



# Special Event Permit Application

**CITY OF LONG LAKE**  
450 Virginia Avenue, PO Box 606  
Long Lake, MN 55356  
Phone / 952.473.6961

**FOR OFFICE USE ONLY**  
Amount Due: \$ 150.00  
Date Paid: 6/7/24  
 Check # 6740  
 Credit Card  
 Cash Receipt # \_\_\_\_\_  
Deposit Required?  
 Yes, Check # \_\_\_\_\_  
 No

- **REVIEW PAGE 3 for the Special Event Permit application fee schedule and application submittal checklist.**
- Complete this permit application form and submit to City Hall **at least 45 days prior to the event start date.** Permit application must be accompanied by all exhibits requested to be considered complete.

Event Name BUCKHORN DAYS 2024

Describe Location or Area of City Where Event Will Take Place NELSON PARK + CAR SHOW AT W. HENNEPIN PIONEER MUSEUM

# of Participants Expected to Attend Event 300-500

Describe Any Participation/Entry Fees to be Charged 0

### Event Dates/Times Proposed

**\*\* List all Event Dates/Times Below \*\***

| Day of Week | Date          | Start Time | End Time |
|-------------|---------------|------------|----------|
| SATURDAY    | JULY 13, 2024 | 12 NOON    | 11 PM    |
|             |               |            |          |
|             |               |            |          |

**Event Type** (CHECK ALL THAT APPLY)

Parade     Festival     Run/Walk     Sporting Event     Block Party     Private Party

Other, Explain \_\_\_\_\_

**Event Includes** (CHECK ALL THAT APPLY)

Liquor Service     Food Service     Bingo/Raffles     Live Music     Amplified Audio

Animals     Pedestrians/Runners     Bicycles     Floats     Motor Vehicles, # Expected 40

Other Vehicles, Explain \_\_\_\_\_

Games, Amusement Devices or Carnival Equipment, Describe JUMPY HOUSE INFLATABLES, CAR SHOW, MUSIC BANDS, GOLF PUTTING CONTEST, DOG RACES, BEAN BAG TOSS

Will Parking for Event Exceed On Site Parking Facilities Available?

Yes, WRITTEN PERMISSION FROM AREA PROPERTY OWNERS ALLOWING USE OF THEIR PROPERTY FOR PARKING IS ATTACHED

No MID-COUNTRY BANK

Traffic Control Personnel Provided by Whom WAYZATA P.D.

Delineation Equipment (Barricades, Signs, Traffic Cones, No Parking Signs, etc.) Provided by Whom LONG LAKE PUBLIC WORKS + LONG LAKE CHAMBER OF COMM.

**Street(s) to be Closed** (A MAP SHOWING THE SPECIFIC ROUTE OR AREA TO BE CLOSED **MUST BE ATTACHED**)  
SUMES STREET

**Site Map and Detailed Description of Event Required**

**A DETAILED SITE MAP OF THE EVENT AREA AND DETAILED EVENT DESCRIPTION NARRATIVE MUST BOTH BE ATTACHED TO THIS APPLICATION.** The Site Map should show locations of food and beverage vendors (noting controlled entry to any alcoholic beverage service areas), where activities will be taking place, and where any temporary infrastructure such as tents or bandstand facilities will be installed.

**Insurance Carrier for Event**

A Certificate of Insurance naming the City of Long Lake as an additional insured **must be submitted at least 10 days prior to the event start date.** Amount of insurance required is \$1,000,000.

Name of Insurance Carrier Advantage 1 Insurance Policy Number 08493283

**Chairperson, Event Manager, or Director (Person Responsible for Duties of Permit Holder)**

Full Name MARTY SUNDRIER Daytime Phone 612 237 3843

Alternate Phone \_\_\_\_\_ Email Address martyexplore@msn.com

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

**Organization Information**

Organization Name LONG LAKE AREA CHAMBER OF COMMERCE

Mailing Address PO BOX 662

City, State, Zip LONG LAKE MN 55356

Phone 612 237 3843 Fax \_\_\_\_\_

By signature below, applicant/event organizer agrees to abide by any and all conditions of Special Event Permit approval, if approved; and hereby agrees to indemnify, hold harmless, and exempt the City of Long Lake, its officers, employees, and agents from any and all claims, costs and liabilities, including reasonable attorneys' fees, in any way related to the applicant's Special Event as approved.

