend Council approve Little League Baseball and Softball to use Sports Complex for practices and games during dates of March 15, 2019 to July 15, 2019.
8. Consider motion to recommend Council approve Adult Softball to use Field 4 at Sports Complex during dates of June 30, 2019 to August 25, 2019.
9. Consider motion to recommend Council approve the temporary site plan for PCCEDC to use the Town Square for the 2019 Sounds on the Square Series to be held from 6:00 – 9:00pm on Friday, May 24, 2019; Saturday, June 22, 2019; and Friday, August 2, 2019 with set up/tear down from 9:00am – 10:00pm.
10. Consider motion to recommend Council approve the temporary site plan for PCCEDC to use the Town Square for the Bike Ride to be held from 11:00am – 6:00pm on Saturday, June 22, 2019 with set up/tear down from 9:00am – 10:00pm.
11. Tree Board Liaison Report
12. Staff Report
13. Public Works Report
14. Commission Report
15. Adjourn until March 4, 2019

**MEETING MINUTES**  
**The City of Polk City**  
**Parks Commission**  
**6:00 p.m., Monday, December 3, 2018**  
**City Hall | Council Chambers**

Polk City, Parks Commission held a meeting at 6:00 p.m., on December 3, 2018. The Agenda was posted at the City Hall office as required by law. **These tentative minutes reflect all action taken at the meeting.**

<p><b><u>Parks Commission Members Present:</u></b> Andy Johnson   Chair Kelley Haaland   Pro Tem Josh Reed   Parks Commission Member Josh Ludwig   Parks Commission Member</p> <p><b><u>Parks Commission Members Absent:</u></b> Holly Motsch   Parks Commission Member Amy Bentley   Parks Commission Member Ashley Delaney   Parks Commission Member</p>	<p><b><u>Staff Members Present:</u></b> Lindsey Huber   Assistant City Administrator Becky Leonard   Deputy City Clerk Randy Franzen   Public Works Supervisor</p>
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1. **Call to Order** | The meeting was called to order at 6:00 p.m.
2. **Roll Call** | Haaland, Johnson, Reed, Ludwig | In attendance  
Motsch, Bentley, Delaney | Absent
3. **Approval of Minutes**  
**MOTION:** A motion was made by Reed and seconded by Ludwig to approve the November 5, 2018 Meeting Minutes  
**MOTION CARRIED UNANIMOUSLY**
4. **Audience Items** | None
5. **Parks Commission Elections**
  - a. A motion was made by Reed and seconded by Ludwig to elect Haaland as Chairperson for 2019  
**MOTION CARRIED UNANIMOUSLY**
  - b. A motion was made by Reed and seconded by Johnson to elect Ludwig as Chairperson Pro-Tem for 2019  
**MOTION CARRIED UNANIMOUSLY**
6. **Park improvements and prioritization**  
The Commission prioritized the following future park improvements for Council to take into consideration as they discuss the budget for Fiscal Year 2020 and beyond.
  - 1) Lost Lakes Park – Complete Concept Plan as designed July 2017.
  - 2) Twelve Oaks Park – Start with pond work, followed by sidewalk, signs, and tables
  - 3) Doc Simmer Memorial Park – Picnic Tables
7. **Tree Board Report** | On behalf of Ken Morse, Deputy City Clerk Leonard shared the trees are happy after receiving an inch of rainfall. In addition, Morse received a Norway Spruce tree which has been planted in Linear Park.
8. **Council Liaison Report** | No report
9. **Staff Report** | Assistant City Administrator Huber reported budget discussions will continue.
10. **Public Works Report** | No report
11. **Commission Report** | No report
12. **Adjournment**  
A unanimous motion was made to adjourn at 6:18pm.  
Next Meeting Date – Monday, January 7, 2019

  
Becky Leonard, Deputy City Clerk

January 22, 2019

To: Polk City Parks Board

Re: Polk City Farmers Market 2019

We are requesting the use of the Town Square each Thursday night, except July 4<sup>th</sup> from Thursday May 23 through Thursday September 12 for the 2019 Farmers Market.

Thank you for your consideration.

Mary Kaye Madden

Market Manager



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
9/5/2018

**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 <b>Pullen Insurance Services, Inc. 2560 River Park Plaza, Suite 300 Fort Worth, TX 76116</b>	CONTACT NAME: <b>Sports Division</b>	
	PHONE: <b>(817) 738-6100</b> FAX: <b>(817) 738-2993</b>	
	E-MAIL ADDRESS: <b>contact@pullenins.com</b>	
	PRODUCER CUSTOMER ID#: <b>IA</b>	
INSURED <b>Alliance Management Group, LLC Iowa Soccer Association 6200 Aurora Avenue, Suite 607 E Urbandale, IA 50322</b>	INSURERS AFFORDING COVERAGE	NAIC #
	Insurer A: <b>National Casualty Company</b>	<b>11991</b>
	Insurer B: <b>Nationwide Life Insurance Company</b>	<b>66869</b>
	Insurer C:	
	Insurer D:	
	Insurer E:	

