

City of Deadwood Special Event Permit Application and Facility Use Agreement for

Outlaw Square Beer-A-Thon Presented by the Naja Shriners

Instructions:

To apply for a Special Event Permit, please read the Special Event Permit Application Instructions and then complete this application. Submit your application, including required attachments, no later than forty-five (45) days before your event. Facility Use Agreements should also be completed at this time (if applicable).

		EVEN	F INFORM	ATION		
Type of Event: Run Street Fair	Walk Triathlon	☐ Bike Tour ■ Other	В	ike Race	Parade	Concert
Event Title:	law Square Bee	er-A-Thon Prese	ented by the I	Vaja Shriners	3	
Event Date(s):)7/14 - 07/15	ear)	<u>Total</u> Anticip	oated Attenda	nce:	
	((# (of <u>Participants</u>	,500	# of <u>Spect</u>	ators 500)
	Outlaw	0PM Square & Dead	wood Street	PM (to):	OPM	AM / PM
Set up/assembly	/construction Dat	e:07/14/23		Start Time:	12:00PM	AM / PM
Please describe	the scope of your	setup / assembly p vendor tasting	work (specific	details):		
Dismantle Date:	07/15/23		Completion	n time:7:00P	M	AM / PM
List any street(s) and time of re-c Deadwood Street Friday July 14th 1 Saturday July 15t	pening: Closure 2PM-10PM	e as a result of thi	s event. Includ	de <u>street nam</u>	<u>e(</u> s), <u>day</u> , <u>date</u>	and <u>time</u> of closing
 Any request involving 25 or less motor vehicles will utilize Deadwood Street and will be barricaded at both ends of Deadwood Street. Any request involving 25-50 motor vehicles (not including motorcycles) - will park on the north side of Main Street, which will not require street closure. Any request involving 50 or more vehicles (which would require an entire street closure From Wall Street to Shine Street and security must be provided at Shine Street and Main Street and Wall Street and Main Street to direct traffic. Additional security maybe required at the discretion of the Event Committee. 						
A	PLICANT AN	ID SPONSOR		ANIZATIO		ATION
Commercial		hriners			Noncomm	nercial (nonprofit)
Sponsoring Orga		Scott Sharp				
	Drganization (NAN	ле):			0.05	45.0700
Applicant (NAM	E): Kevin Wagn	er		Business Pho	ne: ()	45-8789
Address: 4091	Sturgis Rd		Rapid City	ity)	SD (state)	(zip code)
Daytime phone:	(605) 645-878	39 Evening	Phone: (<u>605</u>	645-8789	Fax #: (

Please list any **professional event organizer** or **event service provider** hired by you that is authorized to work on your behalf to produce this event.

Name:				
Address:				
_	(city)	(state)	(zip code)	
	Kayin Magnar	COF (AE 0700	

Contact person "on site" day of event or facility use <u>Kevin Wagner</u> (Note: This person must be in attendance for the duration of the event and immediately available to city officials)

<u>REQUIRED</u>: Attach a written communication from the Chief Officer of the organization which authorizes the applicant or professional event organizer to apply for this Special Event Permit on their behalf.

- NO YES
 - Is your organization a "Tax Exempt, nonprofit" organization? If YES, you must attach a copy of your IRS 501C Tax Exemption Letter to this Special Event Permit application (providing proof and certifying your current tax exempt, nonprofit status).

Are admission, entry, vendor or participant fees required? If **YES**, please explain the purpose and provide amount(s).:

To enter the tasting in Outlaw Square you pay a fee. This is an annual fundraiser for t he Naja Shriners.

OVERALL EVENT DESCRIPTION: ROUTE MAP / SITE DIAGRAM / SANITATION

Please provide a **detailed description** of your proposed event. Include details regarding any components of your event such as use of vehicles, animals, rides or any other pertinent information about the event: Areas of focus: Outlaw Square.

Open container zones: 1 & 2 - Wall Street to Pine Street & Outlaw Square.

Requesting open container

Friday: July 14th 5PM - 10PM Saturday: July 15th 12PM - 10PM

Participants & attendees will be using Deadwood Chamber event cups.

We will ID all tasting participants.