**X Signature of Applicant** [Signature] Pres. Date 6-6-2024

\*\*\*\* FOR CITY USE ONLY \*\*\*\*

APPLICATION SUBMITTED WAS:  Complete With Exhibits [ ] Incomplete - Date Completed \_\_\_\_\_

**Review by Department Head or Designee**

Public Works Reviewed By SD/SJO Date 6/12/24

Fire Department Reviewed By MH/PGM Date 6/12/24

Police Department Reviewed By MH/SJO Date 6/12/24

Special Event Permit Approved By \_\_\_\_\_ (CITY CLERK OR AUTHORIZED DESIGNEE)

Date Approved \_\_\_\_\_

PERMIT # S2024-05

**Conditions of Permit Approval**

Permit Conditions Detailed in Attached Letter Dated 6/11/24

[ ] Permit Conditions Listed Below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



June 12, 2024

Marty Schneider, Event Organizer  
Long Lake Area Chamber of Commerce  
PO Box 662  
Long Lake, MN 55356

**RE: SPECIAL EVENT PERMIT CONDITIONS, PERMIT #S2024-05**  
Buckhorn Days 2024 / Saturday, July 13, 2024 (12:00 noon – 11:00 pm)

Dear Event Organizer:

Your application for a Special Event Permit for Buckhorn Days 2024 is hereby approved, subject to the conditions listed below. The Wayzata Police Department and its officers, acting on behalf of the City of Long Lake, are empowered to revoke this Special Event Permit at any time for any safety concerns that are not immediately resolved by the permit holder or a representative of the permit holder. This revocation shall cause the immediate cancellation of the event originally authorized by this Permit.

- [ ] The Long Lake Fire Department and Wayzata Police Department, acting on behalf of the City of Long Lake, may impose additional conditions to this Permit by email correspondence of the Fire or Police Chief as needed.
- [ ] Event organizer is required to contact Wayzata Police Chief Marc Schultz at 952-404-5340 to discuss event preparation and to work with Buckhorn Days volunteer staff. It is a requirement of this permit that a Wayzata Police Department licensed officer be contracted for and present on site from 6:00 pm through the duration of the event; or alternatively, in lieu of contracting for an officer, the Chamber of Commerce may provide the Wayzata Police Department with a booth site for the duration of the event at no cost. The event organizer is required to contact Chief Schultz or his designee to arrange compliance with this condition.
- [ ] Barricades to block off access to Lake Street and Symes Street during the event must be temporary structures and no damage to the street will be allowed. Event organizer is required to contact the Long Lake Public Works Department to request loan of barricades and traffic cones for the event. Access must be made available to any emergency vehicles and property owners if needed. Fire hydrants must remain free of obstruction.
- [ ] Event organizer and event staff will be responsible to organize and provide traffic control needed during the event, with Police available to assist when an officer is present.

**SPECIAL EVENT PERMIT CONDITIONS, PERMIT #S2024-05**

Buckhorn Days 2024 / Saturday, July 13, 2024 (12:00 noon – 11:00 pm)

Page 2 of 3

- [ ] Written permission from property or business owner(s) for off-site parking locations is required to be submitted to the City Clerk *by no later than Wednesday, July 10.*
- [ ] A thorough cleanup of Nelson Lakeside Park must occur within 24 hours following the event's usage of the park on Saturday, July 13.
- [ ] No event-related vehicles or trailers may be driven or parked on the grass within any Nelson Lakeside Park property without prior approval from the Long Lake Public Works Director. Vendors and event-related vehicles or equipment may not damage asphalt on any streets or paved parking areas.
- [ ] The event organizer will be responsible to make adequate portable restroom facilities available for the anticipated attendance. A minimum of three (3) additional portable restroom units is required, unless otherwise approved by the City Clerk.
- [ ] The event organizer will be responsible to contract for additional waste containers to be provided at Nelson Lakeside Park. The waste container provider employed by the event must be consulted as to the appropriate number and size of waste containers needed for the 300 to 500 event attendees expected.
- [ ] A 1 Day to 4 Day Temporary On Sale Liquor License must be obtained by the Orono Lions Club to permit alcohol sales in Nelson Lakeside Park during Buckhorn Days 2024. It is a requirement of this permit that all liquor service and distribution be discontinued at or before 10:00 pm.
- [ ] Controlled access to the alcoholic beverage sales area must be provided. The alcohol sales area must be clearly fenced off with limited points of entry provided, preferably no more than two. ID's must be checked for anyone who appears 35 years of age or younger. Wristbands are required for alcoholic beverage service. Alcoholic beverages may not leave Nelson Lakeside Park property at any time. It is a requirement of this permit that "no alcoholic beverages beyond this point" temporary signage be posted at the perimeter of the park in various locations.
- [ ] Any persons working alcohol sales for Buckhorn Days 2024 may not be under the influence of or consume alcoholic beverages while staffing their location.
- [ ] Long Lake City Ordinance requires that dogs on park property be restrained by a leash not exceeding six (6) feet in length. During the event, all dogs required to be leashed while on Nelson Lakeside Park property, except while racing the in the designated, roped off, controlled race area during the Dog Races.
- [ ] A Noise Variance Permit must be obtained from the City to allow the use of sound amplification equipment for broadcasting announcements and live entertainment over the duration of the event.

