



Village of Lake Orion
 21 E. Church Street
 Lake Orion, Michigan 48362
 Tel 248.693.8391
 Fax 248.693.5874
www.lakeorion.org

EVENT PERMIT APPLICATION

**** ATTN: APPLICATION NEEDS TO BE TURNED IN 120 DAYS PRIOR TO EVENT ****

Date of Application: <u>2/28/25</u>	Date Application Fee Paid:
-------------------------------------	----------------------------

Sponsoring Organization's Legal Name: <u>AMERICAN LEGION / SONS OF AMERICAN LEGION (SAL)</u>	
Phone <u>2486932782</u>	Fax
Email <u>lloydcoe@sbccglobal.net</u>	Website

Sponsoring Organization's Agent Name: <u>LLOYD COE SAL JR. VICE & BOB GRITZINGER SAL Commander</u>	
Phone <u>248-563-4839</u>	Fax
Email <u>SAME</u>	Website

Event Name: <u>DOWNTOWN LAKE ORION CORNHOLE LEAGUE</u>

Event Details: (Provide a detailed description of all activities that will take place. Attach additional sheets if necessary) <u>CORNHOLE games on sidewalks BEHIND 313 PIZZA, IRISH TAVERN, AMERICAN LEGION, BUILDERS CUSTOM FLOORING WINE SOCIAL, JOHNNY BLACKS, Ed's BROADWAY</u>

Date/Hours of Event: <u>EVERY THURSDAY Night Beginning June 5th - Sept 4th Between 7-9 PM</u>
--

Date/Hours of Set-up and Tear Down: <u>SAME AS ABOVE 7-9</u>
Event Location and Boundaries

Event Location and Boundaries

See ATTACHED

Include an Event Map which clearly shows the locations for each activity during the event, including but not limited to the following:

- Tent locations
- Parking / loading areas
- Food / drink stations
- Streets and parking lots to be closed
- Walk / run routes
- Anticipated staffing
- Loading locations
- Porta john locations and number
- Trash/dumpster
- Event staff parking

Will street closures and/or Parking Lot closures be necessary: () Yes (X) No

If yes, describe, including: date and time of closures, setup schedule and take down schedule, and time you will need the parking lot for deliveries.

Coordinating with Another Event:

YES NO

If Yes, Event Name

Event Name/Details:

Event Information

Type of Event (See definitions attached to information page)

() Village Operated () DDA () Individual () Co-Sponsored (X) Group

Indicate Status

(X) Non-Profit* () Not-for-Profit () For-Profit

**If the event is sponsored by a Non-Profit please provide proof of non-profit status.*

Annual Event: Is this event expected to occur next year? () Yes () No

If Yes, you can reserve a date for next year with this application. To reserve dates for consideration for next year please provide the next year's specific dates. Event Application Form will need to be filled out for each year's event.

THIS IS AN ANNUAL EVENT

Is this event a Fund raiser? (X) Yes () No

If YES, indicate beneficiary information:

AMERICAN LEGION AND SAL

Is this the first time the event is being held in the Village of Lake Orion? () Yes (X) No

Describe:

WE HAVE BEEN ORGANIZED FOR
5 YEARS EVERY THURSDAY NIGHT IN THE SUMMER

Was this event previously held outside the Village of Lake Orion? () Yes (X) No

Describe:

Total estimated attendance each day

100

What parking arrangements will be necessary to accommodate attendance?

Describe:

NOTE: For events over 100 people, you must submit a parking plan.

How will trash be handled?

Describe:

WE CLEAN AREAS OURSELVES

<p>Is amplification of music or speakers planned or anticipated? () Yes (X) No</p> <p>If yes, describe, including the dates and times and the maximum limit and amplification:</p>
<p>Will tents be used: () Yes (X) No</p> <p>If yes, indicate number of tents, use of each, location and size:</p>
<p>Portable restrooms: () Yes (X) No</p> <p>If yes, number of portable restrooms and location:</p>
<p>Will alcoholic beverages be served: () Yes (X) No</p> <p>If yes, describe:</p> <p>Is liquor license issued by the State of Michigan? () Yes () No?</p> <p>If yes, whose name is the license issued to:</p> <p>Copy of License must be submitted to the Village within 15 days of the Event.</p>
<p>Will food and beverages be sold: (X) Yes () No</p> <p>If yes, describe:</p> <p style="color: blue; font-family: cursive;">WE SELL HOT DOGS ON AMERICAN LEGION PROPERTY USING THEIR THEIR LICENSE</p> <p>All food vendors must be approved by the Oakland County Health Departments. No permit is necessary where only pre-packaged, ready-to-eat type foods are sold from a concession stand or booth.</p>
<p>Will merchandise be sold: () Yes (X) No</p> <p>If yes, describe:</p>

WILL THE EVENT REQUIRE THE USE OF ANY OF THE FOLLOWING MUNICIPAL EQUIPMENT?