**COVERAGES**                      **CERTIFICATE NUMBER: 18130472**                      **REVISION NUMBER: 0**

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	ADD'L INSRD	SUBR WVD	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	<b>GENERAL LIABILITY</b> <input checked="checked" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="checked" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	X		<b>KRO 75627-00</b>	9/1/2018	9/1/2019	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	<b>\$1,000,000</b> <b>\$300,000</b>
							MED EXP (Any one person)	<b>\$5,000</b>
							PERSONAL & ADV INJURY	<b>\$1,000,000</b>
							GENERAL AGGREGATE	<b>UNLIMITED</b>
							PRODUCTS - COMP/OP AGG	<b>\$1,000,000</b>
							PARTICIPANT LEGAL LIABILITY	<b>\$1,000,000</b>
A	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="checked" type="checkbox"/> HIRED AUTOS <input checked="checked" type="checkbox"/> NON-OWNED AUTOS			<b>KRO 75627-00</b>	9/1/2018	9/1/2019	COMBINED SINGLE LIMIT (Ea accident)	<b>\$1,000,000</b>
							BODILY INJURY (Per person)	
							BODILY INJURY (Per accident)	
							PROPERTY DAMAGE (Per accident)	
A	<b>UMBRELLA LIAB</b> <input checked="checked" type="checkbox"/> OCCUR <input checked="checked" type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DEDUCTIBLE RETENTION \$			<b>XKO 75628-00</b>	9/1/2018	9/1/2019	EACH OCCURRENCE AGGREGATE	<b>\$1,000,000</b> <b>\$1,000,000</b>
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N (Mandatory in NH) If yes, describe under		N/A				<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER	
							E. L. EACH ACCIDENT	
							E. L. DISEASE - EA EMPLOYEE	
							E. L. DISEASE - POLICY LIMIT	
B	<b>PARTICIPANT ACCIDENT MEDICAL</b>			<b>BAX-301915-00</b>	9/1/2018	9/1/2019		<b>\$100,000</b>

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

This certificate is issued on behalf of Alliance Management Group, LLC  
 Iowa Soccer Association & North Polk United Soccer Club. Certificate Holder is Additional Insured as respects the operations of the Named Insured for sanctioned activities of the state association.

<b>CERTIFICATE HOLDER</b>	<b>CANCELLATION</b>
<b>City of Polk City</b> 112 3rd St Polk City, IA 50226	<b>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</b>  AUTHORIZED REPRESENTATIVE 

# np united soccer board

## North Polk United Board Members

Below is your current North Polk United Soccer Board. If you have any questions, please feel free to contact us.

**Greg Bell**

President

Em: [Click to Email](#)

Ph: [515-314-9679](tel:515-314-9679)

**Josh Maclean**

Vice President

Em: [Click to Email](#)

Ph: [515-802-2140](tel:515-802-2140)

**Kirk Haaland**

Registrar

Em: [Click to Email](#)

Ph: [515-291-5333](tel:515-291-5333)

**Jason Chesley**

Director of Referees

Em: [Click to Email](#)

Ph: [515-943-2949](tel:515-943-2949)

**Jodi Einck**

Secretary

Em: [Click to Email](#)

Ph: [712-269-2686](tel:712-269-2686)

**Noah Rasmussen**

Field Maintenance

Em: [Click to Email](#)

**Melissa Keys**

Treasurer

Em: [Click to Email](#)

Ph: [515-664-7642](tel:515-664-7642)

**Matt Boelman**

Director of Field Development

Em: [Click to Email](#)

Ph: [515-202-0370](tel:515-202-0370)

**Mike Furrow**

Director of Coaching

Em: [Click to Email](#)

Ph: [515-250-0821](tel:515-250-0821)

# Utilization of Sports Complex / Public Parks Application

*\*Submit one application for each park requested.*

*\*Proof of insurance along with contact information for your Board of Directors is required.*

**Organization Name:** North Polk United Soccer Club

**Address:** P.O. Box 54

**Phone:** 515-314-9679

**Email:** [gregbell@wellsfargo.com](mailto:gregbell@wellsfargo.com)

**Park/Field Requested:** Sports Complex

**Date Range:** March 18, 2019-June 9, 2019

Day of the Week	Time (Begin-End)	# of Events	Practice	Game	Tournament	Estimated # Coaches & Players in attendance	Estimated # Spectators in attendance	Estimated Total # in attendance	Estimated # of Parking Spots
Sunday	1:00-5:00 pm	10		10		200	450	580	185
Monday	5:00-9:30 pm	10	10			200	40	240	40
Tuesday	5:00-9:30 pm	10	10			200	40	240	40
Wednesday	5:00-9:30 pm	10	10			200	40	240	40
Thursday	5:00-9:30 pm	10	10			200	40	240	40
Friday	5:00-9:30 pm	6	6			60	20	80	25
Saturday	8:00 am-6:00 pm	15		15		224	520	780	290

**Representative Name:** \_\_\_\_\_

**Representative Signature:** \_\_\_\_\_

Parking Spaces Calendar		Date: 23-Mar		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am		30		30
12:00pm		30		30
1:00pm		30		30
2:00pm		30		30
3:00pm		30		30
4:00pm		30		30
5:00pm				0
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar		Date: 24-Mar		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am		30		30
12:00pm		30		30
1:00pm	18	30	18	66
2:00pm	18	30	18	66
3:00pm	18	30	18	66
4:00pm	18	30	18	66
5:00pm	18	30	18	66
6:00pm	18		18	36
7:00pm	18		18	36
8:00pm				0

Parking Spaces Calendar		Date: 30-Mar		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am		30		30
12:00pm		30		30
1:00pm		30		30
2:00pm		30		30
3:00pm		30		30
4:00pm		30		30
5:00pm		30		30
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar		Date: 31-Mar		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am		30		30
12:00pm		30		30
1:00pm	18	30	18	66
2:00pm	18	30	18	66
3:00pm	18	30	18	66
4:00pm	18	30	18	66
5:00pm	18	30	18	66
6:00pm	18		18	36
7:00pm	18		18	36
8:00pm				0