**SPECIAL EVENT PERMIT CONDITIONS, PERMIT #S2024-05**

Buckhorn Days 2024 / Saturday, July 13, 2024 (12:00 noon – 11:00 pm)

Page 3 of 3

- [ ] The event organizer is responsible to contact the Long Lake Public Works Director at 612-237-9520 to arrange for any electrical power needs for the event.
  
- [ ] A Certificate of General Liability Insurance must be submitted to the City Clerk *by no later than Wednesday, July10.*

Please be advised that by acceptance of Special Event Permit #S2024-05, the permit holder, on behalf of any and all organizations and private persons, grants authority to operate under the Special Event Permit, and agrees to indemnify and hold harmless the City of Long Lake from all claims arising from said event. The permit holder, all organizations and private persons exercising authority under this Permit, do waive and release all claims against the City of Long Lake, its officers or employees for any damage to person or property arising from the exercise of privileges granted by this Permit and agrees to hold harmless the City of Long Lake, its employees and officers from any such claim.

Thank you in advance for your cooperation, and best wishes for a successful event.

Sincerely,



Jeanette Moeller  
City Clerk

## **Buckhorn Days 2024 Schedule**

|                       |   |
|-----------------------|---|
| 11:00 am – 4:00 pm    | Car Show, Located at Pioneer Museum           |
| 12:00 noon            | Vendors, Food and Refreshments Open           |
| 12:00 noon – 8:00 pm  | Kid Zone & Inflatables Open                   |
| 3:00 pm               | Doggie Races (Registration Opens at 2:00 pm)  |
| 3:00 pm – 6:00 pm     | Bean Bag Toss and Putting Contest             |
| 12:00 noon – 11:00 pm | Live Musical Entertainment (Variety of Bands) |

