

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

Mountain Lion/Aqua Bike Triatholon - September 24, 2023

## 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).

# **EVENT INFORMATION**

	□Run	□Walk	☐Bike Tour	☐Bike Race	□Parade	□Concert
	☐Street Fair	Triathlon	□Other			
Event Tit	<sub>le:</sub> Mountain	Lion/Aqua B	ike Triatholon			
Event Da	te(s): Septen	nber 24, 2023	Total	Anticipated Atten	dance: 50	
	(m	onth, day, year)	(# of <u>Participa</u>	<sub>ints</sub> 25	# of <u>Spectato</u>	<sub>rs</sub> 25
Actual Ev	vent Hours: (fro	<sub>m:</sub> 0700	^	M / PM (to): 13	00	AM / PM
Location	/ Staging Area:	Deadwood F	Recreation & A	Aquatic Center	and Gordor	Park
	ssembly/constr			Start time: <u>07</u>		AM / PM
Please de	escribe the scop	e of your setup /	assembly work (s	pecific details): $\underline{B}$	ike Racks at	Gordon Park
List any s	treet(s) requiri	ng closure as a re	sult of this event.	pletion time: 130 Include <u>street na</u> eded at Pluma Vis	me(s), day, date	AM / PM and time of closing
<ul> <li>Any request involving 25 or less motor vehicles will utilize Deadwood Street and will be barricaded at both ends of Deadwood Street.</li> <li>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.</li> <li>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.</li> <li>Additional security maybe required at the discretion of the Event Committee.</li> </ul>						
<u> 1</u>	nttps://www	.cityofdeadwo	OPEN CO ood.com/planr	ning/page/spec	ial-event-ope	en-container-
<b>.</b> .			<u>information</u>			
			s:		:	
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			s:		:	
Date:		<del></del> -				

## APPLICANT AND SPONSORING ORGANIZATION INFORMATION Commercial (for profit) Noncommercial (nonprofit) Sponsoring Organization: City of Deadwood Chief Officer of Organization (NAME): Kathryn Bogner Applicant (NAME): Jeramy Russell Business Phone: (605 578-3729 Address: 105 Sherman Street Deadwood SD 57732 (city) (state) (zip code) Daytime phone: (605 ) 578-3729 Evening Phone: ( 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: Duncan Olney 605-484-3264 TIME KEEPER Address: 105 Sherman Street Deadwood SD 57732 (city) (state) (zip code) Contact person "on site" day of event or facility use Kathryn Bogner Pager/Cell #: 605-210-1090 (Note: This person must be in attendance for the duration of the event and immediately available to city officials) REQUIRED: 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. FEES / PROCEEDS / REPORTING 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): 90 - Member of Rec / 100 - non-member 75 - aqua bike

# OVERALL EVENT DESCRIPTION: ROUTE MAP/ SITE DIAGRAM/ SANITATION

your eve	ent such	detailed description of your proposed event. Include details regarding any components of as use of vehicles, animals, rides or any other pertinent information about the event: at recreation center pool to swim laps. Then will proceed to Gordon Park to start bike portion of event.
Riders the	n procee	ed to Mickelson Trail and follow the trail to following trail heads: Kirk, Sugar Loaf, Englewood
and then c	ontinue	on to Kirk trailhead creating a loop. Participants will then follow the Mickelson Trail back to
Gordon	Park.	After completion of the bike portion, participants will then begin
the run	portio	n which will follow the exact route that the bikes used and then will
finish r	ace t	riatholon at Gordon Park.
	OVE	RALL EVENT / FACILITIES RENTAL DESCRIPTION (CONTINUED)
NO	YES	
х		Does the event involve the sale or use of alcoholic beverages? If <b>YES</b> , please proved your liquor liability insurance information to the last page of this application.
х		Will Items or services be sold at the event? If YES, please describe:
х		Does this event involve a moving route of any kind along streets, sidewalks, or highways? If <b>YES</b> , 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 <b>YES</b> , attach a detailed site map showing all street impacted by the event.

In addition to the route map required above, please attach a diagram showing the overall lay-out and set-up locations for the 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:  GAS ELECTRIC CHARCOAL OTHER(SPECIFY):					
<b>A</b>	First Aid Facilities and Ambulance locations.					
>	Tables and Chairs.					
<b>A</b>	Fencing, Barriers and / or Barricades.					
>	Generator Locations and / or Source of Electricity.					
<u> </u>						
	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.  (NOTE): 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: Trash Containers w / lids:					
	Describe your plan for clean-up and removal of waste and garbage during and after the event or use of facility: Will self manage.					
	Other Related Event Components not covered above. Bike racks to be provided by the COD.					