OVERALL EVENT / FACILITIES RENTAL DESCRIPTION (CONTINUED)

	YES	Does the event involve the sale or use of alcoholic beverages? If YES , please provide your liquor liability insurance information to the last page of this application.
		Will items or services be sold at the event? If YES , please describe: We will have open container event cups for sale, day of event tickets, and possible limited merchandise.
NO	YES	Does this event involve a moving route of any kind along streets, sidewalks or highways? If YES attach a detailed map of your proposed route, indicating the direction of travel and provide written narrative to explain your route.
		Does this event involve a fixed venue site? If YES , attach a detailed site map showing all streets impacted by the event.
		e route map required above, please attach a diagram showing the overall lay-out and set-up following items:

- > Alcoholic and Non-alcoholic Concession and / or Beer Garden Areas.
- Food Concession and / or Food Preparation Area(s).
 Please describe how food will be served at the event:

If you intend to cook food in the event area, please specify the method to be used:



- > First Aid Facilities and Ambulance locations.
- Tables and Chairs.
- Fencing, Barriers and / or Barricades.
- Generator Locations and / or Source of Electricity.
- Canopies or Tent Locations.
- Booths, Exhibits, Displays or Enclosures.
- Scaffolding, Bleachers, Platforms, Stages, Grandstands or Related Structures.
- Vehicles and / or Trailers.
- Trash Containers and Dumpsters.

(<u>NOTE</u>): You must properly dispose of waste and garbage throughout the term of your event and immediately upon conclusion of the event, the area must be returned to a clean condition.

Number of trash cans: <u>10</u> Trash Containers w / lids: <u>0</u> Describe your plan for clean-up and removal of waste and garbage during and after the event or use of facility: Similar to last years event we will have significant organizational manpower to assist in clean up of the Street & Square.

> Other Related Event Components not covered above.

SAFETY / SECURITY / ACCESSIBILITY

Please describe your procedures for both Crowd Control and Internal Security:

We will have hired security for the overnight. We plan to handle event security like we did last year with significant Shriner manpower, in identifiable red fezzes, located throughout the square & Deadwood Street for assistance & safety.

Please describe your Accessibility Plan for access at your event by individuals with disabilities:

We do not have one. We will not impair or block any existing required by law access points to disabled persons during the event.

REQUIRED: It is the applicant's responsibility to comply with all City, County, State and Federal Disability Access Requirements applicable to this event.

NO	

...

Have you hired any Professional Security organization to handle security arrangements for this event? If YES, please list:

Security Organization: Badlands Security

Security Organization Address:

YES

(city)	(state)	(zip code)
Security Director (Name):	Business phone:	

Is this a night event? If **YES**, please state how the event and surrounding area will be illuminated to ensure the safety of the participants and spectators:

Please indicate what arrangements you have made for providing First Aid Staffing and Equipment?

Number ______ Ambulance(s) – How provided?

Number _____ Emergency Medical Technicians – How provided?

APPLICANT specifically acknowledges and agrees that it shall be solely responsible for any damage to personal property located in or stored in or upon DEADWOOD's property pursuant to the activity for which approval is being sought and that DEADWOOD shall not be responsible for any damage or loss to or of APPLICANT's property which results from any cause or reason with regard to personal property owned by APPLICANT stored or located on DEADWOOD's property pursuant to approval of the activity for which approval is being sought herein. Acknowledge acceptance with initial: KW

APPLICANT agrees to hold DEADWOOD harmless and indemnify DEADWOOD from any sums of money which DEADWOOD might have to pay to any person as a result of property damage, personal injury or death resulting from APPLICANT's use of the City property pursuant to approval of the activity for which approval is being sought herein.

Acknowledge acceptance with initial: KW

PARKING PLAN / SHUTTLE PLAN / MITIGATION OF IMPACT

Please describe your plans to notify all residents, businesses and churches impacted by the event: They will not be impacted by this event do to the date, time, and limited capacity.

Attendees will be using regular and identified Deadwood guest parking lots.