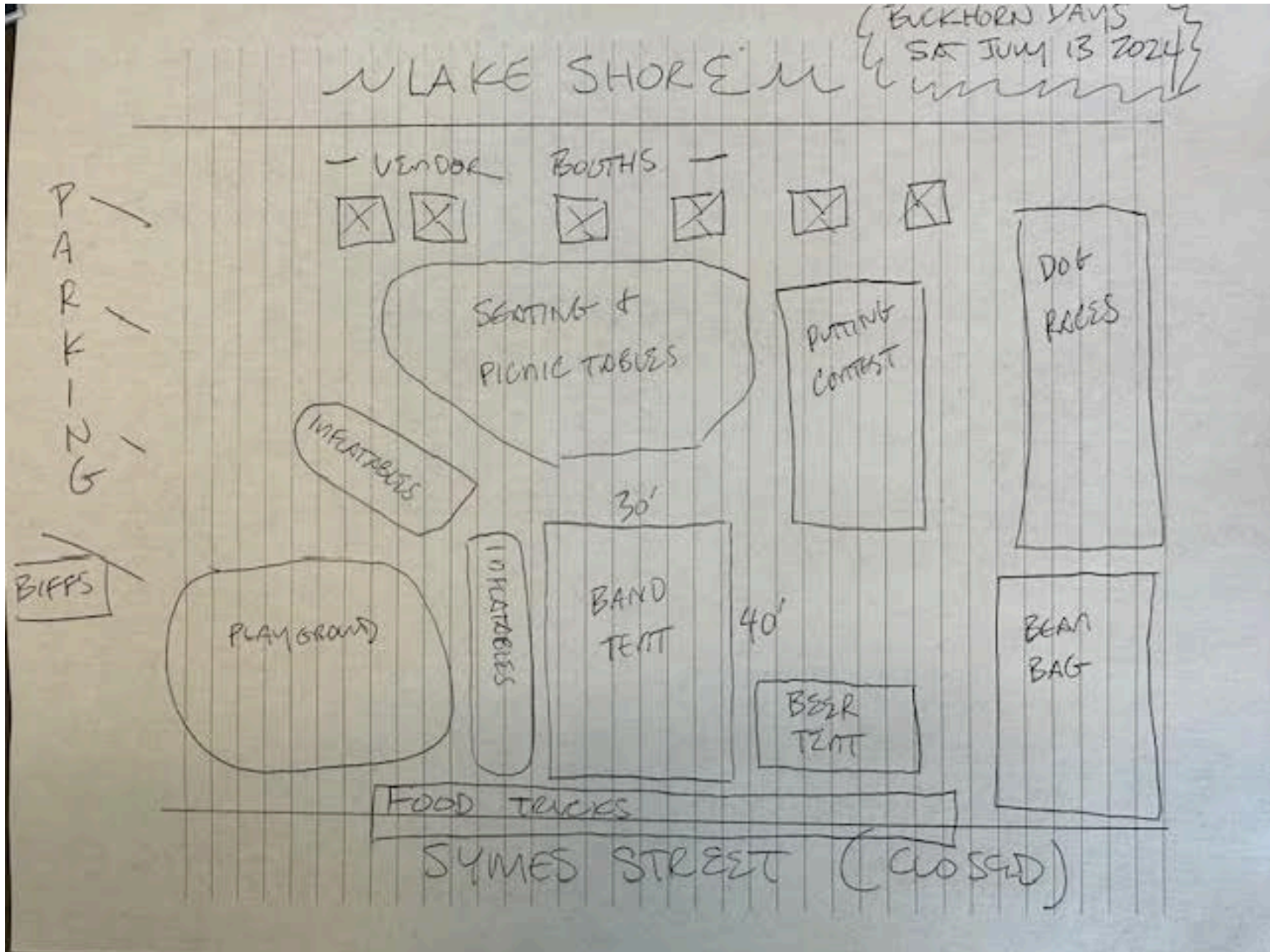
*Please note that actual start hours of each event may be subject to minor changes as the final event schedule is completed.*

06/07/2024

## Buckhorn Days

### Band Schedule

- |   |          |
|---|----------|
| <b>1. Echo - (4 piece band?)</b> 12:00pm – 1:30pm       | 1.5 hrs  |
| (Band Switch) - 1:30pm - 1:45pm                         |          |
| <b>2. Brady - Solo Artist</b> 1:45pm – 2:45pm           | 1 hr     |
| (Band Switch) - 2:45pm - 3:15pm                         |          |
| <b>3. Double Down - (5 piece band)</b> 3:15pm – 4:45pm  | 1.5 hrs  |
| (Band Switch) - 4:45pm - 5:15pm                         |          |
| <b>4. The Abiders - (5 piece band?)</b> 5:15pm – 7:00pm | 1.75 hrs |
| (Band Switch) - 7:00pm - 7:30pm                         |          |
| <b>5. Triggerfish - (6 piece band)</b> 7:30pm – 10:30pm | 3hrs     |







Minnesota Department of Public Safety  
 Alcohol and Gambling Enforcement Division  
 445 Minnesota Street, Suite 1600, St. Paul, MN 55101  
 651-201-7507 TTY 651-282-6555

**APPLICATION AND PERMIT FOR A 1 DAY  
 TO 4 DAY TEMPORARY ON-SALE LIQUOR LICENSE**

|                      |                      |                   |
|----------------------|----------------------|-------------------|
| Name of organization | Date of organization | Tax exempt number |
| Orono Lions Club     | 1962                 | 41-6038969        |

|                                    |           |       |          |
|------------------------------------|-----------|-------|----------|
| Organization Address (No PO Boxes) | City      | State | Zip Code |
| PO Box 65                          | Long Lake | MN    | 55356    |

|                                   |                |            |
|-----------------------------------|----------------|------------|
| Name of person making application | Business phone | Home phone |
| Bradley Hansen                    | 612-965-0153   |            |

|                  |   |  |   |
|------------------|---|--|---|
| Date(s) of event | Type of organization  | <input type="checkbox"/> Microdistillery | <input type="checkbox"/> Small Brewer     |
| July 13, 2024    | <input checked="" type="checkbox"/> Club <input checked="" type="checkbox"/> Charitable | <input type="checkbox"/> Religious       | <input type="checkbox"/> Other non-profit |

|                             |       |       |          |
|-----------------------------|-------|-------|----------|
| Organization officer's name | City  | State | Zip Code |
| Bradley Hansen, President   | Orono | MN    | 55356    |

|                             |           |       |          |
|-----------------------------|-----------|-------|----------|
| Organization officer's name | City      | State | Zip Code |
| Dave Potter, Vice President | Long Lake | MN    | 55356    |

|                             |           |       |          |
|-----------------------------|-----------|-------|----------|
| Organization officer's name | City      | State | Zip Code |
| Roger Adams, Treasurer      | Long Lake | MN    | 55356    |