Electrical Connections: () Yes (X) No

If yes, describe:

Water: () Yes (X) No

If yes, describe:

Barricades and/or Traffic cones: () Yes (X) No

If yes, complete "REQUEST TO USE VILLAGE EQUIPMENT FORM":

Do you have need of emergency fire equipment, such as ambulance? () Yes (X) No

If yes, describe:

Other Village services: () Yes (X) No

If yes, describe:

EVENT SIGNS

Will this event include the use of signs? () Yes (X) No

If yes, complete the "TEMPORARY SIGN PERMIT APPLICATION".

CERTIFICATIONS AND SIGNATURES

I understand and agree on behalf of the sponsoring event the following must be provided 30 days prior to the event:

- A. A Certificate of Insurance in the amount of \$1,000,000 liability insurance and \$1,000,000 aggregate insurance must be provided which names the Village of Lake Orion as an additionally insured party on the policy. (See Insurance Certificate on "Required Documents for a Special Permit Sheet".)
- B. Event sponsors are required to sign a Hold Harmless Agreement form.
- C. Event sponsor is required to contact the Orion Township Fire Department at least one week prior to the event to set up a time for inspections prior to the event.
- D. All food vendors must be approved by the Oakland County Health Department.
- E. The approval of this Special Event may include additional requirements/and or limitations, based on the Village's review of this application.
- F. The sponsoring organization will provide a security deposit for the estimated fees as may be required by the Village and will promptly pay any billing for Village services which may be rendered.
- G. If the event is serving alcohol, a copy of the Liquor License issued by the State of Michigan shall be provided to the Village prior to the event.
- H. The Event contact persons list complete with cell phone numbers and email addresses shall be provided to the Village at least one week prior to the event.
- I. Advertising of the event is not recommended prior to approval of the Event Permit. Advertising of the event prior to the approval of the permit does not guarantee the event will be approved as advertised. Advertisement must include note that the advertisement is pending Village Approval.

As the duly authorized agent of the sponsoring organization, I hereby apply for approval of this special Event Permit, affirm the above understandings and agree that my sponsoring organization will comply with the Village Special Event Policy, the terms of the Written Confirmation of approval and all other Village requirements, ordinance and other laws which apply to this Special Event.

Date

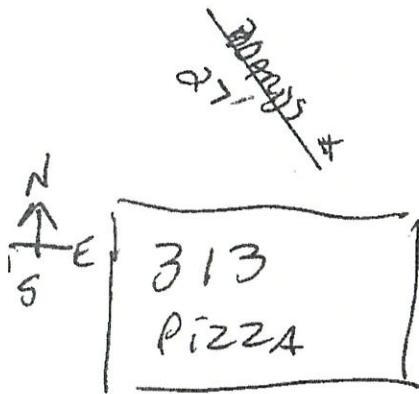
2/28/25

Signature of Sponsoring Organization's Agent

SAL
Clayton JR Vice Commander

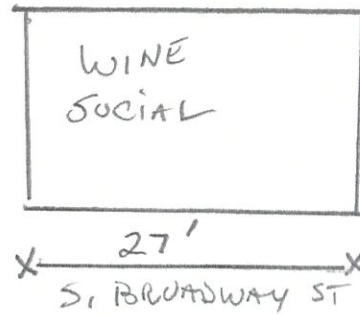
Print Name

Lloyd COE JR Vice Commander

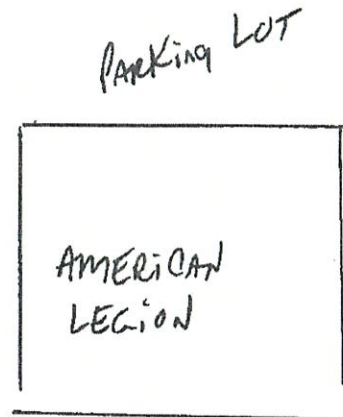
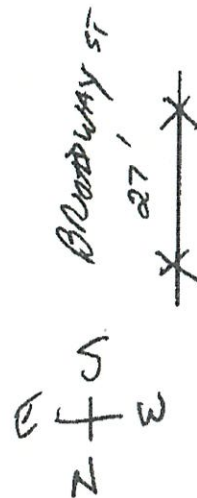


