City of Colusa California

STAFF REPORT

DATE: 21 July 2026

TO: Mayor Conrado and Members of the City Council

FROM: Joshua Fitch, Police Chief, via Jesse Cain, City Manager

AGENDA ITEM:

Street closure to facilitate Bartender Challenge event on 5th Street

Recommendation:

Authorize street closure in relation to the 2026 Bartender Challenge event, sponsored by Jameson's on 5th on Saturday, August 1, 2026.

BACKGROUND ANALYSIS:

Jameson's on 5th is sponsoring this Bartender Challenge event. The sponsor is requesting the closure of 5th Street from Market Street north to the alleyway (approximately ½ block) from 3:00 p.m. to 2:00 a.m. This event will include an estimated 100 attendees.

BUDGET IMPACT:

None.

STAFF RECOMMENDATION:

Staff is recommending that the Council authorize the street closure as outlined above.

ATTACHMENT:

Event application.
Certificate of insurance.

Office Use Only
Date Received 6/24/26
Routing Date
Date approved
Notice Sent
Insurance Cert. Rec'd 6/24/26

City of Colusa

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CITY OF COLUSA

Application for
Temporary Street Closure, Parades, Special Events and Festivals

NAME OF EVENT: Bartender Challenge

DATE OF EVENT: August 1 2026

Please read carefully:

- Application must be filed with the city clerk at least 30 days prior to the event to allow time for review and council action.
- Applications will be returned if incomplete
- There are no fees for street closure services
- Complete in the space provided a narrative explaining the specific purpose of the event including garbage clean-up plans.
- Submit a map in the space provided outlining the event's location and all street and/or parking lot closings
- Submit copies of flyers, posters or other materials that will advertise the event. The organizer is responsible for ensuring that all flyers, posters, etc. advertising the event are removed from public facilities. Failure to comply may impact approvals for future applications.
- ***Applicants must provide prior to the event a certificate of insurance meeting city insurance requirements—a minimum of $1 million per occurrence naming the city as additional insured. Limit is subject to increase depending on event.*** *The description must read: "The City of Colusa, its officials, employees and agents are named as Additional Insured with Waiver of Subrogation with respect to general liability."*
- All applications are subject to approval by the city council
- Applicants will be notified when the request has been approved or if additional information is required. Inquiries about the status of an application may be directed to the city manager's office.
- All street closures must maintain adequate clearance for emergency vehicle access.
- If event will take place on the state highway, attach a copy of the Caltrans encroachment permit

Contact Information: (Please print)

Organization Jamesons on 5th
Contact Person Ashley Mobley
Address 138 5th street
City Colusa
Zip Code 95932
Alternate Contact
(It is highly recommended that an alternate name & telephone number be provided)

Phone (day) 5304405286
Phone (evening)
Fax
E-mail Address jamesonson5th@yahoo.com

Event Details:

Location of Event	Start Date MM/DD/YY (Incl. set up)	Start Time	Finish Date MM/DD/YY (Incl. fear down)	Finish Time
5th steet	**august 1st 2026**	3:00~~pm~~ ☐ am ☒ pm	august 2 2026	2:00~~am~~ ☒ am ☐ pm

Electrical: Yes ☐ No ☐ Selling Liquor: Yes ☒ No ☐ Sound Amplification: Yes ☐ No ☐ Food & Beverage: Yes ☐ No ☐ Open Fire: Yes ☐ No ☐ (If yes, please explain (permit may be required)

Type of Event:

Parade	☐	Cycling	☐	Event/Festival	☐	Please Specify Bar event
Walkathon	☐	Run	☐	Other	☑	