Location where permit will be used. If an outdoor area, describe.  
 During the Buckhorn Days festival at Nelson Lakeside Park, 1860 Symes Street, Long Lake, MN

If the applicant will contract for intoxicating liquor service give the name and address of the liquor license providing the service.  
 N/A

If the applicant will carry liquor liability insurance please provide the carrier's name and amount of coverage.

**APPROVAL**

APPLICATION MUST BE APPROVED BY CITY OR COUNTY BEFORE SUBMITTING TO ALCOHOL AND GAMBLING ENFORCEMENT

City or County approving the license

Date Approved

Fee Amount

Permit Date

Event in conjunction with a community festival  Yes  No

City or County E-mail Address

Current population of city

Please Print Name of City Clerk or County Official

Signature City Clerk or County Official

**CLERKS NOTICE: Submit this form to Alcohol and Gambling Enforcement Division 30 days prior to event**

**No Temp Applications faxed or mailed. Only emailed.**

**ONE SUBMISSION PER EMAIL, APPLICATION ONLY.**

**PLEASE PROVIDE A VALID E-MAIL ADDRESS FOR THE CITY/COUNTY AS ALL TEMPORARY PERMIT APPROVALS WILL BE SENT BACK VIA EMAIL. E-MAIL THE APPLICATION SIGNED BY CITY/COUNTY TO AGE.TEMPORARYAPPLICATION@STATE.MN.US**



# Noise Variance Permit Application

**CITY OF LONG LAKE**  
450 Virginia Avenue, PO Box 606  
Long Lake, MN 55356  
Phone / 952.473.6961

- Complete this permit application form and submit to City Hall **at least 45 days prior to the event start date.** Permit applications must be reviewed by staff and presented to City Council for approval and authorization to issue.

## Applicant Information (Person Responsible for Duties of Permit Holder)

Organization Name (If Applicable) Long Lake Area Chamber of Commerce

Contact Name Marty Schneider Daytime Phone 612-237-3843

Alternate Phone \_\_\_\_\_ Email Address martyexplore@msn.com

Mailing Address PO Box 662

City, State, Zip Long Lake, MN 55356

## Noise Variance Request

Describe in detail the activity (live music, sound amplification for an event, construction, etc.) requiring a variance from the City's noise ordinance on the lines below:

Use of sound amplification equipment for announcements during the event, and for live musical entertainment.

\_\_\_\_\_  
\_\_\_\_\_

### \*\* PLEASE LIST ALL DATES AND REQUESTED HOURS FOR PROPOSED NOISE ACTIVITY BELOW \*\*

| Day of Week | Date          | Start Time | End Time |
|-------------|---------------|------------|----------|
| Saturday    | July 13, 2024 | 12:00 noon | 10:30pm  |
|             |               |            |          |
|             |               |            |          |

## Applicant Signature

Permit holder is required to have an individual present at all times to monitor sound levels and assure operation within reasonable limits. The applicant / organization acknowledges that the Wayzata Police Department and its officers, acting on behalf of the City of Long Lake, are empowered to revoke this Noise Variance Permit at any time for any concerns that are not immediately resolved by the permit holder or a representative of the permit holder. This revocation shall cause the immediate termination of the noise originally authorized by this permit.

X Signature of Applicant *M. Schneider* Date 6/6/24

### \*\*\*\* FOR CITY USE ONLY \*\*\*\*

Noise Variance Permit Approved By \_\_\_\_\_ (CITY CLERK OR AUTHORIZED DESIGNEE)

Date of City Council Approval \_\_\_\_\_

## Conditions of Permit Approval

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/10/2024

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).

