



Town of Apple Valley
Special Event Permit Application
1777 N. Meadowlark Drive, Apple Valley, Utah 84737
Phone: (435) 877-1190 Fax: (435) 877-1192
www.applevalleyut.gov

Fee:
\$500 Special Event Permit
ONLY
Cash/Check/Money Order

Office Use Only

Date Received: 8/29/22 Initials: gk Date Approved: _____ Receipt#: _____ Permit # _____

Name of Applicant: Anna Hosford Phone Number: 435-669-8845
Email: anna@vacationraces.com Type of Event: Foot race

Event Location/Address: Ruby Rider Ranch (Main St. Apple Valley, UT)

Description of the Special

Event: Grand Circle Trailfest is a 3-day running event which showcases some of the best trails of Southern Utah and Arizona. Participants get to run on cherry-picked trails near Bryce Canyon, Zion, and Horseshoe Bend. Our "Day 2" of Grand Circle Trailfest will have runners running from Ruby Rider Ranch to the Wire Mesa trail northeast of Smithsonian Butte. The start line being staged at Ruby Rider Ranch.

Start Date: September 30, 2022 End Date: September 30, 2022

RULES AND REGULATIONS:

1. All set up for events cannot be done more than 72 hours in advance.
2. All clean up and set up must be taken down and completed no later than 72 hours after the event.
3. The Permit Holder is responsible for any injuries or damages to property that occur throughout the special event.
4. The Permit Holder is required to follow any requirements or special notes deemed by the Town of Apple Valley on an individual basis. Event specific requirements will be attached
5. The Town of Apple Valley is not responsible for those printed materials, promotional items, etc. if dates, locations, and/or other requested services are denied, amended, or changed during the permit process.
6. Depending on the size and type event, you may be required to possess or obtain special event commercial general liability insurance. A Town staff member will notify you should this be required.
7. Some special events also require a Temporary Mass Gathering Permit obtained through the Washington County Department of Hum Services. A Temporary Mass Gathering Permit is required of any event that:
 - (a) will have 500 or more attendees at one location (public or private) for
 - (b) 2 or more hours, and
 - (c) is located at a facility that was not constructed for that heavy of use. (You can typically tell this if it is necessary to bring in portable toilets, garbage cans, or parking services for the event.) (See Utah Administrative Code R392-400)
8. If you are holding an event on UDOT owned road, such as SR-59, you will need to obtain a Special Event Permit with UDOT.
9. All fees and other required permits must be paid and obtained before the Town of Apple Valley will issue a Special Event Permit.

By Signing this application, you verify you have read and agree to adhere to the above rules and regulations.

Applicant Signature: Anna Hosford

Town Official: _____ Signature: _____



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/26/2022

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

PRODUCER Main Street Insurance 780 N 2860 E STE 101 St George UT 84790	CONTACT NAME: Kaleb DeMille PHONE (A/C, No, Ext): (435) 674-2221 E-MAIL ADDRESS: kaleb@msiagency.com FAX (A/C, No): INSURER(S) AFFORDING COVERAGE INSURER A: Mesa Underwriters Insurance Company INSURER B: The Princeton Excess & Surplus Lines Company INSURER C: WCF National Insurance Company INSURER D: Auto Owners Insurance INSURER E: INSURER F:
INSURED Vacation Races, Inc 842 E APACHE DR Washington UT 84780	NAIC #

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

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY			MP0005003006803	01/01/2022	01/01/2023	EACH OCCURRENCE \$ 1,000,000
	☐ CLAIMS-MADE ☒ OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	☒ Event Liability						MED EXP (Any one person) \$ 5,000
	GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PRO-JECT ☐ LOC OTHER:						PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ Included
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	☐ ANY AUTO						BODILY INJURY (Per person) \$
	☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS						BODILY INJURY (Per accident) \$
	☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident) \$
B	☐ UMBRELLA LIAB ☒ EXCESS LIAB			82A3FF000189604	01/01/2022	01/01/2023	EACH OCCURRENCE \$ 5,000,000
	☐ CLAIMS-MADE						AGGREGATE \$ 5,000,000
	DED ☒ RETENTION \$ 10,000						\$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			4002732	10/10/2021	10/10/2022	☒ PER STATUTE ☐ OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N	N/A				E.L. EACH ACCIDENT \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below	☒ Y					E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
							E.L. DISEASE - POLICY LIMIT \$ 1,000,000
D	Property Business Personal Property			57229749	02/10/2022	02/10/2023	BPP \$150,000
			Deductible \$1000				

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

CERTIFICATE HOLDER**CANCELLATION**

Town of Apple Valley 1777 N Meadowlark Dr. Apple Valley, UT 84737	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 <i>Kaleb DeMille</i>
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