1 Boards
27'
SIDE WALK
ANDERSON ST

PUBLIC SIDEWALK
USE REQUEST

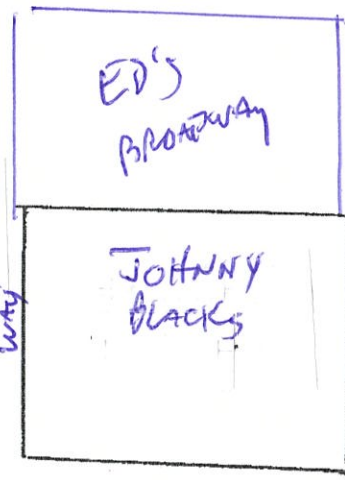
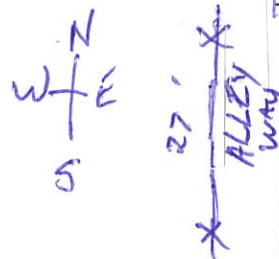


SHAD BOLT ST
X BOARDS X
27'



27'

S. BROADWAY ST



27'



Village of Lake Orion

21 E. Church Street
Lake Orion, Michigan 48362
Tel 248.693.8391
Fax 248.693.5874
www.lakeorion.org

HOLD HARMLESS AGREEMENT

FOR AND IN CONSIDERATION of the granting by the Village of Lake Orion to permit/allow *

DOWNTOWN LAKE ORION

CORN HOLE LEAGUE 7-9 PM Every Thurs Night 6-5-25-9-4-25

Activity/Event

Dates and Time

Various sidewalks areas in downtown - Purpose being to generate

General Description of Location

Foot Traffic + Awareness to downtown businesses + provide a fun outdoor activity for residents + customers

as requested by the undersigned, the undersigned does hereby agree to fully hold harmless, defend and indemnify the Village of Lake Orion, and all of its officers, officials, agents and employees, with respect to all claims, losses, damages, causes of action, judgments, costs and expenses, including reasonable attorney fees, whether or not the same are now known, liquidated, discovered, discoverable or justifiable, which may be asserted, brought or rendered against, incurred or suffered by, and/or imposed upon, the Village of Lake Orion and/or its officers, officials, agents and employees, by reason of or arising out of the grant or exercise of the rights stated above granted by the Village of Lake Orion to the undersigned.

Lloyd COE, JR VICE ^{SAL}
Applicant/Property Owner/Contractor Signature**

Lloyd COE ^{SAL}
Applicant/Property Owner/Contractor Printed Name

2/28/23
Date

Sonja Stout
Witness One Signature ***

Sonja Stout
Witness One Printed Name

Barbara A Rice
Witness Two Signature ***

Barbara A Rice
Witness Two Printed Name

* Applicant MUST provide information regarding what the activity is, date(s), times activity will be held and the areas (public sidewalks, streets, parking spaces, etc.) that are affected.

** If the activity is obstructing public right-of-way for work on private property, the property owner or contractor MUST provide their signature.

*** The signatures from two (2) witnesses are required.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
1/8/2025

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 Acrisure Great Lakes Partners Insurance Services 223 West Grand River Ave #1 Howell MI 48843	CONTACT NAME: Natalie Miller	
	PHONE (A/C, No, Ext): 248-698-7600	FAX (A/C, No): 248-698-7634
E-MAIL ADDRESS: nmiller@acrisure.com		
INSURER(S) AFFORDING COVERAGE		
INSURED American Legion Charlton Polan Post 233 164 S Broadway St Lake Orion MI 48362	INSURER A: Michigan Millers Mutual Insurance Company	NAIC # 14508
	INSURER B: Accident Fund National Insurance Company	12305
	INSURER C:	
	INSURER D:	
	INSURER E:	
INSURER F:		

COVERAGES **CERTIFICATE NUMBER:** 1625777312 **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	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			C0508972	1/8/2025	1/8/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			C0508972	1/8/2025	1/8/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	100120773	1/8/2025	1/8/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
A	Liquor Liability			C0508972	1/8/2025	1/8/2026	Liquor Occurrence 1,000,000 Liquor Aggregate 2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
The Village of Lake Orion is named additional insured with respect to general liability.

CERTIFICATE HOLDER

CANCELLATION

Village of Lake Orion 21 East Church Street Lake Orion MI 48362-3212	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

© 1988-2015 ACORD CORPORATION. All rights reserved.