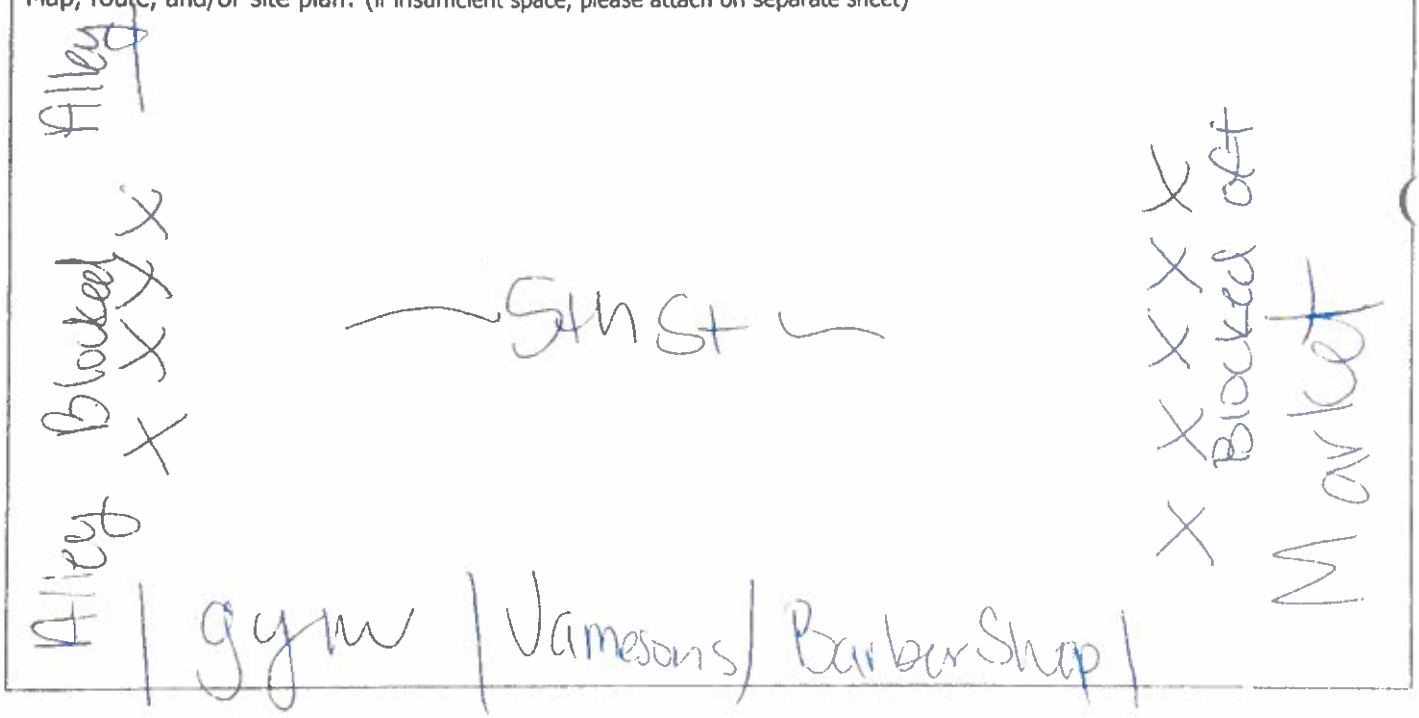
Attendance:

Number of Participants	100	Number of Floats	
Number of Booths/Stalls			
Number of Vehicles		*Please provide best estimates*	
Number of Bands			

Narrative and Map of Event:
(Be specific and include garbage clean-up plans, detailed map, route and/or site plan. Attach extra page if necessary)

Narrative:
we will be blocking street off from market street to the alley way of 5th street between market and Main Street

Map, route, and/or site plan: (if insufficient space, please attach on separate sheet)



Signature of Person Submitting Application: _____ Date: _____

Office Use Only

Public Works	✓	Approved	___ Denied	Date: 6.24.24
Comments:				
Recreation	✓	Approved	___ Denied	Date: 6.24.24
Comments:				
Street/Parks		___ Approved	___ Denied	Date:
Comments:				
Fire Dept.	✓	Approved	___ Denied	Date 6-30-24
Comments:				
Police Dept.	✓	Approved	___ Denied	Date 6.24.24
Comments:				
City Manager Review				Date 6.24.24
Comments				

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 06/18/2026

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	CONTACT NAME: Eventsured Customer Service
Foresite Sports LLC DBA: Eventsured 3553 West Chester Pike #418 Newtown Square, PA 19073	PHONE (A/C, No, Ext): 888-882-5902 FAX (A/C, No): E-MAIL ADDRESS: info@eventsured.com
INSURED Jameson's On 5th Carolee Ornbaun 138 5th Street Colusa, CA 95932	**INSURER(S) AFFORDING COVERAGE** / **NAIC #** INSURER A : Houston Casualty Company 42374 INSURER B : INSURER C : INSURER D : INSURER E : INSURER F :

COVERAGES **CERTIFICATE NUMBER:** TM538648 **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 [X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS-MADE [X] OCCUR [X] Host Liquor Liability GEN'L AGGREGATE LIMIT APPLIES PER: [X] POLICY [ ] PRO-JECT [ ] LOC	Y	Y	H25SE00172/TM538648	08/01/2026 12:01AM	08/03/2026 2:01AM	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG DEDUCTIBLE	$ 1,000,000 $ 100,000 $ 1,000 $ 1,000,000 $ 2,000,000 $ 1,000,000 $ 0
	AUTOMOBILE LIABILITY [ ] ANY AUTO [ ] ALL OWNED AUTOS [ ] SCHEDULED AUTOS [ ] HIRED AUTOS [ ] NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$ $ $ $
	[ ] UMBRELLA LIAB [ ] OCCUR [ ] EXCESS LIAB [ ] CLAIMS-MADE [ ] DED [ ] RETENTION $						EACH OCCURRENCE AGGREGATE	$ $
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y / N [ ] N / A If yes, describe under DESCRIPTION OF OPERATIONS below						WC STATU-TORY LIMITS [ ] OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	$ $ $

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

Additional Insureds must be venue managers or municipalities and are added with respect to our insureds operations only. Waiver of Subrogation (WOS) and Primary & Non-Contributory (PNC) wording applies only when coverage is purchased by the insured, required by written contract and as indicated below. This coverage is with respect to the Holiday Party to be held on 08/01/2026 - 08/02/2026 with 100 attendees at Jameson's On 5th 138 5th St Colusa, CA 95932. Additional Insureds include: Jameson's On 5th 138 5th St Colusa, CA 95932; (WOS selected).

CERTIFICATE HOLDER

Jameson's On 5th
138 5th St
Colusa CA, 95932

CANCELLATION

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

AUTHORIZED REPRESENTATIVE