ENTERTAINMENT / ATTRACTIONS / RELATED EVENT ACTIVITIES

NO	YES	
		Are there any musical entertainment features related to your event or facilities rental? If YES , please state the number of bands and type of music.
Number	0	
Type of N	Ausic:	Classic rock/Blues/Funk/Jam Band/70's,80's,90's.
		Will sound amplification be used? If <u>YES</u> , please indicate: Start Time: <u>12PM</u> AM / PM – Finish Time: <u>8PM</u> AM / PM
		Will sound checks be conducted prior to the event? If <u>YES</u> , please indicate: Start Time: <u>12PM</u> AM / PM – Finish Time: <u>5PM</u> AM / PM
		Please describe the sound equipment that will be used for your event: Depot Music will bring in their regular sound system(s) they use similar to the Sunday concert series at Outlaw Square.
		Will any fireworks, rockets or other pyrotechnics be used? If YES , please attach a copy of your permit (issued by the State Fire Marshall's office) to this application.
		Will any signs, banners, decorations or special lighting be used? If YES , please describe:

PROMOTION / ADVERTISING / MARKETING / INTERNET INFORMATION

NO	YES			
		Will this event be promoted, advertised or marketed in any manner? If YES , please describe: Via: social media, radio, print, and other local forms of media.		
		Will there be any live media coverage during your event? If YES , please explain:		
		Applicant acknowledges and agrees to allow the City to publish the Contact Person and media referral telephone numbers on the internet in conjunction with the Calendar of Upcoming Events in the City of Deadwood. If you have a home page and want us to link with our Calendar, please provide the Internet address for your homepage: WWW.NAJAShrine.com		
Refer al	l event pı	iblic inquiries and / or media inquiries for this event to:		
NAME:	Kevin W	/agner PHONE:		
		INSURANCE REQUIREMENTS		
REQUIR	ED: Insu	rance for your event will be required before final permit approval.		
Name o	flocurao	HUB International Chris Roberts		

Name of Insurance Company:		Agent's Name:		
Business Phone:	Policy Number:	06LX059311354-4	Policy Type:	\$2,000,000 Lia bility
Address:		(city)	(state)	(zip code)

For final permit approval, you will need commercial general liability insurance that names "the City of Deadwood, its officers, employees and agents" as an additional insured. Insurance coverage must be maintained for the duration of the event. To determine the amount of insurance coverage necessary, please contact the Finance Office at (605) 578-2600 – Fax # (605) 578-2084.

The City must be named as an "additional insured." Please obtain the required insurance and mail an original insurance certificate to: <u>City of Deadwood, Finance Office, 102 Sherman Street, Deadwood, SD 57732</u>.

LIQUOR LIABILITY INSURANCE

REQUIRED: This insurance coverage is required if you are planning to sell alcoholic beverages at your event or facilities rental.

Name of Insurance Company:	A	gent's Name:		
Business Phone:	Policy Number:		_ Policy Type	e:
Address:		(city)	(state)	(zip code)
Please obtain the required insurance a Office, 102 Sherman Street, Deadwood	•	(= - <i>11</i>	()	

AFFIDAVIT OF APPLICANT

ADVANCE CANCELLATION NOTICE REQUIRED: If this event is cancelled, notify the Deadwood Police Department. Otherwise, City personnel and equipment may be needlessly dispatched.

I certify that the information in the foregoing application is true and correct to the best of my knowledge and belief and that I have read, understand and agree to abide by the rules and regulations governing the proposed Special Event and I understand that this application is made subject to the rules and regulations established by the City Commission of Deadwood. I agree to abide by these rules and further certify that I, on behalf of the organization, am also authorized to commit that organization, and therefore agree to be financially responsible for any cost and fees that may be incurred by or on behalf of the Event to the City of Deadwood.

Name of Applicant (PRINT):	Event Coordinator Title:	
KILAN	04/25/2023 Date:	
(Signature of Applicant / Sponsoring Organization)		(Signature of Professional Event Organizer or Renter of City-owned Facilities)



OVER 30 BREWERIES!

Crow Peak Spearfish Brewing Co. Sawyer Brewing Jacobs Brewing Jailhouse Taps Sturgis Brewing Co. Shivers Brewing Co. Hay Camp Lost Cabin Dakota Point Zurmacracy Cohort Brewing Firehouse Brewery Woodland Brewing Last Mile Brewery Ferson **Miners Brewing**

50. July 14 & 15

OVER 30 BREWERIES!

Mt. Rushmore Brewing Laughing Sun Brewing Fat Fish Brewery Remedy Brewing Co. One Leg Pheasant Dempseys Brewing Co. Black Tooth Brewing Buffalo Ridge Brewing **Eponymous Brewing** Wooden Leg Brewing Severance Brewing Co. Wood Grain Brewing Beaver Creek Brewing Canyon Creek Brewing Dekker Brewing Co. Bismark Brewing Co. Gideon's Brewing Co.