Parking Spaces Calendar		Date: 6-Apr		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am	44		44	88
8:00am	44		44	88
9:00am	44	65	44	153
10:00am	44	65	44	153
11:00am	44	50	44	138
12:00pm	44	50	44	138
1:00pm	44	60	44	148
2:00pm		60		60
3:00pm		60		60
4:00pm		30		30
5:00pm		30		30
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar		Date: 7-Apr		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am		30		30
12:00pm		30		30
1:00pm	18	75	18	111
2:00pm	18	75	18	111
3:00pm	18	60	18	96
4:00pm	18	60	18	96
5:00pm	18	30	18	66
6:00pm	18		18	36
7:00pm	18		18	36
8:00pm				0

Parking Spaces Calendar		Date: 13-Apr		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am	44		44	88
8:00am	44		44	88
9:00am	44	65	44	153
10:00am	44	65	44	153
11:00am	44	50	44	138
12:00pm	44	50	44	138
1:00pm	44	50	44	138
2:00pm		60		60
3:00pm		60		60
4:00pm		60		60
5:00pm		30		30
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar		Date: 14-Apr		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am		30		30
12:00pm		60		60
1:00pm	18	70	18	106
2:00pm	18	70	18	106
3:00pm	18	60	18	96
4:00pm	18	50	18	86
5:00pm	18	30	18	66
6:00pm	18		18	36
7:00pm	18		18	36
8:00pm				0

Parking Spaces Calendar		Date: 20-Apr		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am	44		44	88
8:00am	44		44	88
9:00am	44	65	44	153
10:00am	44	65	44	153
11:00am	44	50	44	138
12:00pm	44	50	44	138
1:00pm	44	50	44	138
2:00pm		60		60
3:00pm		60		60
4:00pm		50		50
5:00pm		30		30
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar		Date: 21-Apr		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am		30		30
12:00pm		60		60
1:00pm	18	75	18	111
2:00pm	18	75	18	111
3:00pm	18	75	18	111
4:00pm	18	60	18	96
5:00pm	18	30	18	66
6:00pm	18		18	36
7:00pm	18		18	36
8:00pm				0

Parking Spaces Calendar		Date: 27-Apr		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am	44		44	88
8:00am	44		44	88
9:00am	44	65	44	153
10:00am	44	65	44	153
11:00am	44	50	44	138
12:00pm	44	50	44	138
1:00pm	44	50	44	138
2:00pm		60		60
3:00pm		60		60
4:00pm		50		50
5:00pm		30		30
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar		Date: 28-Apr		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am		30		30
12:00pm		60		60
1:00pm	18	75	18	111
2:00pm	18	75	18	111
3:00pm	18	75	18	111
4:00pm	18	60	18	96
5:00pm	18	30	18	66
6:00pm	18		18	36
7:00pm	18		18	36
8:00pm				0



Parking Spaces Calendar		Date: 4-May		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am	44		44	88
8:00am	44		44	88
9:00am	44	65	44	153
10:00am	44	65	44	153
11:00am	44	50	44	138
12:00pm	44	50	44	138
1:00pm	44	50	44	138
2:00pm		60		60
3:00pm		60		60
4:00pm		50		50
5:00pm		30		30
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar		Date: 5-May		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am		30		30
12:00pm		60		60
1:00pm	18	75	18	111
2:00pm	18	75	18	111
3:00pm	18	75	18	111
4:00pm	18	50	18	86
5:00pm	18	30	18	66
6:00pm	18		18	36
7:00pm	18		18	36
8:00pm				0

Parking Spaces Calendar		Date: 11-May		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am	44		44	88
8:00am	44		44	88
9:00am	44	65	44	153
10:00am	44	65	44	153
11:00am	44	50	44	138
12:00pm	44	50	44	138
1:00pm	44	60	44	148
2:00pm		60		60
3:00pm		60		60
4:00pm		60		60
5:00pm		30		30
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar		Date: 12-May		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am		30		30
12:00pm		60		60
1:00pm	18	75	18	111
2:00pm	18	75	18	111
3:00pm	18	75	18	111
4:00pm	18	60	18	96
5:00pm	18	30	18	66
6:00pm	18		18	36
7:00pm	18		18	36
8:00pm				0

Parking Spaces Calendar		Date: 18-May		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am	44		44	88
8:00am	44		44	88
9:00am	44	65	44	153
10:00am	44	65	44	153
11:00am	44	50	44	138
12:00pm	44	50	44	138
1:00pm	44	50	44	138
2:00pm		60		60
3:00pm		60		60
4:00pm		60		60
5:00pm		30		30
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar		Date: 19-May		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am		30		30
12:00pm		60		60
1:00pm	18	75	18	111
2:00pm	18	75	18	111
3:00pm	18	75	18	111
4:00pm	18	50	18	86
5:00pm	18	30	18	66
6:00pm	18		18	36
7:00pm	18		18	36
8:00pm				0

Parking Spaces Calendar		Date: 1-Jun		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am	44		44	88
8:00am	44		44	88
9:00am	44	65	44	153
10:00am	44	65	44	153
11:00am	44	50	44	138
12:00pm	44	50	44	138
1:00pm	44	50	44	138
2:00pm		60		60
3:00pm		60		60
4:00pm		50		50
5:00pm		30		30
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar		Date: 2-Jun		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am		30		30
12:00pm		60		60
1:00pm	18	75	18	111
2:00pm	18	75	18	111
3:00pm	18	75	18	111
4:00pm	18	60	18	96
5:00pm	18	30	18	66
6:00pm	18		18	36
7:00pm	18		18	36
8:00pm				0