| <b>PRODUCER</b><br><br><b>Advantage 1 Insurance</b><br><b>3801 N 3rd Street</b><br><b>SAINT CLOUD, MN 56303</b>    | <b>CONTACT NAME:</b> Cheryl Johnson<br><b>PHONE (A/C, No, Ext):</b> (320)252-6650 <b>FAX (A/C, No):</b> (320)252-7536<br><b>E-MAIL ADDRESS:</b> cheryl@advantageoneins.com  |                               |        |   |              |                   |  |                   |  |                   |  |                   |  |                   |
|--|---|-------------------------------|--------|---|--------------|-------------------|--|-------------------|--|-------------------|--|-------------------|--|-------------------|
|  | <table border="1"> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td><b>INSURER A: Auto Owners Insurance</b></td> <td><b>32700</b></td> </tr> <tr> <td><b>INSURER B:</b></td> <td></td> </tr> <tr> <td><b>INSURER C:</b></td> <td></td> </tr> <tr> <td><b>INSURER D:</b></td> <td></td> </tr> <tr> <td><b>INSURER E:</b></td> <td></td> </tr> <tr> <td><b>INSURER F:</b></td> <td></td> </tr> </table> | INSURER(S) AFFORDING COVERAGE | NAIC # | <b>INSURER A: Auto Owners Insurance</b> | <b>32700</b> | <b>INSURER B:</b> |  | <b>INSURER C:</b> |  | <b>INSURER D:</b> |  | <b>INSURER E:</b> |  | <b>INSURER F:</b> |
| INSURER(S) AFFORDING COVERAGE  | NAIC #  |                               |        |   |              |                   |  |                   |  |                   |  |                   |  |                   |
| <b>INSURER A: Auto Owners Insurance</b>  | <b>32700</b>  |                               |        |   |              |                   |  |                   |  |                   |  |                   |  |                   |
| <b>INSURER B:</b>  |   |                               |        |   |              |                   |  |                   |  |                   |  |                   |  |                   |
| <b>INSURER C:</b>  |   |                               |        |   |              |                   |  |                   |  |                   |  |                   |  |                   |
| <b>INSURER D:</b>  |   |                               |        |   |              |                   |  |                   |  |                   |  |                   |  |                   |
| <b>INSURER E:</b>  |   |                               |        |   |              |                   |  |                   |  |                   |  |                   |  |                   |
| <b>INSURER F:</b>  |   |                               |        |   |              |                   |  |                   |  |                   |  |                   |  |                   |
| <b>INSURED</b><br><br><b>Long Lake Chamber of Commerce</b><br><b>PO Box 662</b><br><b>Long Lake, MN 55356-0662</b> |   |                               |        |   |              |                   |  |                   |  |                   |  |                   |  |                   |

**COVERAGES**      **CERTIFICATE NUMBER: 90010484-190866**      **REVISION NUMBER: 6**

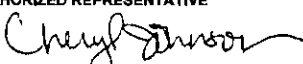
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE 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"/> <b>COMMERCIAL GENERAL LIABILITY</b><br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br><br>GENL AGGREGATE LIMIT APPLIES PER:<br><input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC<br>OTHER: |           |          | 08493283      | 09/28/2023              | 09/28/2024              | EACH OCCURRENCE \$ <b>1,000,000</b><br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$ <b>50,000</b><br>MED EXP (Any one person) \$ <b>5,000</b><br>PERSONAL & ADV INJURY \$ <b>1,000,000</b><br>GENERAL AGGREGATE \$ <b>2,000,000</b><br>PRODUCTS - COMP/OP AGG \$ <b>2,000,000</b><br>\$ |
|          | <b>AUTOMOBILE LIABILITY</b><br><input type="checkbox"/> ANY AUTO<br><input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY   |           |          |               |                         |                         | COMBINED SINGLE LIMIT (Ea accident) \$<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$<br>\$   |
|          | <input type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR<br><input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE<br><input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$  |           |          |               |                         |                         | EACH OCCURRENCE \$<br>AGGREGATE \$<br>\$  |
|          | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below   |           | Y/N      | N/A           |                         |                         | <input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER<br>E.L. EACH ACCIDENT \$<br>E.L. DISEASE - EA EMPLOYEE \$<br>E.L. DISEASE - POLICY LIMIT \$  |

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

Event: Buckhorn Day 7/13/2024  
 Event: Corn Days Parade 08/10/2024

**CERTIFICATE HOLDER**      **CANCELLATION**

|   |   |
|---|---|
| <b>City of Long Lake</b><br><b>450 Virginia Ave</b><br><b>Long Lake, MN 55356</b> | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.<br><br><b>AUTHORIZED REPRESENTATIVE</b><br><br>(CLJ) |
|---|---|

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