# SAFETY / SECURITY / ACCESSIBILITY

Please	describe	your procedures for both <b>Crowd Control</b> and <b>Internal Security</b> : N/A
	describe vompliant.	your Accessibility Plan for access at your event by individuals with disabilities: Triatholon will be
		the applicant's responsibility to comply with all City, County, State and Federal Disability Access applicable to this event.
NO	YES	Have you hired any Professional Security organization to handle security arrangements for this event? If <b>YES</b> , please list:
Securi	ty Organiz	zation Address:(city) (state) (zip code)
Securit	ty Director	(Name): Business phone:
NO ×	YES	Is this a night event? If <b>YES</b> , please state how the event and surrounding area will be illuminated to ensure the safety of the participants and spectators:
Plea	Num	berAmbulance(s) – How provided? NA
prop bein whice	LICANT spoerty locating sought a	ecifically acknowledges and agrees that it shall be solely responsible for any damage to personal ted in or stored in or upon DEADWOOD's property pursuant to the activity for which approval is and that DEADWOOD shall not be responsible for any damage or loss to or of APPLICANT's property from any cause or reason with regard to personal property owned by APPLICANT stored or located DD's property pursuant to approval of the activity for which approval is being sought herein.  Acknowledge acceptance with initial:   NA
DEA	DWOOD r	rees to hold DEADWOOD harmless and indemnify DEADWOOD from any sums of money which night have to pay to any person as a result of property damage, personal injury or death resulting NT's use of the City property pursuant to approval of the activity for which approval is being sought  Acknowledge acceptance with initial: JR

# PARKING PLAN / SHUTTLE PLAN / MITIGATION OF IMPACT

	E	NTERTAINMENT / ATTRACTIONS / RELATED EVENT ACTIVITIES			
NO	YES	Are there any musical entertainment features related to your event or facilities rental? If please state the number of bands and type of music.			
Numbe	er of Stag	es: Number of Bands:			
Туре о	f Music:				
х		Will sound amplification be used?  If <u>YES</u> , please indicate: Start Time:AM / PM – Finish Time:AM / PM			
×		Will sound check be conducted prior to the event?  If <u>YES</u> , please indicate: Start Time:AM / PM - Finish Time:AM / PM  Please describe the sound equipment that will be used for your event:			
×		Will any fireworks, rockets or other pyrotechnics be used? If <b>YES</b> , please attach a copy of your permit (issued by the State Fire Marshall's office) to this application.  Are any signs, banners decorations or special lighting be used? If <b>YES</b> , please describe:			
no П	YES	PROMOTION / ADVERTISING / MARKETING / INTERNET INFORMATION  Will this event be promoted, advertised or marketed in any manner? If YES, please describe: Flyers will be placed around town in City approved locations.			
NO ×	YES	Add in Black Hills Pioneer  Will there be any live media coverage during your event? If YES, please explain:			

# INSURANCE REQUIREMENTS/LIQUOR LIABILITY

**REQUIRED**: Insurance for your event will be required before final permit approval.

Name of Insurance Company: City of D	eadwood provided.			
Agent's Name:				····
Business Phone: ()	Policy Number:		_ Policy Type: _	
Address: 105 Sherman Street	Deadwood	SD	57732	
		′)	(state)	(zip code)
For final permit approval, you will no Deadwood, its officers, employees and a for the duration of the event. To deter Finance Office at (605) 578-2600 – Fax #	ngents" as an additional insumine the amount of insum	ured. Insurar	nce coverage m	ust be maintained
The City must be named as an "addition insurance certificate to: City of Deadwo		erman Stree		
Advance Cancellation Notice Required Otherwise, City personnel and equipme	<del>.</del>	-	Deadwood Po	olice Department.
I certify that the information in the fore belief and that I have read, understand Special Event and I understand that this the City Commission of Deadwood. I ag organization, am also authorized to com for any cost and fees that may be incurred	and agree to abide by the sapplication is made subjected to abide by these rulumit that organization, and	rules and reg ect to the rule es and furthe d therefore a	gulations gover es and regulation er certify that light gree to be fina	ning the proposed ons established by I, on behalf of the ncially responsible
Name of Applicant (PRINT): Jeramy Ru	ıssell		7-11-23	
(Signature of Applicant/Sponsoring Organizat	tion)	Date:	7-11-23	