Parking Spaces Calendar		Date: 8-Jun		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am	44		44	88
8:00am	44		44	88
9:00am	44		44	88
10:00am	44		44	88
11:00am	44		44	88
12:00pm	44		44	88
1:00pm	44		44	88
2:00pm				0
3:00pm				0
4:00pm				0
5:00pm				0
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar		Date: 9-Jun		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am				0
12:00pm				0
1:00pm	18		18	36
2:00pm	18		18	36
3:00pm	18		18	36
4:00pm	18		18	36
5:00pm	18		18	36
6:00pm	18		18	36
7:00pm	18		18	36
8:00pm				0

Parking Spaces Calendar		Date: 15-Jun		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am	44		44	88
8:00am	44		44	88
9:00am	44		44	88
10:00am	44		44	88
11:00am	44		44	88
12:00pm	44		44	88
1:00pm	44		44	88
2:00pm				0
3:00pm				0
4:00pm				0
5:00pm				0
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar		Date: 16-Jun		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am				0
12:00pm				0
1:00pm	18		18	36
2:00pm	18		18	36
3:00pm	18		18	36
4:00pm	18		18	36
5:00pm	18		18	36
6:00pm	18		18	36
7:00pm	18		18	36
8:00pm				0

Parking Spaces Calendar		Date: 6/22/2019		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am	44		44	88
8:00am	44		44	88
9:00am	44		44	88
10:00am	44		44	88
11:00am	44		44	88
12:00pm	44		44	88
1:00pm	44		44	88
2:00pm				0
3:00pm				0
4:00pm				0
5:00pm				0
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar		Date: 6/23/2019		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am				0
12:00pm				0
1:00pm				0
2:00pm				0
3:00pm				0
4:00pm				0
5:00pm				0
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar		Date:		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am				0
12:00pm				0
1:00pm				0
2:00pm				0
3:00pm				0
4:00pm				0
5:00pm				0
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar		Date:		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am				0
12:00pm				0
1:00pm				0
2:00pm				0
3:00pm				0
4:00pm				0
5:00pm				0
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar		Date:		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am				0
12:00pm				0
1:00pm				0
2:00pm				0
3:00pm				0
4:00pm				0
5:00pm				0
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar		Date:		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am				0
12:00pm				0
1:00pm				0
2:00pm				0
3:00pm				0
4:00pm				0
5:00pm				0
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar		Date:		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am				0
12:00pm				0
1:00pm				0
2:00pm				0
3:00pm				0
4:00pm				0
5:00pm				0
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar		Date:		
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am				0
12:00pm				0
1:00pm				0
2:00pm				0
3:00pm				0
4:00pm				0
5:00pm				0
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar				Date:
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am				0
12:00pm				0
1:00pm				0
2:00pm				0
3:00pm				0
4:00pm				0
5:00pm				0
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar				Date:
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am				0
12:00pm				0
1:00pm				0
2:00pm				0
3:00pm				0
4:00pm				0
5:00pm				0
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar				Date:
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am				0
12:00pm				0
1:00pm				0
2:00pm				0
3:00pm				0
4:00pm				0
5:00pm				0
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar				Date:
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am				0
12:00pm				0
1:00pm				0
2:00pm				0
3:00pm				0
4:00pm				0
5:00pm				0
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar				Date:
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am				0
12:00pm				0
1:00pm				0
2:00pm				0
3:00pm				0
4:00pm				0
5:00pm				0
6:00pm				0
7:00pm				0
8:00pm				0

Parking Spaces Calendar				Date:
Time	BASEBALL	SOCCER	SOFTBALL	TOTAL
7:00am				0
8:00am				0
9:00am				0
10:00am				0
11:00am				0
12:00pm				0
1:00pm				0
2:00pm				0
3:00pm				0
4:00pm				0
5:00pm				0
6:00pm				0
7:00pm				0
8:00pm				0

# Utilization of Sports Complex / Public Parks Application

*\*Submit one application for each park requested.*

*\*Proof of insurance along with contact information for your Board of Directors is required.*

**Organization Name:** Polk City Little League

**Address:** 701 Lost Lake Dr Polk City

**Phone:** 515-321-6266

**Email:** joshua.d.reed@wellsfargo.com

**Park/Field Request:** Fields 1 - 4 Polk City Sports Complex

**Date Range:** March 15 - July 15

Day of the Week	Time (Begin-End)	# of Events	Practice	Game	Tournament	Estimated # Coaches & Players in attendance	Estimated # Spectators in attendance	Estimated Total # in attendance	Estimated # of Parking Spots
Sunday	1:00:00 PM - 8:00 PM	16	16	0		56	0	56	56
Monday	5:00 PM - 9:00 PM	4	0	4	0	112	100	212	112
Tuesday	5:00 PM - 9:00 PM	4	0	4	0	112	100	212	112
Wednesday	5:00 PM - 9:00 PM	4	0	4	0	112	100	212	112
Thursday	5:00 PM - 9:00 PM	4	0	4	0	112	100	212	112
Friday	5:00 PM - 9:00 PM	4	0	4	0	112	100	212	112
Saturday	7:00 AM - 2:00 PM	20	0	20	0	384	500	884	384

**Representative Name:** Joshua Reed

**Representative Signature:** Joshua Reed

## Becky Leonard

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**From:** JOSHUA.D.REED@wellsfargo.com  
**Sent:** Tuesday, January 15, 2019 8:46 AM  
**To:** Becky Leonard  
**Subject:** RE: 2017 Sports Complex-City Park Usage Application2.xlsx

We won't have insurance information until mid to late March. Once we have it we will share.