Village of Lake Orion

21 E. Church Street
Lake Orion, Michigan 48362
Tel 248.693.8391
Fax 248.693.5874
www.lakeorion.org

TEMPORARY USE OF VILLAGE RIGHT-OF-WAY (PROPERTY, STREETS AND SIDEWALKS)

APPLICANT INFORMATION

Applicant Name: Lloyd COE / ANN GRITZINGER Business Name: American Legion / SONS OF American Legion
Applicant Phone #: 248-693-2782 Address: 164 S. BROADWAY
Applicant E-Mail: lloydcoe@SBCGLOBAL.NET City, State, Zip: LAKE ORION, MI 48362

TYPE OF TEMPORARY USE

Property/Right-of-way will be used for: ☐ Building Maintenance ☒ Business Sale/Event ☐ Utility Installation

Briefly Describe Use/Project Activity: GORN HOLE GAMES

RIGHT-OF-WAY (ROW) TO BE USED

Site Address: (Property adjacent to street/sidewalk/ROW) See ATTACHED sidewalk AREAS

Temporary Use of Right-of-Way Begins - Day: THURSDAY NIGHTS Time: 7PM - 9PM

Temporary Use of Right-of-Way Ends - Day: JUNE 5TH - SEPT 4TH Time: 7-9PM

ADDITIONAL REQUIRED INFORMATION

Please place your initials next to the items in the applicable column to acknowledge that all items are included with your application.

Required for Special Event Applications	Required for General Obstruction of Public ROW Only
<input checked="" type="checkbox"/> Anticipated Attendance	<input type="checkbox"/> Sketch of Project Area
<input checked="" type="checkbox"/> Event Map	<input type="checkbox"/> Hold Harmless Agreement
<input checked="" type="checkbox"/> Hold Harmless Agreement	<input type="checkbox"/> Barrier Plan/ Safe Route Plan
<input type="checkbox"/> License Agreement (if applicable - to be approved by Village Council)	Additional Items for Excavation / Construction on Public Property
<input type="checkbox"/> Parking Plan	<input type="checkbox"/> Application Fee
<input type="checkbox"/> Sign Application (if applicable)	<input type="checkbox"/> Insurance Certificate
<input checked="" type="checkbox"/> Insurance Certificate	<input type="checkbox"/> Copy of License
<input type="checkbox"/> Approvals from all applicable outside agencies	<input type="checkbox"/> \$1,000 Escrow Deposit
	<input type="checkbox"/> Construction Detail
	<input type="checkbox"/> Soil Erosion Sedimentation Control

I, the undersigned, understand that the Village Hold Harmless Agreement must be completed and must accompany this application. I understand I will be liable for damage done to any street or sidewalk and that I must fully cooperate with all Village departments. Failure to cooperate may lead to immediate revocation of this permit by the Village of Lake Orion.

Signature of Applicant: Royce SAL JR Vice Date: 2/28/25

*** To Be Completed by Village Administration ***

APPROVAL / COMMENTS BY

Police Chief:



Date:

4-2-25

Special Events: Condition of approval is that the applicant must make arrangements for barricades and detour signs at least one week prior to event. When Flint Street is closed, temporary STOP signs must be installed on both eastbound and westbound Shadbolt at Anderson Street and any other locations that the Police Chief deems necessary.

Fire Chief:



Date:

DPW Director:

Date:

4-1-25

Village Council:

Date:

OR

Village Manager:

Date:

Conditions of Approval:

VILLAGE OF LAKE ORION
21 E CHURCH
LAKE ORION, MI 48362-3287
United States
Phone : (248) 693-8391

Received From: SONS OF THE AMERICAN LEGION
233

Date: 03/11/2025 Time: 10:59:46 AM
Receipt: 0000048851
Cashier: HEDRICKC

ITEM REFERENCE	AMOUNT
-----	-----
APPL FEE APPLICATION FEE	
1 @ 25	\$25.00
UTSPROW UTIL PLAN SPECIAL EVENT ROW	
1 @ 75	\$75.00
-----	-----
TOTAL	\$100.00
CHECK 2545	\$100.00
Total Tendered:	\$100.00
Change:	\$0.00



Charter Township of Orion

3365 Gregory Rd., Lake Orion MI 48359
www.oriontownship.org

Fire Department

Phone: (248) 391-0304, ext. 2000

Fax: (248) 309-6993

April 7, 2025

Village of Lake Orion
21 E. Church Street
Lake Orion, MI 48362

RE: LO Downtown Cornhole League_2025- American Legion

Lake Orion Village Council,

It is the recommendation of the Orion Township Fire Department that the event, Lake Orion Downtown Cornhole League-2025, be approved with the following condition.

1. There shall be no parking in the Fire Station parking lot or along Anderson Street.

John Pender

John Pender, Assistant Fire Chief
Orion Township Fire Department