Board:

Tracy Klever – Softball President  
Josh Reed – Baseball President  
Michelle Capouch – Concession Stand  
Ryan Cook – Equipment  
Tom Frelund – Sponsorships  
John Klever – Treasurer

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**From:** Becky Leonard <bleonard@polkcityia.gov>  
**Sent:** Monday, January 14, 2019 4:39 PM  
**To:** Reed, Joshua D. <JOSHUA.D.REED@wellsfargo.com>  
**Subject:** RE: 2017 Sports Complex-City Park Usage Application2.xlsx

Thanks, Josh. Do you also have the Board of Directors contact along with current insurance information?

Becky Leonard  
***Deputy City Clerk***

City of Polk City  
112 Third Street | PO Box 426  
Polk City | IA 50226  
P: 515-984-6233 | F: 515-984-6177  
E: [bleonard@polkcityia.gov](mailto:bleonard@polkcityia.gov) | W: [polkcityia.gov](http://polkcityia.gov)



**Mission**

*To provide friendly, excellent, affordable municipal and utility services. The responsibility of sustaining an environmentally friendly, growing city environment is our highest priority. We always act with honesty and integrity to achieve our goals. The City strives to meet or exceed the community's expectation of economic, environmental, and social needs through a fiscally responsible and open City government.*

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**From:** [JOSHUA.D.REED@wellsfargo.com](mailto:JOSHUA.D.REED@wellsfargo.com) <[JOSHUA.D.REED@wellsfargo.com](mailto:JOSHUA.D.REED@wellsfargo.com)>

**Sent:** Monday, January 14, 2019 3:30 PM

**To:** Becky Leonard <[bleonard@polkcityia.gov](mailto:bleonard@polkcityia.gov)>

**Subject:** 2017 Sports Complex-City Park Usage Application2.xlsx

Here are my details. Hope this helps. We won't know any tournament work for another month or two.

# Utilization of Sports Complex / Public Parks Application

*\*Submit one application for each park requested.*

*\*Proof of insurance along with contact information for your Board of Directors is required.*

**Organization Name:** Polk City Adult Softball

**Address:** 1201 Hansen Pl . Polk City IA

**Phone:** 515-444-7624

**Email:** [reds4231@gmail.com](mailto:reds4231@gmail.com)

**Park/Field Requester:** Field 4

**Date Range:** 6-30-19 thru 8-25-19

Day of the Week	Time (Begin-End)	# of Events	Practice	Game	Tournament	Estimated # Coaches & Players in attendance	Estimated # Spectators in attendance	Estimated Total # in attendance	Estimated # of Parking Spots
Monday	6-8pm	1		x		21	15	36	15
Wednesday	6-8pm	1		x		21	15	36	15
Thursday	6-8pm	1		x		21	15	36	15
Sunday	1-8pm	4		x		80	60	140	40-50 for whole day
Saturday Aug 17th	8am-7pm	all day tourny			x	80	60	140	40-50
Saturday Aug 24th	8am 7pm	all day tourny			x	80	60	140	40-50

**Representative Name:** Dan Bunkers

**Representative Signature:** Dan Bunkers





**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)  
**07/18/2018**

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).

<b>PRODUCER</b> SADLER & COMPANY, INC. P.O. BOX 5866 COLUMBIA, SOUTH CAROLINA 29250-5866	<b>CONTACT NAME:</b> Sports Dept		
	<b>PHONE (A/ C, No. Ext):</b> 800-622-7370   <b>FAX (A/ C, No):</b> 803-256-4017		
	<b>E-MAIL ADDRESS:</b> soda@sadlersports.com		
	<b>PRODUCER CUSTOMER ID#:</b>		
<b>INSURED</b> D/ B/ A SPORTSPLEX OPERATORS AND DEVELOPERS ASSOCIATION PC Adult Softball League 1201 Hansen PL POLK CITY, IA 50226 Club #: 48814	<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
	<b>INSURER A:</b> NATIONAL CASUALTY COMPANY		
	<b>INSURER B:</b>		
	<b>INSURER C:</b>		
	<b>INSURER D:</b>		

**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.

INSD LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> _____ <input type="checkbox"/> _____ GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER			6L KRO 71901-00	12:01AM ET 07/19/2018	12:01AM ET 07/19/2019	EACH OCCURRENCE	\$2,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000
							MEDICAL EXPENSES (other than participants)	\$5,000
							PERSONAL & ADV INJURY	\$2,000,000
							GENERAL AGGREGATE	NONE
							PRODUCTS- COMP/ OP AGG	\$2,000,000
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON- OWNED AUTOS			n/a	n/a	n/a	COMBINED SINGLE LIMIT (Ea Accident)	\$1,000,000
							BODILY INJURY (Per person)	
							BODILY INJURY (Per accident)	
							PROPERTY DAMAGE (Per accident)	
A	<input type="checkbox"/> SEXUAL ABUSE / MOLESTATION			n/a	n/a	n/a	EACH OCCURRENCE	\$1,000,000
							AGGREGATE	\$2,000,000
C	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS- MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION			n/a	n/a	n/a	EACH OCCURRENCE	n/a
							AGGREGATE	
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER / MEMBER EXCLUDED? <input type="checkbox"/> Y/ N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			N/A			<input type="checkbox"/> PER STATUE	
							<input type="checkbox"/> OTHER	
							E.L. EACH ACCIDENT	
							E.L. DISEASE - EA EEMPLOYEE	
B	<b>PARTICIPANT ACCIDENT</b>			n/a	n/a	n/a	EXCESS MEDICAL	not covered
							AD&D	not covered

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

The General Liability policy, if included above, is part of the ERS Risk Purchasing Group Association, Inc.



RE: COVERED Team(s) - Adult - General Liability

Softball - 9 Team(s) - [Maximum 20 players per team]

Team Names: Swingers, Rock Valley, Suck n Wind, Torres, Petsafe, Maple Lane Drivers, No Glove No Love, Bridgeview, The Have Beens

(Adult Team General Liability Only: \$2,000,000 Each Occurrence; \$500,000 Legal Liability to Participants; Waiver/ Release Required)

**CERTIFICATE HOLDER** **CANCELLATION**

<b>EVIDENCE OF COVERAGE</b>	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 (company A) 
	AUTHORIZED REPRESENTATIVE (company B) 

Coverage is only extended to U.S. events and activities

\*\* NOTICE TO TEXAS INSURED: The Insurer for the purchasing group may not be subject to all the insurance laws and regulations of the State of Texas.

ACORD 25 (2014/01)

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TEMPORARY SITE PLAN APPLICATION



POLK CITY - A City For All Seasons -

Application for Permit to temporarily use a City facility, park or street including temporary structures including Tents or Air Supported Structures, and/or temporary Parking Area

Attach an illustrated site plan detailing locations of all activities, temporary structures and closures. All information must be complete and accurate to receive approval.

Proposed location of event: <u>Town Square</u>	
<i>Attach Plans, including detailed site plan illustrating locations of all activities, temporary structures and closures.</i>	
Type of Event: <u>Sounds on the Square</u>	Date and time range of Event: <u>5-24-19 8-2-19</u> <u>6-22-19 6:00-9:00pm</u>
Dates/times for set up: <u>5-24-19, 6-22-19, 8-2-19</u> <u>300-600pm</u>	Dates/times for tear down: <u>5-24-19, 6-22-19, 8-2-19</u> <u>9:00-10:00pm</u>

Organization holding event: <u>PCCEDC</u>
Contact Person Name: <u>Brigett DeVos</u> Phone: <u>712.730.5148</u>
Email: <u>admin@polkcitychamber.com</u>

**\*\*All YES answers below must be detailed on site plan illustration and must include location**

Street closure? <u>No</u> Yes Locations: Dates/times:	On Street parking closure? No <u>Yes</u> Locations: <u>4 parking stalls on 3rd st. Northbound</u> Dates/times: <u>5-24-19, 6-22-19, 8-2-19</u>
Barricades required? No <u>Yes</u> Locations: <u>24 channelizer cones / 8 traffic cones</u> Requested delivery date/time: <u>morning of 3 above</u>	Electrical service expected? No <u>Yes</u> Portable Toilets? No <u>Yes</u> Vendor name: <u>Waste Solutions of Iowa</u> Phone number: <u>515-288-0924</u> <small>not picked up after until Mondays</small>
Temporary parking lot needed? <u>No</u> Yes <u>dates</u> Site to be re-seeded by:	Alcohol on site? No <u>Yes</u> <i>*If yes, must have Iowa Beverage Permit with outdoor service on file</i> <i>**if yes, must have the area fenced off from the rest of the activities to section off the alcohol sales</i>
Curb ramp needed? <u>No</u> Yes If yes, material:	
Culvert needed? <u>No</u> Yes	

Tents? <u>No</u> Yes <i>(be sure to include location on the site plan illustration)</i>
Name and phone number of owner of tent(s):
Tent to be set up & removed by:
Fire extinguishers required? <u>No</u> Yes
Flame-retardant treatment used? <u>No</u> Yes Date of Last treatment:

Information about other temporary structures: <i>(stage, tables, bounce house, etc. include location on the site plan illustration)</i>
- <u>2 tubs from city to hold ice &amp; beverages - delivered &amp; cones in am on above dates</u>
- <u>6 trash cans from city will be needed - delivered &amp; cones in am on above dates</u>
- <u>stage located on SW side of square along Van Dorn</u>

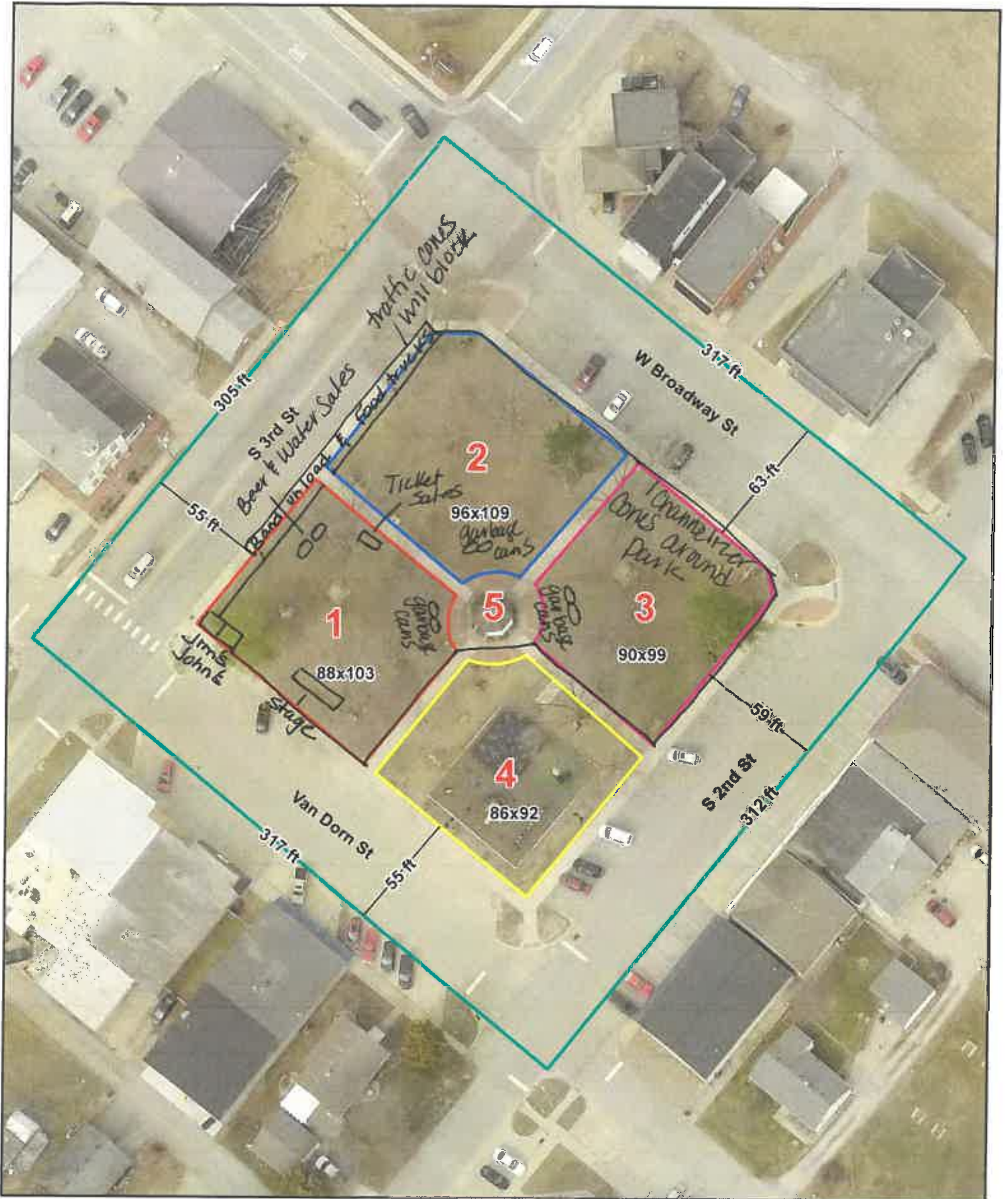
Additional Remarks:
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Applicant name: <u>Brigett DeVos</u>	Date: <u>1-23-19</u>
--------------------------------------	----------------------

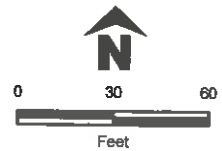
Approved by:	Date:
Inspector name:	Date:

**Official use only:**

Fire & Rescue Department approval by: \_\_\_\_\_ Public Works approval by: \_\_\_\_\_  
Police Department approval by: \_\_\_\_\_



- Quadrant 1: 8,909 sq ft
- Quadrant 4: 7,823 sq ft
- Quadrant 2: 9,702 sq ft
- Overall Square: 98,053 sq ft
- Quadrant 3: 8,509 sq ft



**TEMPORARY SITE PLAN APPLICATION**



Application for Permit to temporarily use a City facility, park or street including temporary structures including Tents or Air Supported Structures, and/or temporary Parking Area

**Attach an illustrated site plan detailing locations of all activities, temporary structures and closures. All information must be complete and accurate to receive approval.**

Proposed location of event: <u>Town Square</u>	
<i>Attach Plans, including detailed site plan illustrating locations of all activities, temporary structures and closures.</i>	
Type of Event: <u>Bike Ride</u>	Date and time range of Event: <u>6-22-19 11a-6pm</u>
Dates/times for set up: <u>6-22-19 9-11am</u>	Dates/times for tear down: <u>6-22-19 - after 5:05 - 10pm</u>

Organization holding event: <u>PCCEDC</u>	
Contact Person Name: <u>Briggett DeVos</u>	Phone: <u>712.730.5148 (cell)</u>
Email: <u>admtn@polkcitychamber.com</u>	

**\*\*All YES answers below must be detailed on site plan illustration and must include location**

Street closure? <input checked="" type="radio"/> No <input type="radio"/> Yes Locations: Dates/times:	On Street parking closure? <input checked="" type="radio"/> No <input type="radio"/> Yes Locations: Dates/times:
Barricades required? <input checked="" type="radio"/> No <input type="radio"/> Yes Locations: Requested delivery date/time:	Electrical service expected? <input checked="" type="radio"/> No <input type="radio"/> Yes Portable Toilets? No <input checked="" type="radio"/> Yes Vendor name: <u>Jim John's - Waste solutions of Iowa</u> Phone number: <u>515-288-0924 not picked up</u>
Temporary parking lot needed? <input checked="" type="radio"/> No <input type="radio"/> Yes Site to be re-seeded by:	Alcohol on site? No <input checked="" type="radio"/> Yes *If yes, must have Iowa Beverage Permit with outdoor service on file **if yes, must have the area fenced off from the rest of the activities to section off the alcohol sales
Curb ramp needed? <input checked="" type="radio"/> No <input type="radio"/> Yes If yes, material:	
Culvert needed? <input checked="" type="radio"/> No <input type="radio"/> Yes	

Iowa  
mandate  
after

Tents? <input checked="" type="radio"/> No <input type="radio"/> Yes	<i>(be sure to include location on the site plan illustration)</i>
Name and phone number of owner of tent(s):	
Tent to be set up & removed by:	
Fire extinguishers required? <input checked="" type="radio"/> No <input type="radio"/> Yes	
Flame-retardant treatment used? <input checked="" type="radio"/> No <input type="radio"/> Yes	Date of Last treatment:

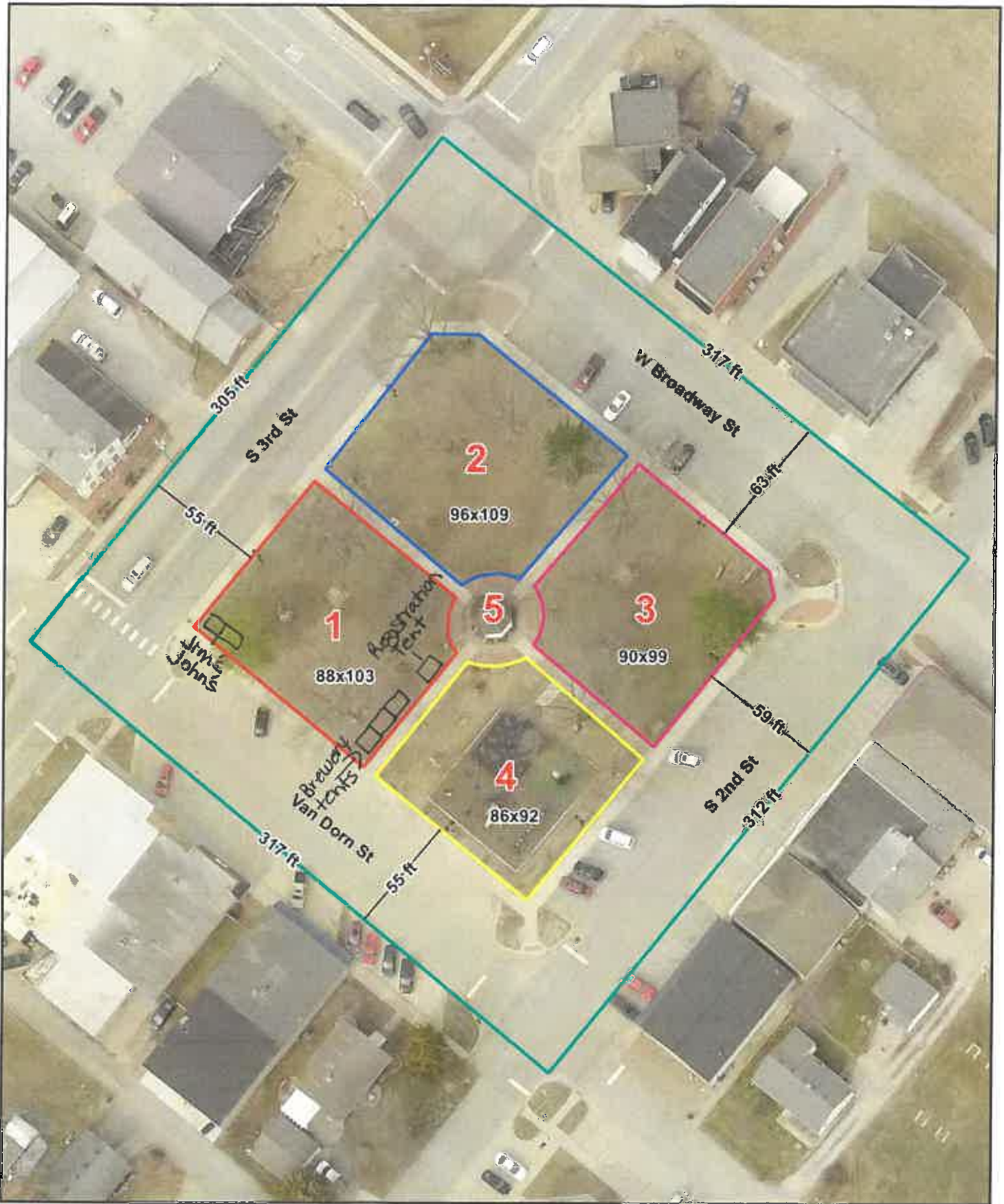
Information about other temporary structures: <i>(stage, tables, bounce house, etc. include location on the site plan illustration)</i>
- 3 tables will be set up for local breweries to give out samples to riders upon return from ride.
- 1 table will be set up for registration

Additional Remarks:
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Applicant name: <u>Briggett DeVos</u>	Date: <u>1/23/19</u>
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Approved by:	Date:
Inspector name:	Date:

**Official use only:**  
 Fire & Rescue Department approval by: \_\_\_\_\_ Public Works approval by: \_\_\_\_\_  
 Police Department approval by: \_\_\_\_\_



- Quadrant 1: 8,909 sq ft
- Quadrant 2: 9,702 sq ft
- Quadrant 3: 8,509 sq ft
- Quadrant 4: 7,823 sq ft
- Overall Square: 98,053 sq ft

